



St. Clair County Community Mental Health

Promoting Discovery & Recovery Opportunities for Healthy Minds & Bodies

Dennis Morier (313) 963-1135 Dmorier@tmrandassoc.com

VOLUNTARY BENEFIT OPEN ENROLLMENT

Plans for Employee, Spouse and Children

Brought to you by TMR & ASSOCIATES, INC.

Virtual Group Meetings

May 3, 2021 • 9am, 12pm, 3pm

Call In One-On-One Meetings

May 4 thru May 28, 2021

(Schedule individual meetings with Sign Up Genius)

Post Enrollment Benefit Fair

June 1, 2021 11am - 2pm

UNUM | AFLAC | Legal Shield | Nationwide



OVERVIEW OF VOLUNTARY BENEFIT PLAN HIGHLIGHTS

LIFE INSURANCE - UNUM

- Whole Life Insurance with Long Term Care Coverage
- Coverage available for employee, spouse, children and grandchildren

CANCER & CRITICAL ILLNESS - AFLAC

 Covers heart attack, stroke, cancer, coronary artery by-pass surgery, major organ transplant, major third degree burns, paralysis, end-stage renal failure

HOSPITAL CHOICE- AFLAC

• Hospital choice provides coverage for emergency room visits, hospital admissions, & confinement.

ACCIDENT PLAN - AFLAC

 Accidental Injury Coverage includes a Hospital Admission and Confinement Benefit, Intensive Care Unit Benefit, Emergency Room Treatment Benefit and an Optional Wellness Benefit

IDENTITY THEFT PROTECTION - Legal Shield

- Will spend up to \$5 million dollars to restore your identity
- · Monitor your identity from every angle

LEGAL PLAN - Legal Shield

- · Advice, consultation and representation
- 24-7 Emergency service, document preparation and IRS audit assistance

PET INSURANCE - Nationwide

- Get back up to 90% of the vet bill for listed items
- · Coverage for illness and injury included





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Section I - UNUM

Whole Life | Long-Term Care | Dependent Life







Whole Life Insurance

can pay money to your family if you die. It can help them with basic living expenses, final arrangements, tuition and more.

How does it work?

You can keep Whole Life Insurance as long as you want. Once you've bought coverage, your cost won't increase as you age. The benefit amount stays the same, too — it doesn't decrease as you get older. That means you get protection during your working years and into retirement.

Whole Life Insurance also earns interest, or "cash value," at a guaranteed rate of 4.5%.* You can borrow from that cash value, or you can buy a smaller, paid-up policy — with no more premiums due.

What's included?

A "Living" Benefit

You can request an early payout of your policy's death benefit (up to \$150,000 maximum) if you're expected to live 24 months. It would reduce the benefit that's paid when you die.

Long Term Care Rider

You may be able to use your death benefit to pay for long term care. Subject to rider conditions. See your plan administrator for more information.

Who can get coverage?

You:	You can purchase coverage for as little as \$3 weekly, as long as the minimum benefit is at least \$2,000. The benefit amount is based on the premium amount you select, your age when coverage begins, and whether you use tobacco.
Your spouse: Individual coverage	Available for your spouse between the ages of 15 to 80, even if you don't purchase coverage for yourself. If you leave your employer, you can keep this coverage and be billed at home. You can purchase coverage for as little as \$3 weekly, as long as the minimum benefit is at least \$2,000. The benefit amount is based on the premium amount you choose, your spouse's age when coverage begins, and whether they use tobacco.
Your children: Individual coverage	Your children and grandchildren can have individual coverage, even if you don't get coverage for yourself. If you leave your employer, your children can keep their coverage. You can purchase coverage for each child for as little as \$1 a week.

Why should I buy coverage now?

- It's more affordable when you're younger. Once you've bought coverage, your cost stays the same as long as you keep it.
- The cost is conveniently deducted from your paycheck.
- Whole life gives you valuable protection in addition to any term life insurance you might have.

What else can I add?

An Accidental Death Benefit

This increases the payment your family would receive if you die from a covered accident before age 70.

- Available for you and your spouse, age 15-65
- Doubles the death benefit, which could add up to \$150,000 extra coverage

This option will increase your cost.

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If you weather a serious disability, could your finances ride out the storm?

Unum's Long Term Care (LTC) Rider can help you protect your savings.

Protecting long term plans

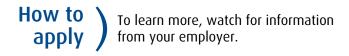
Marcia's savings are modest, but she's worked hard for every penny. She wants to travel to Italy, pay for her daughter's wedding, and leave something behind for those she loves. But she's seen how quickly the cost of long term care can deplete a lifetime of savings. She wants to make sure a traumatic accident or illness won't threaten her nest egg.

Benefits for the long haul

Thanks to modern medicine, people are now living longer and surviving very serious health problems. But that can mean long term treatment in a nursing home or assisted living facility. And the same care that saves your life can devastate your savings.

You may be surprised to learn that this care isn't covered by health or other insurance policies. Or that waiting for "later" to buy a long term care policy may make things worse. In fact, the younger you are, the less expensive this coverage is.

By adding a Long Term Care Rider to your Life Insurance policy, you can help protect your savings from being drained by this expensive care. Most importantly, this coverage allows you to use the benefit whether you receive care at home, or in a long term care facility, an assisted living facility, an adult day care, or a nursing home.



