



## Benefit Guide for the Part-Time Employees of Oak Harbor Freight Lines, Inc.



**January 1, 2020 Through December 31, 2020**

## Welcome!

Welcome to the Oak Harbor Freight Lines team. As a valuable team member, we are pleased to offer the following benefits to our Part Time Employees.

In the following pages, you will learn more about the benefits Oak Harbor Freight Lines offers. You will also see how choosing the right combination of benefits can help protect you and your family's health and future.

## Eligibility

Part-Time Employees working at least 20 hours per week are eligible for benefits first of the month following 60 days. All applicable enrollment forms must be completed before your coverage begins.

Children are eligible for benefits up to age 19. If they are full time students or an unmarried handicapped dependent child, you can enroll them up to the age of 26. You are responsible for dropping them when they age out, this is not automatically done.

Legal Spouses may also eligible for any benefit you also sign up for.

## When You Can Enroll

You can sign up for Benefits at any of the following times:

- After completing initial eligibility period
- During the annual open enrollment period
- Within 31 days of a qualified life change event (see below)

If you do not enroll at the above times, you must wait for the next annual open enrollment period. You may be subject to extra medical questionnaires at this time.

## Making Changes

Generally, you can only change your benefit elections during the annual benefits enrollment period. However, you may be able to change some of your benefit elections upon the occurrence of certain change in status events, provided you properly notify your Employer. These changes in status events may include:

- Your marriage
- Your divorce or legal separation
- Birth or adoption of an eligible child
- Death of your spouse or covered child
- Change in your spouse's work status that affects his or her benefits
- Change in your work status that affects your benefits
- Change in residence or work site that affects your eligibility for coverage
- Change in your child's eligibility for benefits
- Receiving Qualified Medical Child Support Order (QMCSO)

If you have a family status change, you must timely notify your HR Department and complete the necessary forms. For more information refer to your benefits booklet.

## Contact Information

Carrier	Plan	Website	Phone Number
UNUM STD #617856 Vol Life #617857	Supplemental Life/AD&D and Short Term Disability	<a href="http://www.unum.com">www.unum.com</a>	800-421-0344
Unum	Supplemental Voluntary Accident, Critical Illness and Hospital	<a href="http://www.unum.com">www.unum.com</a>	800-635-5597
Wellspring Family Services	Employee Assistance Program	<a href="http://www.wellspringeap.org">www.wellspringeap.org</a> Username: oak harbor freight lines	800-553-7798
Paradigm	401(k)	<a href="http://www.ascensus.com">www.ascensus.com</a>	800-527-4560

You can also contact Oak Harbor's Human Resources Department by emailing [benefits@oakh.com](mailto:benefits@oakh.com) or calling 253-288-8300 and asking for a benefits representative.

## Benefit Resource Center

The Benefit Resource Center is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday 6:00 AM to 6:00 PM (Pacific Time). If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

**Phone: (866) 4ourBRC (468-7272); Fax: (877) 678-5840**  
**Email: [brcwest@usi.com](mailto:brcwest@usi.com)**

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## Voluntary Life and AD&D Insurance - Unum

Oak Harbor Freight Lines offers Voluntary Life and AD&D insurance to all eligible Employees...paid by Employees via monthly payroll deductions on a post-tax basis. This amount is typically deducted on your 22<sup>nd</sup> paycheck each month. This plan offers the ability to port your coverage should you no longer work with Oak Harbor. Please be sure to select a beneficiary. Your beneficiary may be updated at any time.

