

## Summary of Benefits

### RRD

#### All Eligible Employees

#### Basic Term Life, Optional Term Life, Optional Dependent Term Life and Optional Accidental Death & Dismemberment

#### Issued by The Prudential Insurance Company of America

Effective: 01/01/2019

#### Basic Term Life

- 100% Employer Paid
- You are automatically enrolled for 1.0 times your covered annual earnings to \$125,000. **Please refer to your plan certificate(s) to review the required minimum and maximum coverage amounts allowed.**
  - If you are terminally ill, you can get a partial payment of your group life insurance benefit. You can use this payment as you see fit. The payment to your beneficiary will be reduced by the amount you receive with the Accelerated Benefit Option.\* Refer to the plan booklet for details.
  - Your base amount of insurance is frozen based on your earnings at age 65. This amount of insurance reduces to 92% at age 65, to 85% at age 66, to 78% at age 67, to 72% at age 68, to 66% at age 69, to 63% at age 70, to 59% at age 71, to 57% at age 72, to 54% at age 73, to 51% at age 74, to 49% at age 75, to 48% at age 76, to 47% at age 77, to 45% at age 78, to 44% at age 79, and by an additional 1% each year at age 80 and over.
  - Coverage will end on your termination of employment or as specified in the plan booklet. You may be able to continue your term life insurance using the portability option, or you may convert your term life insurance to an individual life insurance policy issued by the Prudential Insurance Company of America.

## Optional Term Life

- 100% Employee Paid
- Purchase coverage for 1.0 to 7.0 times your covered annual earnings to a maximum of \$2,000,000, of your combined Basic Term Life and Optional Term Life coverage amount.
    - **New Hires and Newly Eligible:** Get up to the lesser of 3.0 times your covered earnings not to exceed \$500,000 - no medical questions asked - when enrolling when first eligible in Optional Group Term Life. Amounts of insurance exceeding 3.0 times your covered earnings or \$500,000 require evidence of insurability.
    - **Current Participants:** Your current coverage amount will be continued. During the 2019 annual enrollment period, you may select to increase your current coverage amount up to a total of 1.0 times your covered annual earnings, not to exceed \$500,000, without providing evidence of insurability to Prudential. If you elect an amount exceeding 1.0 times your covered annual earnings or exceeding \$500,000 during annual enrollment, evidence of insurability will be required.
    - **Current Employees who waived coverage in the past:** Evidence of insurability satisfactory to The Prudential Insurance Company of America is required for all coverage amounts.
  - If terminally ill, you can get a partial payment of your group term life insurance benefit. You can use this payment as you see fit. In the event of your death, your beneficiary will receive a benefit payout which has been reduced by the amount you receive.
  - Coverage will end on your termination of employment or as specified in the plan booklet. You may be able to continue your term life insurance using the portability option, or you may convert your term life insurance to an individual life insurance policy issued by the Prudential Insurance Company of America.

## Spouse / Domestic Partner - Optional Dependent Term Life

- 100% Employee Paid
- Purchase coverage for your spouse for \$10,000, or \$25,000, or \$50,000, or \$75,000, or \$100,000, or \$150,000, or \$200,000.
    - **New Hires and Newly Eligible:** If your spouse is newly eligible, you can elect a coverage amount for your spouse up to the Guaranteed Issue amount of \$50,000, without providing evidence of insurability to The Prudential Insurance Company of America.
    - **Current Spouse Participants:** Your spouse's current coverage amount will be continued. Evidence of insurability satisfactory to The Prudential Insurance Company of America is required for all increases in coverage amounts.
    - **Current Employees who waived spouse coverage in the past:** Evidence of insurability satisfactory to The Prudential Insurance Company of America is required for all coverage amounts.
  - Coverage will end on your termination of employment or as specified in the plan booklet. You may be able to continue your term life insurance using the portability option, or you may convert your term life insurance to an individual life insurance policy issued by the Prudential Insurance Company of America.

## Child - Optional Dependent Term Life

- 100% Employee Paid
- Purchase coverage for your children in increments of \$5,000 up to a maximum of \$25,000. There are no health requirements for this coverage.
  - Coverage begins from live birth, and continues to age 26.
  - Upon termination of employment, you (if eligible to port or convert) may choose to continue a dependent child coverage amount equal to or lower than your current benefit amount.