How long term care benefits work

Here is an example of how this LTC rider can help you finance a period of long term care. This illustration is based on an insured individual who has a \$25,000 Life Insurance policy.*

HIGHLIGHTS				
BASE RIDER — Employer-selected	BASE RIDER — Employer-selected			
LTC pays 6% monthly benefit for either LTC facility benefit or assisted living facility benefit. Payments reduce the death benefit until exhausted (approximately 16 months). \$1,500 per month				
Restoration Benefits Rider** — Employee-selected				
This rider restores 100% of the policy's specified amount (face amount), death benefit and cash value.	\$25,000 death benefit			

^{*} Assumes there are no outstanding policy loans.

^{**} The Restoration Benefits Rider is not available with Voluntary Individual Universal Life policies. It is also not available with the Whole Life paid-up-at-70 option. See back for details.



Give your kids a strong financial start.

Unum Whole Life Insurance for children can help.



You do everything you can to protect your kids and their future — including their financial well-being. That's why life insurance, even at a young age, is so important.

If an accident or illness were to claim the life of your child, this policy could provide the resources needed to deal with the financial strain of your loss — so you can take care of your family during this difficult time.

This coverage can be purchased without purchasing employee coverage. Each policy covers one child or grandchild; you can purchase coverage for each of your children and grandchildren.

CHILD ELIGIBILITY

Coverage is available to your:

- Children (natural and legally adopted)
- Stepchildren
- Grandchildren

Children/grandchildren are eligible from 14 days old until their 26th birthday. Children must reside in the U.S. to receive coverage.

FEATURES THAT ADD VALUE

Cash value — Accumulates at a rate of 3.75%.* You can borrow from the cash value if you choose, or use it to buy a reduced policy with no more premiums.

Policy amounts of \$1 to \$3 per week require no health questions if you apply when you are first eligible. If you wait, there will be a few medical questions.**

Coverage beyond \$3 per week is available but requires health questions to determine eligibility.

At age 70, the policy is fully paid up. This means no more premiums must be paid. The benefit is payable to the beneficiaries upon death.

THREE REASONS TO BUY THIS COVERAGE AT WORK

- You get competitive rates when you buy this policy through your employer, and the premiums are conveniently deducted from your paycheck.
- You own the policy so you can keep it even if you leave the company or retire. Unum will bill you directly for the same premium amount.
- Coverage becomes effective on the first day of the month in which payroll deductions begin.

GET THE COVERAGE YOU WANT.

	Weekly pr	remium \$1	Weekly pr	remium \$2	Weekly pr	remium \$3	Weekly pr	remium \$4	Weekly pr	remium \$5
ISSUE AGE	Coverage amount	Cash value at age 65*								
0	\$6,380	\$3,118	\$12,760	\$6,237	\$19,141	\$9,356	\$25,521	\$12,475	\$31,901	\$15,593
1	\$6,168	\$3,012	\$12,336	\$6,024	\$18,505	\$9,037	\$24,673	\$12,049	\$30,842	\$15,062
2	\$5,977	\$2,916	\$11,954	\$5,832	\$17,931	\$8,748	\$23,908	\$11,664	\$29,885	\$14,580
3	\$5,790	\$2,822	\$11,581	\$5,644	\$17,371	\$8,467	\$23,162	\$11,289	\$28,953	\$14,111
4	\$5,621	\$2,737	\$11,243	\$5,474	\$16,864	\$8,211	\$22,486	\$10,948	\$28,108	\$13,685
5	\$5,456	\$2,653	\$10,912	\$5,307	\$16,369	\$7,960	\$21,825	\$10,614	\$27,282	\$13,268
6	\$5,289	\$2,569	\$10,579	\$5,139	\$15,869	\$7,708	\$21,159	\$10,278	\$26,449	\$12,848
7	\$5,133	\$2,490	\$10,266	\$4,980	\$15,399	\$7,471	\$20,533	\$9,961	\$25,666	\$12,452
8	\$4,985	\$2,415	\$9,971	\$4,831	\$14,956	\$7,246	\$19,942	\$9,662	\$24,928	\$12,078
9	\$4,846	\$2,344	\$9,692	\$4,689	\$14,538	\$7,034	\$19,384	\$9,379	\$24,231	\$11,724
10	\$4,714	\$2,277	\$9,428	\$4,555	\$14,143	\$6,833	\$18,857	\$9,111	\$23,572	\$11,389
11	\$4,553	\$2,196	\$9,106	\$4,393	\$13,660	\$6,590	\$18,213	\$8,787	\$22,767	\$10,983
12	\$4,403	\$2,120	\$8,806	\$4,241	\$13,209	\$6,362	\$17,612	\$8,483	\$22,015	\$10,604
13	\$4,265	\$2,051	\$8,531	\$4,102	\$12,797	\$6,153	\$17,063	\$8,205	\$21,328	\$10,256
14	\$4,133	\$1,984	\$8,267	\$3,968	\$12,400	\$5,952	\$16,534	\$7,937	\$20,667	\$9,921
15	\$4,009	\$1,921	\$8,018	\$3,842	\$12,027	\$5,763	\$16,037	\$7,684	\$20,046	\$9,605
16	\$3,895	\$1,863	\$7,790	\$3,726	\$11,685	\$5,589	\$15,580	\$7,452	\$19,475	\$9,315
17	\$3,787	\$1,808	\$7,574	\$3,616	\$11,361	\$5,424	\$15,149	\$7,232	\$18,936	\$9,040
18	\$3,682	\$1,754	\$7,365	\$3,509	\$11,048	\$5,264	\$14,730	\$7,018	\$18,413	\$8,773
19	\$3,586	\$1,705	\$7,172	\$3,410	\$10,758	\$5,115	\$14,344	\$6,821	\$17,931	\$8,526
20	\$3,494	\$1,658	\$6,989	\$3,316	\$10,483	\$4,974	\$13,978	\$6,632	\$17,473	\$8,290
21	\$3,407	\$1,613	\$6,815	\$3,226	\$10,222	\$4,839	\$13,630	\$6,452	\$17,038	\$8,066
22	\$3,322	\$1,569	\$6,645	\$3,138	\$9,968	\$4,707	\$13,290	\$6,277	\$16,613	\$7,846
23	\$3,243	\$1,528	\$6,487	\$3,056	\$9,731	\$4,584	\$12,975	\$6,112	\$16,219	\$7,641
24	\$3,166	\$1,487	\$6,333	\$2,975	\$9,500	\$4,463	\$12,667	\$5,951	\$15,834	\$7,439
25	\$3,095	\$1,450	\$6,190	\$2,900	\$9,285	\$4,350	\$12,380	\$5,800	\$15,476	\$7,251