Benefit Amount	
Employee	Up to \$500,000 in \$10,000 increments not to exceed 5 times your earnings*
Spouse	Up to \$500,000 in \$5,000 increments, not to exceed Employee amount
Child(ren)	Birth to 6 months: \$1,000 6 months to age 19, or 26 if full-time student: Up to \$10,000 in \$2,000 increments. <b>You are responsible for dropping your dependent at 19 or 26 yrs. of age. This is not done automatically by UNUM.</b>
Guarantee Issue Amount**	
Employee: \$150,000; Spouse \$25,000; Child(ren): \$10,000	

**\*Your amount of life insurance will begin to reduce when you reach age 70. The amount of your spouse's life insurance will reduce by the same percentage and at the same time your life insurance reduces.**

### \*\*Guarantee Issue

All Employees have a one-time opportunity to enroll up to certain limits without providing health information. These are referred to as "Guarantee Issue" limits. If you want coverage over the amount you are guaranteed, you will need to provide answers to health questions.

Life and AD&D rates are based on your age immediately prior to and including the plan effective date of 1/1/2020.

Term Life Rates	(amt. of coverage) 1	(divide by amt. shown) 2	(multiply by rate below) 3	(monthly cost) 4
Employee	\$ _____,000	÷ \$10,000=\$ _____	X \$ _____	= \$ _____
Spouse	\$ _____,000	÷ \$5,000=\$ _____	X \$ _____	= \$ _____
Child	\$ _____,000	÷ \$2,000=\$ _____	X \$ _____	= \$ _____
<b>TOTAL COST:</b>				\$ _____

Employee Age	Cost per \$10,000 of coverage
15-24	\$0.64
25-29	\$0.62
30-34	\$0.78
35-39	\$1.09
40-44	\$1.68
45-49	\$2.67
50-54	\$3.97
55-59	\$5.82
60-64	\$7.71
65-69	\$10.84
70-74	\$20.52
75+	\$63.42

Spouse Age	Cost per \$5,000 of coverage
15-24	\$0.13
25-29	\$0.19
30-34	\$0.28
35-39	\$0.44
40-44	\$0.66
45-49	\$1.01
50-54	\$1.50
55-59	\$2.14
60-64	\$2.87
65-69	\$4.18
70-74	\$7.89
75+	\$24.40

Child(ren) coverage
\$0.66 per \$2,000

AD&D Rates	(amt. of coverage) 1	(divide by amt. shown) 2	(multiply by rate below) 3	(monthly cost) 4
Employee	\$ _____,000	÷ \$10,000=\$ _____	X \$0.325	= \$ _____
Spouse	\$ _____,000	÷ \$5,000=\$ _____	X \$0.170	= \$ _____
Child	\$ _____,000	÷ \$2,000=\$ _____	X \$0.032	= \$ _____
<b>TOTAL COST:</b>				\$ _____

AD&D Rates are per \$10,000 of coverage for Employee; per \$5,000 of coverage for Spouse and per \$2,000 of coverage for child(ren).

## Voluntary Short Term Disability Insurance - Unum

Oak Harbor Freight Lines offers Short Term Disability insurance to all eligible Employees...paid by Employees via monthly payroll deductions. Deductions will be taken out on a post-tax basis and is typically deducted on your 22<sup>nd</sup> paycheck each month. This plan offers the ability to port your coverage should you no longer work with Oak Harbor.

Benefit	
Waiting Period	Benefits begin after a 14-day elimination (waiting) period of disability from the day your disabling condition occurs
Benefit	60% of your weekly income, up to a maximum benefit of \$2,000 per week
Duration	Up to a maximum of 24 weeks

### Guarantee Issue

All Employees have a one-time opportunity to enroll without providing health information. If you do not enroll during your eligibility enrollment period, you will have to wait for a future annual enrollment period to apply. At that time, you will need to answer health questions on an Evidence of Insurability form.

**Please Note:** In the event of a disability claim, payments received under this plan would not be considered taxable income.

**For Washington Employees:** Your monthly rates are lower as Washington State has implemented a state paid family and medical leave program.

**For Washington & California Employees:** These two states offer disability and paid leave; as such, any benefit allowed under this STD plan will work together with the state benefits. The two plans will offset each other, you will not receive 100% of both benefits.

STD rates are based on your age immediately prior to and including the plan effective date of 1/1/2020.