## Optional Accidental Death & Dismemberment

100% Employee Paid

- **Employee Coverage:** Purchase coverage for 1.0 to 7.0 times your covered annual earnings, to a maximum of \$2,000,000
- **Family:** Purchase a coverage amount for your spouse equal to 60% of your Optional AD&D Insurance coverage amount. Purchase a coverage amount for your child equal to 25% of your Optional AD&D Insurance coverage amount. The maximum coverage amount for your spouse is \$750,000; the maximum coverage amount for your child(ren) is \$150,000.
- The coverage increments that you may elect are based on your frozen salary as of age 70. Your elected coverage will be reduced as you age to 65% at age 70, to 45% at age 75, to 30% at age 80, and to 15% at age 85.
- For children, coverage begins from live birth, and continues to age 26.

***Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.***

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

\*Accelerated Death Benefit option is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. The death benefit is reduced by the amount of the accelerated death benefit paid. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered "terminally ill" or "chronically ill." You may wish to seek professional tax advice before exercising this option.

**This coverage is not health insurance coverage (often referred to as “Major Medical Coverage”).**

**This type of plan is NOT considered “minimum essential coverage” under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage. If you do not have other health insurance coverage, you may be subject to a federal tax penalty.**

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York Department of Financial Services.

**IMPORTANT NOTICE - THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.**

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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## Rate Sheet

### RRD

#### All Eligible Employees

Issued by The Prudential Insurance Company of America

Effective: 01/01/2019

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

### “How much does life insurance cost?”

The following steps will show you how to calculate your monthly cost of insurance.

		Employee
<b>Step 1</b>	Enter the amount of Employee coverage you wish to purchase.	\$ <input type="text"/>
<b>Step 2</b>	Divide the coverage amounts by 1,000.	\$ <input type="text"/>
<b>Step 3</b>	Multiply the dollar amounts in Step 2 by the cost of coverage per \$1,000 of coverage, according to your age and smoker status, that you'll find in the chart that follows. This gives you the monthly cost of insurance.	\$ <input type="text"/>
<b>TOTAL COST FOR EMPLOYEE</b>		\$ <input type="text"/>

### Cost of Optional Term Life Insurance for You

Coverage is available for 1.0 to 7.0 times your covered annual earnings, not to exceed \$2,000,000, less your basic term life coverage amount. Refer to the Optional Term Life section for evidence of insurability details. For initial enrollment only: Rates are based on the employee's age as of initial enrollment. For annual enrollment only: Rates are based on the employee's age as of January 1st of the plan year. Rates will change based on the following age schedule..

Employee's Age	Employee Non-Smoker Rate	Employee Smoker Rate
< 24	\$0.038	\$0.076
25 - 29	\$0.038	\$0.095
30 - 34	\$0.038	\$0.124
35 - 39	\$0.047	\$0.142
40 - 44	\$0.066	\$0.152
45 - 49	\$0.124	\$0.227
50 - 54	\$0.180	\$0.350
55 - 59	\$0.322	\$0.662
60 - 64	\$0.483	\$1.022
65 - 69	\$0.814	\$1.976
70 - 100	\$1.684	\$3.177

### Example

A 35 year-old employee elects

\$72,500 of Optional Term Life for themselves

Employee Monthly Cost

\$3.41 ( $\$72,500 / 1,000 \times \$0.047$ )

### Spouse / Domestic Partner - Optional Dependent Term Life Monthly Non-Smoker Cost per Coverage Amount

Coverage is available for your spouse for \$10,000, or \$25,000, or \$50,000, or \$75,000, or \$100,000, or \$150,000, or \$200,000. Refer to the Optional Dependent Term Life section for evidence of insurability details. For initial enrollment only: Spouse/Domestic Partner's rates are based on the spouse/domestic partner's age (if available) or the employee's age as of initial enrollment. For annual enrollment only: Rates are based on the spouse/domestic partner's age (if available) or the employee's age as of January 1st of the plan year. Rates will change based on the following age schedule:

	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000
<b>Age</b>							
0-24	\$0.38	\$0.95	\$1.90	\$2.85	\$3.80	\$5.70	\$7.60
25-29	\$0.38	\$0.95	\$1.90	\$2.85	\$3.80	\$5.70	\$7.60
30-34	\$0.38	\$0.95	\$1.90	\$2.85	\$3.80	\$5.70	\$7.60
35-39	\$0.47	\$1.18	\$2.35	\$3.53	\$4.70	\$7.05	\$9.40
40-44	\$0.66	\$1.65	\$3.30	\$4.95	\$6.60	\$9.90	\$13.20
45-49	\$1.24	\$3.10	\$6.20	\$9.30	\$12.40	\$18.60	\$24.80
50-54	\$1.80	\$4.50	\$9.00	\$13.50	\$18.00	\$27.00	\$36.00
55-59	\$3.22	\$8.05	\$16.10	\$24.15	\$32.20	\$48.30	\$64.40
60-64	\$4.83	\$12.08	\$24.15	\$36.23	\$48.30	\$72.45	\$96.60
65-69	\$8.14	\$20.35	\$40.70	\$61.05	\$81.40	\$122.10	\$162.80
70-100	\$16.84	\$42.10	\$84.20	\$126.30	\$168.40	\$252.60	\$336.80

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

### Spouse / Domestic Partner - Optional Dependent Term Life Monthly Smoker Cost per Coverage Amount

Coverage is available for your spouse for \$10,000, or \$25,000, or \$50,000, or \$75,000, or \$100,000, or \$150,000, or \$200,000. Refer to the Optional Dependent Term Life section for evidence of insurability details. For initial enrollment only: Spouse/Domestic Partner's rates are based on the spouse/domestic partner's age (if available) or the employee's age as of initial enrollment. For annual enrollment only: Rates are based on the spouse/domestic partner's age (if available) or the employee's age as of January 1st of the plan year. Rates will change based on the following age schedule:

	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000
<b>Age</b>							
0-24	\$0.76	\$1.90	\$3.80	\$5.70	\$7.60	\$11.40	\$15.20
25-29	\$0.95	\$2.38	\$4.75	\$7.13	\$9.50	\$14.25	\$19.00
30-34	\$1.24	\$3.10	\$6.20	\$9.30	\$12.40	\$18.60	\$24.80
35-39	\$1.42	\$3.55	\$7.10	\$10.65	\$14.20	\$21.30	\$28.40
40-44	\$1.52	\$3.80	\$7.60	\$11.40	\$15.20	\$22.80	\$30.40
45-49	\$2.27	\$5.68	\$11.35	\$17.03	\$22.70	\$34.05	\$45.40
50-54	\$3.50	\$8.75	\$17.50	\$26.25	\$35.00	\$52.50	\$70.00
55-59	\$6.62	\$16.55	\$33.10	\$49.65	\$66.20	\$99.30	\$132.40
60-64	\$10.22	\$25.55	\$51.10	\$76.65	\$102.20	\$153.30	\$204.40
65-69	\$19.76	\$49.40	\$98.80	\$148.20	\$197.60	\$296.40	\$395.20
70-100	\$31.77	\$79.43	\$158.85	\$238.28	\$317.70	\$476.55	\$635.40

## Children - Optional Dependent Term Life Monthly Cost per Coverage Amount

**One premium rate covers all eligible children**  
 Coverage is available in increments of \$5,000 to a maximum of \$25,000.

\$5,000	\$10,000	\$15,000	\$20,000	\$25,000
\$0.53	\$1.05	\$1.58	\$2.10	\$2.63

Rates may change if plan experience requires a change for all insureds.

### "How much does this Optional AD&D insurance cost?"

#### Optional AD&D\*

Insured	Monthly Cost of Insurance (rates per \$1,000 of Coverage)
Employee	\$0.015
Employee & Family	\$0.024

\* This is optional coverage and the entire cost of coverage is employee paid.

#### Worksheet for Optional AD&D (Employee & Family)

Follow this worksheet to determine the cost of insurance for you and your family.

- Select the desired amount of coverage \$ \_\_\_\_\_
- Locate the monthly rate The monthly rate per \$1,000 is \$ \_\_\_\_\_
- Employee Only:** Divide the selected amount of coverage by \$1,000. Then multiply the result by the monthly rate to get the monthly cost of insurance. \$ \_\_\_\_\_ divided by \$1,000 is \$ \_\_\_\_\_  
\_\_\_\_\_ multiplied by \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Total monthly cost of insurance = \$ \_\_\_\_\_

**OR**

**Employee and Family:** Divide the selected amount of coverage by \$1,000. Then multiply the result by the family monthly rate to get the monthly cost of insurance.

\$ \_\_\_\_\_ divided by \$1,000 is \$ \_\_\_\_\_  
 \_\_\_\_\_ multiplied by \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Total monthly cost of insurance for You/Your Family= \$ \_\_\_\_\_

Total (monthly) cost of insurance = \$ \_\_\_\_\_

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