^{*} For policies effective 1/1/2022 and after, cash value accumulation is based on a non-forfeiture interest rate of 3.75% and the 2017 CSO mortality table.



unum.com

When you buy life insurance, you name the people who will receive the money from the policy when you die. These people are called beneficiaries. Unum will pay benefits to the beneficiaries in one lump sum; however, if a beneficiary is a minor (typically younger than 18, but this may vary by state) and no financial guardian has been appointed, the benefits will be paid to that minor through a Unum Retained Asset.

A Unum Retained Asset Account is a fund held in Unum's general account for the named minor beneficiary. The account accrues interest regardless of Unum's actual investment performance, and, while not FDIC insured, the account funds are fully guaranteed by Unum.

For more information about the retained asset account, please contact $\mbox{\sf Unum}.$

** \$2 per week maximum in WA

Exclusions: Life insurance benefits will not be paid for deaths caused by suicide. If within 24 months (12 months in North Dakota) from the policy effective date, the insured commits suicide, whether sane or insane, Unum will not pay the death benefit. The amount payable by us in place of all other benefits, shall be the sum of premiums paid, without interest, less the sum of any debt and the cost of any riders. Termination: The policy will terminate on the earliest of the following:

- 1. written request by you to terminate the policy;
- 2. the insured dies;
- 3. the policy matures; or
- 4. the loan value exceeds the guaranteed cash value of this policy.

Underwritten by: Provident Life and Accident Insurance Company, Chattanooga, Tennessee

In NY, underwritten by: First Unum Life Insurance Company, New York, New York The information is not intended to be a complete description of the insurance coverage available. The policies or their provisions may vary or be unavailable in some states. The policies have exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form L-21848 and FUL-21848-20 or contact your Unum representative. Unum complies with all state civil union and domestic partner laws when applicable.

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FOR EMPLOYEES (3-21)

MK-573404





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Section II - Aflac

Cancer | Critical Illness | Accident | Hospital Choice



Aflac Critical Care Protection

SPECIFIED HEALTH EVENT INSURANCE - OPTION 1

We've been dedicated to helping provide peace of mind and financial security for more than 60 years.





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AFLAC CRITICAL CARE PROTECTION

SPECIFIED HEALTH EVENT INSURANCE - OPTION 1

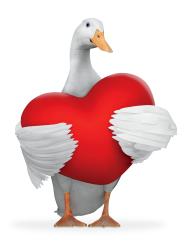
Policy Series A74000



Critical care for you. Added financial protection for your family.

Aflac's Critical Care Protection policy helps provide peace of mind if you experience a serious health event, such as a heart attack or stroke. You will receive a lump sum benefit upon diagnosis of a covered event with additional benefits to be paid for things such as a hospital confinement, ambulance, transportation, lodging, and therapy.

All benefits are paid directly to you, unless otherwise assigned, and can be used for any out-of-pocket expenses you have such as car payments, mortgage or rent payments, or utility bills. Aflac Critical Care Protection allows you to help protect the things you love the most from the things you expect the least.



Understand the difference Aflac can make in your financial security.

Aflac pays cash benefits directly to you, unless otherwise assigned. Aflac Critical Care Protection is designed to provide you with cash benefits if you experience a specified health event, such as sudden cardiac arrest or end-stage renal failure. This means that you will have added financial resources to help with expenses incurred due to a serious health event, to help with ongoing living expenses, or to help with any purpose you choose.

An illness can happen to anyone, anytime—and when it does, everyday expenses may suddenly seem overwhelming. Fortunately, Aflac's Critical Care Protection can help with those everyday expenses, so all you have to focus on is getting well.

Aflac Critical Care Protection offers more types of benefits compared to other critical illness coverage on the market:

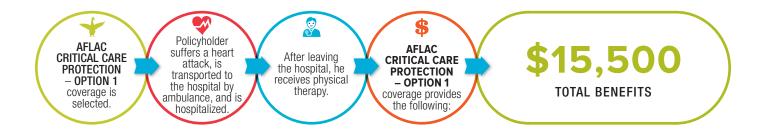
- Pays \$10,000 upon diagnosis of having had a specified health event, which increases to \$13,000 for dependent children
- Pays \$300 per day for covered hospital stays
- Pays benefits for physical therapy, speech therapy, rehabilitation therapy, home health care, and many more
- Transportation and lodging benefits payable for travel to receive treatment
- Guaranteed-renewable—as long as premiums are paid, the policy cannot be canceled

Specified health events covered by the Critical Care Protection policy include:

- Heart Attack
- Stroke
- Coronary Artery Bypass Graft Surgery (CABG)
- Sudden Cardiac Arrest

- Third-Degree Burns
- Major Human Organ Transplant
- End-Stage Renal Failure
- Persistent Vegetative State

How it works



The above example is based on a scenario for Aflac Critical Care Protection – Option 1 that includes the following benefit conditions: First-Occurrence Benefit (heart attack) of \$10,000, Ambulance Benefit (ground ambulance transportation) of \$250, Hospital Confinement Benefit (5 days) of \$1,500, and Continuing Care Benefit (30 days) of \$3,750.