### 1. Calculate your weekly disability benefit

$$\frac{\$ \text{ (your annual earnings) }}{52} = \$ \text{ (your weekly earnings) } \times 60\% = \$ \text{ (60\% of weekly income covered) } = \$ \text{ (max weekly benefit available) }$$

### 2. Calculate your monthly cost

$$\frac{\$ \text{ (weekly benefit) }}{10} = \$ \text{ (your rate) } \times \$ \text{ (monthly cost) }$$

#### Employees in Washington

Rates per \$10 of weekly benefit	
Age	Rates
15-24	\$0.19
25-29	\$0.20
30-34	\$0.19
35-39	\$0.20
40-44	\$0.25
45-49	\$0.30
50-54	\$0.35
55-59	\$0.46
60-64	\$0.60
65+	\$0.68

#### Employees in All Other States

Rates per \$10 of weekly benefit	
Age	Rates
15-24	\$0.34
25-29	\$0.36
30-34	\$0.35
35-39	\$0.37
40-44	\$0.46
45-49	\$0.54
50-54	\$0.63
55-59	\$0.84
60-64	\$1.08
65+	\$1.23

## Voluntary Accident, Critical Illness and Hospital Insurance – Unum

Oak Harbor Freight Lines offers additional supplemental benefits through Unum to complement their overall benefit plan offerings. These voluntary benefits include Accident, Critical Illness and Hospital insurance. These benefits are paid monthly by Employees via payroll deductions on a post-tax basis and is typically deducted on your 22<sup>nd</sup> paycheck each month. These plans offer the ability to port your coverage should you no longer work with Oak Harbor.

### ACCIDENT INSURANCE

This policy can pay a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur on and off the job, and includes a range of incidents, from common events to more serious events. It can help with out of pocket costs such as co-pays and deductibles. There are no pre-existing clauses or wait periods with this plan.

#### Guarantee Issue

You are guaranteed base coverage, without answering health questions. If you and do not enroll during your eligibility enrollment period, you will have to wait for a future annual enrollment period to apply.

Coverage is available for you, your spouse and your dependent children to age 26. You must enroll in order to also enroll any dependents.

### Monthly Rates for Accident Insurance

You	\$11.57	You and your Child(ren)	\$21.60
You and your Spouse	\$18.71	You, your Spouse and Child(ren)	\$28.74

### CRITICAL ILLNESS INSURANCE

This policy can pay you a lump-sum benefit at the first diagnosis of a covered illness. It can be used however you choose – even for expenses life co-pays, mortgage, rent or childcare.

This plan offers a \$50/year wellness benefit paid to the Employee when health screening is completed. Eligibility begins 30 days after the coverage effective date.

#### Guarantee Issue

All Employees have a one-time opportunity to enroll without providing health information. If you do not enroll during your eligibility enrollment period, you will have to wait for a future annual enrollment period to apply. At that time, you will need to answer health questions on an Evidence of Insurability form.

#### Covered illnesses under the base plan include:

- Heart attack
- Stroke
- Major organ transplant
- Permanent paralysis due to covered accident
- End-stage renal (kidney) failure
- Coronary artery bypass surgery (pays 25% of the lump-sum benefit)

#### Illness covered by the additional Cancer Benefit include:

- Cancer
- Carcinoma in situ (pays 25% of lump-sum benefit)

No benefits are payable for cancer or carcinoma in situ if the date of diagnosis occurs during the first 30 days of your coverage effective date.



Benefit Amount	
Employee	\$5,000 - \$50,000 (minimum \$25,000 for Washington residents) in \$1,000 increments
Spouse (age 16-64)	\$5,000 - \$30,000 in \$1,000 increments
Child(ren)	Birth to age 26: <b>You are responsible for dropping your dependent at 26 yrs. of age. This is not done automatically by UNUM.</b> \$2,500 or \$5,000 – one plan covers all children

**How much does it cost?** Rates are based on your age, tobacco status and vary by state. Please refer to the following charts for information. All amounts below are calculated on a monthly basis. Rates below also apply for the Spouse benefit. Actual billed amounts may vary, the charts below are for illustrative purposes only.