The policy has limitations, exclusions and pre-existing condition limitations that may affect benefits payable. Riders are available for an additional premium. For costs and complete details of the coverage, contact your Aflac insurance agent/producer. This brochure is for illustrative purposes only. Refer to the policy for complete benefit details, definitions, limitations and exclusions.

Aflac Critical Care Protection – Option 1 Benefit Overview

BENEFIT NAME

BENEFIT AMOUNT

FIRST-OCCURRENCE BENEFIT: Named Insured/Spouse Dependent Children	\$10,000; lifetime maximum \$10,000 per covered person \$13,000; lifetime maximum \$13,000 per covered person		
SUBSEQUENT SPECIFIED HEALTH EVENT BENEFIT	\$5,000 Subsequent occurrence limitations apply. No lifetime maximum.		
CORONARY ANGIOPLASTY BENEFIT	\$1,000 Payable only once per covered person, per lifetime		
HOSPITAL CONFINEMENT BENEFIT	\$300 per day No lifetime maximum		
AMBULANCE BENEFIT	\$250 ground or \$2,000 air No lifetime maximum		
CONTINUING CARE BENEFIT	\$125 each day when a covered person is charged for any of the following treatments: • Rehabilitation Therapy • Home Health Care • Physical Therapy • Dialysis • Speech Therapy • Hospice Care • Occupational Therapy • Extended Care • Respiratory Therapy • Physician Visits • Dietary Therapy/Consultation • Nursing Home Care Treatment is limited to 75 days for continuing care received within 180 days following the occurrence of the most recent covered loss. No lifetime maximum.		
TRANSPORTATION BENEFIT	\$.50 per mile, per covered person whom special treatment is prescribed, for a covered loss Limited to \$1,500 per occurrence; no lifetime maximum		
LODGING BENEFIT	Up to \$75 per day, for covered lodging charges Limited to 15 days per occurrence; no lifetime maximum		
WAIVER OF PREMIUM BENEFIT	Premium waived, from month to month, during total inability (after 180 continuous days)		
CONTINUATION OF COVERAGE BENEFIT	Waives all monthly premiums for up to 2 months, when all conditions for this benefit are met		

Aflac Cancer Protection Assurance

CANCER INDEMNITY INSURANCE – OPTION 2

We've been dedicated to helping provide peace of mind and financial security for more than 60 years.



This is not a substitute for major medical coverage. It is designed to supplement a major medical program. It does not constitute comprehensive health insurance coverage and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



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AFLAC CANCER PROTECTION ASSURANCE

CANCER INDEMNITY INSURANCE – OPTION 2

Policy Series B70000



Aflac Cancer Protection Assurance: real coverage when you need it most.

Cancer treatment is changing—and Aflac is proud to be changing with it. Thanks to advances in science and treatment, more and more Americans today are living with cancer.¹ Aflac Cancer Protection Assurance helps cover these innovative treatments with benefits that really care for you as a whole person.

From prevention to recovery, Aflac is with you every step of the way.

Our benefits are built to see you all the way through cancer treatment and they'll stay with you for life after cancer.²



CANCER STATS YOU NEED TO KNOW

FACT NO. 1



MEN HAVE A SLIGHTLY LESS THAN 1 IN 2

LIFETIME RISK OF DEVELOPING CANCER IN THE UNITED STATES.³

FACT NO. 2



WOMEN HAVE A SLIGHTLY MORE THAN

1

3

LIFETIME RISK OF DEVELOPING CANCER IN THE UNITED STATES.3

Of course, four-in-four hope they'll never get it. But for many—and for certain types of cancer—advances in science and treatment have transformed cancer into an illness that can be managed over a lifetime. In fact: 89% of women who are diagnosed with breast cancer will survive it and 98% of men who develop prostate cancer will live with it for five years—or more. Some cancer patients, even with insurance, spend about a third of their household income on out-of-pocket health care costs outside of insurance premiums.

Progress Against Cancer – 2019 Annual Plan, National Cancer Institute. https://www.cancer.gov/about-nci/budget/plan/progress. Accessed: November 13, 2017. ²Coverage remains in force as long as premiums are paid. ³Cancer Facts & Figures 2017, American Cancer Society. ⁴National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) Program. See:https://seer.cancer.gov/statfacts/html/breast.html and https://seer.cancer.gov/statfacts/html/prost.html. SEER Cancer Statistics Review, 1975-2014, National Cancer Institute. Bethesda, MD, https://seer.cancer.gov/csr/1975_2014/, based on November 2016 SEER data submission, posted to the SEER web site, April 2017. Accessed: December 13, 2017. ⁵Widowed Early, A Cancer Doctor Writes About the Harm of Medical Debt, NPR, August, 10 2018. https://www.npr.org/sections/health-shots/2017/08/10/542589232/widowed-early-a-cancer-doctor-writes-about-the-harm-of-medical-debt. Accessed: December 14, 2017.

Coverage Options

Choose the Policy and Riders that Fit Your Needs

One \$75 benefit per colendar year, per covered person Benefit increases to time a core-inigs per calendar year after the diagnosis for internal cancer or an associated concerus condition PROSTITY GENETIC TEST RESULT) \$250 per covered person, per lifetime Named insured or Spouse: \$4,000 Dependent Child: \$8,000 Depe	BENEFIT	DESCRIPTION
Named Insured or Spouses \$4,000 Named Insured or Spouses \$4,000 Dependent Child: \$8,000 Payable once per covered person, per lifetime ADDITIONAL OPINION \$300 per covered person, per lifetime	CANCER SCREENING	Benefit increases to three screenings per calendar year after the diagnosis for internal cancer
Dependent Chick: \$8,000 Playable once per covered person, per lifetime ADDITIONAL OPINION \$300 per covered person, per lifetime RADIATION THERAPY, CHEMOTHERAPY, IMMUNOTHERAPY OR EXPERIMENTAL CHEMOTHERAPY This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month TOPICAL CHEMOTHERAPY \$25 once per calendar month \$100 once per calendar month ANTINAUSEA \$100 once per calendar month \$7,000; lifetime maximum of \$7,000 per covered person Donor Benefit \$100 or sette: \$		\$250 per covered person, per lifetime
Self-Administered: \$250 per calendar month Physician Administered: \$1,200 per calendar month This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month TOPICAL CHEMOTHERAPY \$25 once per calendar month \$150 once per calendar month \$150 once per calendar month \$250 once pe	INITIAL DIAGNOSIS	Dependent Child: \$8,000
Physician Administered: \$1,200 per calendar month This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month **This benefit is limited to one self-administered treatment and one physician-administered treatment per calendar month **TOPICAL CHEMOTHERAPY** \$150 once per calendar month **STEM CELL AND BONE MARROW** \$7,000; lifetime maximum of \$7,000 per covered person Donor Benefit: \$100 for stem cell donation, or \$750 for stem cell donation, or \$750 for stem cell donation, or \$750 for bone marrow donation Payable one time per covered person **BLOOD AND PLASMA** **BLOOD AND PLASMA** **DIO **STEM** STORES** STORES*	ADDITIONAL OPINION	\$300 per covered person, per lifetime
TOPICAL CHEMOTHERAPY ANTINAUSEA \$100 once per calendar month \$7,000; lifetime maximum of \$7,000 per covered person Donor Benefit: \$100 for stem cell donation, or \$750 for bone marrow donation Payable one time per covered person BLOOD AND PLASMA Inpatient: \$50 times the number of days paid under the Hospital Confinement Benefit, per covered person Outpatient: \$175 per day, per covered person \$100-\$3,400 Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) HOSPITALIZATION CONFINEMENT POR A STORMENT POR	CHEMOTHERAPY, IMMUNOTHERAPY	Physician Administered: \$1,200 per calendar month This benefit is limited to one self-administered treatment and one physician-administered treatment per
STEM CELL AND BONE MARROW TRANSPLANTATION STEM CELL AND BONE MARROW TRANSPLANTATION STO for stem cell donation, or STO for stome cell donation, or STO for stem cell donation Payable one time per covered person Inpatient: \$50 times the number of days paid under the Hospital Confinement Benefit, per covered person Outpatient: \$175 per day, per covered person SURGERY/ANESTHESIA Inpatient: \$50 times the number of days paid under the Hospital Confinement Benefit, per covered person Outpatient: \$175 per day, per covered person \$100 -\$3,400 Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) Named Insured or Spouse: \$200 Dependent Child: \$250 HOSPITALIZATION CONFINEMENT FOR 31 DAYS OR MORE Named Insured or Spouse: \$400 Dependent Child: \$500 OUTPATIENT HOSPITAL SURGICAL \$200 per day, per covered person	HORMONAL THERAPY	\$25 once per calendar month
\$7,000; lifetime maximum of \$7,000 per covered person Donor Benefit: \$100 for stem cell donation, or \$750 for bone marrow donation Payable one time per covered person BLOOD AND PLASMA Inpatient: \$50 times the number of days paid under the Hospital Confinement Benefit, per covered person Outpatient: \$175 per day, per covered person \$100-\$3,400 Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) Named Insured or Spouse: \$200 Dependent Child: \$250 HOSPITALIZATION CONFINEMENT FOR 31 DAYS OR MORE Named Insured or Spouse: \$400 Dependent Child: \$500 OUTPATIENT HOSPITAL SURGICAL \$200 per day, per covered person.	TOPICAL CHEMOTHERAPY	\$150 once per calendar month
Donor Benefit: \$100 for stem cell donation, or \$750 for bone marrow donation Payable one time per covered person Inpatient: \$50 times the number of days paid under the Hospital Confinement Benefit, per covered person Outpatient: \$175 per day, per covered person \$100-\$3,400 Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) ### Application Confinement FOR 30 DAYS OR LESS Named Insured or Spouse: \$200 Dependent Child: \$250 UTPATIENT HOSPITAL SURGICAL \$200 per day per covered person OUTPATIENT HOSPITAL SURGICAL	ANTINAUSEA	\$100 once per calendar month
SURGERY/ANESTHESIA Outpatient: \$175 per day, per covered person \$100-\$3,400 Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) ### Subject of the Surgery Research Operations ### Surgery Research Operations Research of the Surgery Research Operations Research Research Operations Research		Donor Benefit: \$100 for stem cell donation, or \$750 for bone marrow donation
Anesthesia: additional 25% of the Surgery Benefit Maximum daily benefit will not exceed \$4,250; no lifetime maximum on the number of operations Laser or Cryosurgery: \$35 Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) **PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) Named Insured or Spouse: \$200 Dependent Child: \$250 **Named Insured or Spouse: \$400 Dependent Child: \$500 **OUTPATIENT HOSPITAL SURGICAL** **200 per day, per covered person.** **200 per day, per covered person.**	BLOOD AND PLASMA	
Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400 Maximum daily benefit will not exceed \$400. No lifetime maximum on the number of operations PROPHYLACTIC SURGERY (WITH CORRELATING INTERNAL CANCER DIAGNOSIS) ### Substituting Internal Cancer Properties \$250 per covered person, per lifetime Named Insured or Spouse: \$200	SURGERY/ANESTHESIA	Anesthesia: additional 25% of the Surgery Benefit
CORRELATING INTERNAL CANCER DIAGNOSIS) ### Spinal Cancer ### Sp	SKIN CANCER SURGERY	Excision of lesion of skin without flap or graft: \$170 Flap or graft without excision: \$250 Excision of lesion of skin with flap or graft: \$400
FOR 30 DAYS OR LESS Dependent Child: \$250 HOSPITALIZATION CONFINEMENT FOR 31 DAYS OR MORE Named Insured or Spouse: \$400 Dependent Child: \$500 OUTPATIENT HOSPITAL SURGICAL \$200 per day, per covered person	CORRELATING INTERNAL CANCER	\$250 per covered person, per lifetime
FOR 31 DAYS OR MORE Dependent Child: \$500 OUTPATIENT HOSPITAL SURGICAL \$200 per day, per covered person		
\$200 per day per covered person		
	OUTPATIENT HOSPITAL SURGICAL ROOM CHARGE	\$200 per day, per covered person