**BELOW ARE THE MONTHLY RATES FOR EMPLOYEES IN CALIFORNIA**

California Employee - Based on \$10,000 Benefit Amount				
Age	Non-Tobacco		Tobacco	
	Critical Illness	Cancer Rider	Critical Illness	Cancer Rider
16-29	\$ 3.87	\$ 1.91	\$ 5.08	\$ 3.21
30-39	\$ 5.95	\$ 3.34	\$ 9.07	\$ 5.64
40-49	\$ 9.98	\$ 6.81	\$ 17.56	\$ 14.00
50-59	\$ 16.04	\$ 12.22	\$ 30.65	\$ 23.01
60-64	\$ 24.75	\$ 19.03	\$ 45.86	\$ 37.31

California Employee - Based on \$20,000 Benefit Amount				
Age	Non-Tobacco		Tobacco	
	Critical Illness	Cancer Rider	Critical Illness	Cancer Rider
16-29	\$ 5.95	\$ 3.82	\$ 8.37	\$ 6.42
30-39	\$ 10.15	\$ 6.63	\$ 16.35	\$ 11.23
40-49	\$ 18.17	\$ 13.61	\$ 33.38	\$ 28.04
50-59	\$ 30.34	\$ 24.40	\$ 59.55	\$ 46.02
60-64	\$ 47.76	\$ 38.01	\$ 89.97	\$ 74.62

California Employee - Based on \$30,000 Benefit Amount				
Age	Non-Tobacco		Tobacco	
	Critical Illness	Cancer Rider	Critical Illness	Cancer Rider
16-29	\$ 8.07	\$ 5.72	\$ 11.67	\$ 9.62
30-39	\$ 14.35	\$ 9.93	\$ 23.67	\$ 16.82
40-49	\$ 26.36	\$ 20.41	\$ 49.15	\$ 42.04
50-59	\$ 44.64	\$ 36.62	\$ 88.45	\$ 69.03
60-64	\$ 70.77	\$ 57.03	\$134.04	\$111.93

California Employee - Based on \$40,000 Benefit Amount				
Age	Non-Tobacco		Tobacco	
	Critical Illness	Cancer Rider	Critical Illness	Cancer Rider
16-29	\$ 10.15	\$ 7.63	\$ 14.96	\$ 12.83
30-39	\$ 18.56	\$ 13.22	\$ 30.95	\$ 22.41
40-49	\$ 34.55	\$ 27.22	\$ 64.97	\$ 56.03
50-59	\$ 58.94	\$ 48.84	\$ 117.36	\$ 92.00
60-64	\$ 93.74	\$ 76.01	\$ 178.15	\$149.20

California Employee - Based on \$50,000 Benefit Amount				
Age	Non-Tobacco		Tobacco	
	Critical Illness	Cancer Rider	Critical Illness	Cancer Rider
16-29	\$ 12.27	\$ 9.54	\$ 18.25	\$ 16.04
30-39	\$ 22.76	\$ 16.51	\$ 38.27	\$ 28.04
40-49	\$ 42.78	\$ 34.02	\$ 80.74	\$ 70.03
50-59	\$ 73.24	\$ 61.02	\$146.26	\$115.01
60-64	\$ 116.75	\$ 95.03	\$227.27	\$186.51

California Child Rider Monthly Rates		
	Critical Illness	Cancer Rider
\$2,500	\$ 2.87	\$ 0.74
\$5,000	\$ 3.56	\$ 1.43