EXTENDED-CARE FACILITY	\$100 per day; limited to 3	\$100 per day; limited to 30 days in each calendar year, per covered person		
HOME HEALTH CARE	\$100 per day; limited to 10 days per hospitalization, per covered person; and 30 days per calendar year, per covered person			
HOSPICE CARE	\$1,000 for first day; \$50 per day thereafter; \$12,000 lifetime maximum per covered person			
NURSING SERVICES	\$100 per day; payable fo	\$100 per day; payable for only the number of days the Hospital Confinement Benefit is payable		
SURGICAL PROSTHESIS	\$2,000; lifetime maximun	n of \$4,000 per covered person		
NONSURGICAL PROSTHESIS	\$175 per occurrence, per	covered person; lifetime maximum of \$3	50 per covered person	
BREAST RECONSTRUCTION	Breast Reconstruction (o Breast Symmetry (on the Permanent Areola Repign	Breast Tissue/Muscle Reconstruction Flap Procedures: \$2,000 Breast Reconstruction (occurring within 5 years of breast cancer diagnosis): \$500 Breast Symmetry (on the nondiseased breast occurring within 5 years of breast reconstruction): \$220 Permanent Areola Repigmentation (on the diseased breast): \$100 Maximum daily benefit will not exceed \$2,000		
OTHER RECONSTRUCTIVE SURGERY	Facial Reconstruction: \$500 Anesthesia: additional 25% of the Other Reconstructive Surgery Benefit Maximum daily benefit will not exceed \$500			
EGG HARVESTING, STORAGE (CRYOPRESERVATION) AND IMPLANTATION	\$1,000 for a covered person to have oocytes extracted and harvested \$200 for the storage of a covered person's oocyte(s) or sperm \$200 for embryo transfer Lifetime maximum of \$1,400 per covered person			
ANNUAL CARE	\$200 on the anniversary date of diagnosis; lifetime maximum of five annual \$200 payments per covered person			
AMBULANCE	\$250 ground \$2,000 air ambulance			
TRANSPORTATION	\$.40 cents per mile for transportation; payable up to a combined maximum of \$1,200, per round trip			
LODGING	\$65 per day; limited to 90 days per calendar year			
WAIVER OF PREMIUM	Yes			
CONTINUATION OF COVERAGE	Yes			
OPTIONAL RIDERS	DESCRIPTION			
INITIAL DIAGNOSIS BUILDING BENEFIT RIDER	This benefit will increase the amount of your Initial Diagnosis Benefit, as shown in the policy, by \$100 for each unit purchased, up to five units, for each covered person on the anniversary date of coverage, while coverage remains in force.			
	When a covered person i	s diagnosed with any of the diseases liste	d in the Specified-Disease Rider:	
SPECIFIED-DISEASE BENEFIT RIDER	Initial diagnosis	Hospita	alization	
	\$2,000	30 days or less: \$400 per day	31 days or more: \$800 per day	
DEPENDENT CHILD RIDER	\$10,000 when a covered dependent child is diagnosed as having internal cancer or an associated cancerous condition; payable only once for each covered dependent child			

Aflac Accident Advantage

ACCIDENT-ONLY INSURANCE – OPTION 3

We've been dedicated to helping provide peace of mind and financial security for 60 years.





A36375NMI IC(6/15)

AFLAC ACCIDENT ADVANTAGE

ACCIDENT-ONLY INSURANCE - OPTION 3

Policy Series A36000



Be Prepared for Life's Unexpected Mishaps

Accidents can happen at any time. You could suffer an accidental injury while you are working around the house or walking into work. Or your child may get injured at basketball practice. When an accident happens, it can be costly. Even with major medical insurance, there may be out-of-pocket expenses that you'll have to pay.