**BELOW ARE THE MONTHLY RATES FOR EMPLOYEES IN ALL OTHER STATES EXCEPT FOR CALIFORNIA, MARYLAND AND FLORIDA**

<b>Employee - Based on \$10,000 Benefit Amount</b>				
<b>Age</b>	<b>Non-Tobacco</b>		<b>Tobacco</b>	
	<b>Critical Illness</b>	<b>Cancer Rider</b>	<b>Critical Illness</b>	<b>Cancer Rider</b>
16-29	\$ 3.87	\$ 1.74	\$ 5.08	\$ 3.04
30-39	\$ 5.95	\$ 2.82	\$ 9.07	\$ 5.12
40-49	\$ 9.98	\$ 6.11	\$ 17.56	\$ 13.31
50-59	\$ 16.04	\$ 11.23	\$ 30.65	\$ 22.02
60-64	\$ 24.75	\$ 17.90	\$ 45.86	\$ 36.23

<b>Employee - Based on \$20,000 Benefit Amount</b>				
<b>Age</b>	<b>Non-Tobacco</b>		<b>Tobacco</b>	
	<b>Critical Illness</b>	<b>Cancer Rider</b>	<b>Critical Illness</b>	<b>Cancer Rider</b>
16-29	\$ 5.95	\$ 3.43	\$ 8.37	\$ 6.03
30-39	\$ 10.15	\$ 5.64	\$ 16.35	\$ 10.23
40-49	\$ 18.17	\$ 12.22	\$ 33.38	\$ 26.61
50-59	\$ 30.34	\$ 22.41	\$ 59.55	\$ 44.03
60-64	\$ 47.76	\$ 35.84	\$ 89.97	\$ 72.41

<b>Employee - Based on \$30,000 Benefit Amount</b>				
<b>Age</b>	<b>Non-Tobacco</b>		<b>Tobacco</b>	
	<b>Critical Illness</b>	<b>Cancer Rider</b>	<b>Critical Illness</b>	<b>Cancer Rider</b>
16-29	\$ 8.07	\$ 5.12	\$ 11.67	\$ 9.02
30-39	\$ 14.35	\$ 8.41	\$ 23.67	\$ 15.30
40-49	\$ 26.36	\$ 18.33	\$ 49.15	\$ 39.91
50-59	\$ 44.64	\$ 33.63	\$ 88.45	\$ 66.00
60-64	\$ 70.77	\$ 53.74	\$134.04	\$ 108.64

<b>Employee - Based on \$40,000 Benefit Amount</b>				
<b>Age</b>	<b>Non-Tobacco</b>		<b>Tobacco</b>	
	<b>Critical Illness</b>	<b>Cancer Rider</b>	<b>Critical Illness</b>	<b>Cancer Rider</b>
16-29	\$ 10.15	\$ 6.81	\$ 14.96	\$ 12.01
30-39	\$ 18.56	\$ 11.23	\$ 30.95	\$ 20.41
40-49	\$ 34.55	\$ 24.40	\$ 64.97	\$ 53.22
50-59	\$ 58.94	\$ 44.81	\$ 117.36	\$ 88.01
60-64	\$ 93.74	\$ 71.63	\$ 178.15	\$144.82

<b>Employee - Based on \$50,000 Benefit Amount</b>				
<b>Age</b>	<b>Non-Tobacco</b>		<b>Tobacco</b>	
	<b>Critical Illness</b>	<b>Cancer Rider</b>	<b>Critical Illness</b>	<b>Cancer Rider</b>
16-29	\$ 12.27	\$ 8.54	\$ 18.25	\$ 15.04
30-39	\$ 22.76	\$ 14.00	\$ 38.27	\$ 25.53
40-49	\$ 42.78	\$ 30.51	\$ 80.74	\$ 66.52
50-59	\$ 73.24	\$ 56.03	\$146.26	\$ 110.03
60-64	\$ 116.75	\$ 89.53	\$222.27	\$ 181.01

<b>Child Rider Monthly Rates</b>		
	<b>Critical Illness</b>	<b>Cancer Rider</b>
\$2,500	\$ 2.87	\$ 0.74
\$5,000	\$ 3.56	\$ 1.43



## HOSPITAL INSURANCE

This policy helps you cope with the financial impacts of a hospitalization. You can receive benefits when you are admitted to the hospital for a covered accident, illness or childbirth. The money is paid directly to you – not to a hospital or care provider. The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles. There is a pre-existing medical condition limitation on this plan.