In the event of an unexpected injury, Aflac can help protect your personal finances. We provide individuals and families affordable insurance that helps with expenses that may not be covered by major medical insurance. Aflac pays cash benefits directly to you (unless you specify otherwise), so you can use the cash for anything you want. Which means uncovered medical expenses won't break the bank if you are injured.

And since we can process your claim quickly, Aflac helps give you the peace of mind knowing you can spend more time recovering and less time worrying about bills.



The facts say you need the protection of the Aflac Accident Advantage insurance policy:

FACT NO. 1

ABOUT OUT OF

PEOPLE SEEK MEDICAL ATTENTION FOR AN INJURY.¹

FACT NO. 2

\$5,500

THE AVERAGE MEDICAL EXPENSES FOR AN ACCIDENTAL INJURY.¹

¹Injury Facts, 2014 Edition, National Safety Council.

Understand the difference Aflac can make in your financial security.

Aflac pays cash benefits for covered accidental injuries directly to you, unless assigned. Your own peace of mind and the assurance that your family will have help financially are powerful reasons to consider Aflac.

The financial impact of an accident is often surprising. Most people have expenses after an accident they never thought of before. From out-of-pocket medical costs to a temporary loss of income, your finances may be strained. If you or a family member suffered an accidental injury, can your finances handle it?

What does the Aflac Accident Advantage policy include?

- A wellness benefit payable for routine medical exams to encourage early detection and prevention.
- Benefits payable for fractures, dislocations, lacerations, concussions, burns, emergency dental work, eye injuries, and surgical procedures.
- Benefits payable for initial treatment, X-rays, major diagnostic exams, and follow-up treatments.
- Benefits payable for physical, speech, and occupational therapy.
- Daily hospitalization benefits payable for hospital stays, and additional daily benefits paid for stays in a hospital intensive care unit.

Why Aflac Accident Advantage may be the right choice for you:

- No underwriting questions to answer²
- No coordination of benefits—we pay regardless of any other insurance you may have
- No network restrictions—you choose your own health care provider
- Portable—take the plan with you if you change jobs or retire
- 24-hour accident insurance

How it works



The above example is based on a scenario for the Aflac Accident Advantage – Option 3 that includes the following benefit conditions: Ambulance Benefit of \$200 (ground ambulance transportation); Accident Treatment Benefit of \$200 (hospital emergency room treatment with X-rays); Accident Specific-Sum Injuries Benefit of \$1,750 (fractured leg {femur}—open reduction under anesthesia); Initial Accident Hospitalization Benefit of \$1,000; Accident Hospital Confinement Benefit of \$250 (hospitalized for 1 day); Major Diagnostic and Imaging Exams Benefit of \$200 (CT scan); Appliances Benefit of \$300 (wheelchair); Therapy Benefit of \$315 (9 physical therapy treatments); Accident Follow-Up Treatment Benefit of \$210 (6 follow-up treatments); Family Support Benefit of \$20 (hospitalized for 1 day); Family Lodging Benefit of \$125 (hospital and motel/hotel more than 50 miles from residence); and Organized Sporting Activity Benefit of \$1,000.

The policy has limitations and exclusions that may affect benefits payable. For costs and complete details of the coverage, contact your Aflac insurance agent/producer. This brochure is for illustrative purposes only. Refer to the policy for complete benefit details, definitions, limitations, and exclusions.

AFLAC ACCIDENT ADVANTAGE - OPTION 3 BENEFIT OVERVIEW

BENEFIT NAME	BENEFIT AMOUNT		
INITIAL ACCIDENT HOSPITALIZATION BENEFIT	\$1,000 when admitted for a hospital confinement of at least 18 hours or \$2,000 when admitted directly to an intensive care unit of a hospital for a covered accident, per calendar year, per covered person		
ACCIDENT HOSPITAL CONFINEMENT BENEFIT	\$250 per day, up to 365 days per covered accident, per covered person		
INTENSIVE CARE UNIT CONFINEMENT BENEFIT	Additional \$400 per day for up to 15 days, per covered accident, per covered person		
ACCIDENT TREATMENT BENEFIT	Payable once per 24-hour period and only once per covered accident, per covered person Hospital emergency room with X-ray: \$200 Hospital emergency room without X-ray: \$170 Office or facility (other than a hospital emergency room) with X-ray: \$150 Office or facility (other than a hospital emergency room) without X-ray: \$120		
AMBULANCE BENEFIT	\$200 ground ambulance transportation or \$1,500 air ambulance transportation		
BLOOD/PLASMA/PLATELETS BENEFIT	\$200 once per covered accident, per covered person		
MAJOR DIAGNOSTIC AND IMAGING EXAMS BENEFIT	\$200 per calendar year, per covered person		
ACCIDENT FOLLOW-UP TREATMENT BENEFIT	\$35 for one treatment per day (up to a max of 6 treatments), per covered accident, per covered person		
THERAPY BENEFIT	\$35 for one treatment per day (up to a max of 10 treatments), per covered accident, per covered person		
APPLIANCES BENEFIT	Benefits are payable for the medical appliances listed below: Back brace: \$300 Wheelchair: \$300 Walker: \$100 Body jacket: \$300 Leg brace: \$125 Walking boot: \$100 Knee scooter: \$300 Crutches: \$100 Cane: \$25 Payable once per covered accident, per covered person		
PROSTHESIS BENEFIT	\$800 once per covered accident, per covered person		
PROSTHESIS REPAIR OR REPLACEMENT BENEFIT	\$800 once per covered person, per lifetime		
REHABILITATION FACILITY BENEFIT	\$150 per day		
HOME MODIFICATION BENEFIT	\$3,000 once per covered accident, per covered person		
ACCIDENT SPECIFIC-SUM INJURIES BENEFITS	Pays benefits for the treatments listed below: DISLOCATIONS		
ACCIDENTAL-DEATH BENEFIT INSURED SPOUSE CHILD	Common-Carrier Accident Other Accident Hazardous Activity Accident \$150,000 \$40,000 \$10,000 \$150,000 \$40,000 \$10,000 \$25,000 \$10,000 \$5,000		
ACCIDENTAL-DISMEMBERMENT BENEFIT	\$300–\$40,000		
WELLNESS BENEFIT	\$60 once per calendar year		
FAMILY SUPPORT BENEFIT	\$20 per day (up to 30 days), per covered accident		
ORGANIZED SPORTING ACTIVITY BENEFIT	Additional 25% of the benefits payable, limited to \$1,000 per policy, per calendar year		
CONTINUATION OF COVERAGE BENEFIT	Waives all monthly premiums for up to two months, if conditions are met		
WAIVER OF PREMIUM BENEFIT	Yes		
TRANSPORTATION BENEFIT	\$600 per round trip, up to 3 round trips per calendar year, per covered person		
FAMILY LODGING BENEFIT	\$125 per night, up to 30 days per covered accident		
The state of the s	+ p		