### Guarantee Issue

All Employees have a one-time opportunity to enroll without providing health information. If you do not enroll during your eligibility enrollment period, you will have to wait for a future annual enrollment period to apply. At that time, you will need to answer health questions on an Evidence of Insurability form.

The following are included under Hospital insurance

- \$1,500 for each covered hospital admission – once per year
- \$200 for each day of your covered hospital stay, up to 15 days – once per year
- \$400 for each day you spend in intensive care, up to 15 days – once per year

Monthly Rates for Hospital Insurance				
Age	Employee	Employee and Spouse	Employee and Child	Employee, Spouse and Child
17 – 49	\$20.09	\$36.36	\$28.75	\$45.02
50 – 59	\$28.30	\$56.59	\$36.96	\$65.25
60 – 64	\$39.91	\$83.31	\$48.57	\$91.97
65+	\$56.91	\$118.15	\$65.57	\$126.81

## Employee Assistance Program - Wellspring

All Employees and their household members may access our Employee Assistance Program (EAP) through Wellspring Family Service. Please be assured that the services provided to you through our EAP are completely confidential. The names of individuals who seek services through the EAP will not be shared with Oak Harbor Freight Lines.

When you need help with work, home, personal or family issues, the EAP is here at no charge to you. The purpose of an EAP is to talk with the individual to define their problem, suggest short-term problem-solving steps and refer to other community resources if necessary. You and your family members are provided with 3 in-person visits...per person...per year and per situation, with a counselor at no cost to you. The EAP can assist you with the following types of issues:

- Aging/Caregiving Issues & Referral
- Depression
- Parenting Support
- Marital and Family Conflicts
- Job Stress
- Anxiety
- Alcohol and Drug Abuse
- Grief and Loss

Wellspring Family Services is available 24 hours a day at:  
[www.wellspringeap.org](http://www.wellspringeap.org) and 800-553-7798  
Username: Oak Harbor Freight Lines

## 401(k) Plan – Paradigm

Save for retirement through the Oak Harbor Freight Lines 401(k) Plan. Employees, age 21 or older are eligible to participate in the Company 401(k) plan. Employees can choose the Traditional (Pre-Tax) or the Roth (Post Tax) deduction. All deduction amounts must be in whole number percentages.

The maximum contribution for 2020 is \$19,500.

Participants that are 50 years of age or older by the end of the calendar year may defer an additional \$6,500 as a catch-up contribution. These dollar limits may be changed periodically by IRS.

### Matching Contributions

The employer match on the 401(k) contribution varies by your contribution, but has a max of 5%.

For example:

- If you contribute 4% of your wages, you will be matched 2%, providing a 6% contribution to your 401(k) account.
- If you contribute 10% of your wages, you will be matched 5%, providing a 15% contribution to your 401(k) account.

### Vesting

You are always 100% vested in contributions you make to the plan. All company matching contributions will adhere to the following vesting schedule based on Years of Service:

Less than 2 years	0%
2 – 3 years	20%
3 – 4 years	40%
4 – 5 years	60%
5 – 6 years	80%
6 or more years	100%

For example, if you left the company after two years, you would receive the full value of your Employee contributions, plus 20% of the value of your company matching account.

For questions or assistance with your 401(k) account, please contact Cammie Hembree or Jaime Dellachiarra at 800-527-4560. For investment advice, please contact Travis Rus at 425-451-9502.

Online access to your account can be found at <https://myaccount.ascensus.com/rplink>

## Mobile Benefits App

Access your benefit plan policy details and contact information on the go! Search for 'usieb' and download our free mobile app from the Apple Store or Google Play Store. Access your benefit details by first scrolling through the info pages and then entering the following code as prompted: **714801**.

Use the app to help you:

- ✓ Stay Organized – Access all your plan information and cards in one place
- ✓ Stay Up To Date – Receive the most updated plan information automatically
- ✓ Get In Touch – Conveniently access carrier information

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