Aflac Choice

HOSPITAL CONFINEMENT
INDEMNITY INSURANCE – OPTION 1

We've been dedicated to helping provide peace of mind and financial security for more than 60 years.



The policy is not a substitute for major medical coverage. It is designed to supplement a major medical program. It does not constitute comprehensive health insurance coverage and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



B40175NMI IC(11/16)

AFLAC CHOICE

HOSPITAL CONFINEMENT INDEMNITY INSURANCE – OPTION 1

Policy Series B40000



Life is full of tough choices, but this isn't one of them.

Aflac Choice makes selecting the right coverage easier and less stressful. With your trusted Aflac agent you can tailor Aflac Choice to meet your specific needs and enhance your existing coverage. Choose the options you want and ignore the rest.

Here's how we can help

Aflac Choice offers our best selection of hospital-related benefits to help with the expenses not covered by major medical, which can help prevent high deductibles and out-of-pocket expenses from derailing your life plans.

If choosing the right coverage has given you one giant headache in the past, don't worry. We're here to help.

Why Aflac Choice may be the right policy for you

- It's customizable. You choose the plan that's right for you based on your specific needs. It also works well with our other products.
- Guaranteed-issue options available—that means there is no medical guestionnaire required.
- We pay cash directly to you (unless you tell us otherwise)—not the doctor or hospital.



Coverage Options

Choose the Policy and Riders that Fit Your Needs

BENEFIT	DESCRIPTION
HOSPITAL CONFINEMENT	Pays \$500; \$1,000; \$1,500; or \$2,000. You choose the benefit amount at the time of application. Payable once per calendar year, per covered person.
REHABILITATION FACILITY	Pays \$100 per day; limited to 15 days per confinement. Limited to 30 days per calendar year, per covered person.
HOSPITAL EMERGENCY ROOM	Pays \$100 per day for treatment in a hospital emergency room. Limited to 2 payments per calendar year, per covered person.
HOSPITAL SHORT-STAY	Pays \$100 for hospital stays of less than 23 hours. Limited to 2 payments per calendar year, per policy.
WAIVER OF PREMIUM	Yes
CONTINUATION OF COVERAGE	Yes

OPTIONAL RIDERS	DESCRIPTION		
EXTENDED BENEFITS RIDER	Physician Visit Benefit: Pays \$25 per day for visits (including telemedicine) to a physician, psychologist or urgent care center. Individual Coverage: Limited to 3 visits per calendar year, per policy. Insured/Spouse & Family Coverage: Limited to 6 visits per calendar year, per policy.		
	Laboratory Test and X-Ray Benefit: Pays \$35; limited to 2 payments per covered person, per calendar year. Medical Diagnostic and Imaging Exams Benefit: Pays \$150 for a covered exam, limited to 2 exams per covered person, per calendar year. Benefits payable for a variety of medical diagnostic and imaging exams, including sleep studies. Ambulance Benefit: Pays \$200 per day (ground) or \$2,000 per day (air) for transportation to or from a hospital. The benefit is limited to two trips, per calendar year, per covered person.		
HOSPITAL STAY AND SURGICAL CARE RIDER	 Initial Assistance Benefit: Pays \$100 once per calendar year, per rider, when a covered person requires a hospital admission. Surgery Benefit: Pays \$50-\$1,000 for a covered surgery. Limited to one payment per 24-hou period, per covered person. Invasive Diagnostic Exams Benefit: Pays \$100 per day for one covered exam, per covered person, per 24-hour period. Daily Hospital Intensive Care Unit Confinement Benefit: Pays \$500 per day, per covered person, for up to 30 days. Daily Hospital Confinement Benefit: Pays \$100 per day, per covered person, for up to 365 days. Second Surgical Opinion Benefit: Pays \$50 once per covered person, per calendar year. 		
AFLAC PLUS RIDER	Ask your Aflac agent about the Aflac Plus Rider!		





St. Clair County Community Mental Health

Promoting Discovery & Recovery Opportunities for Healthy Minds & Bodies

Dennis Morier (313) 963-1135 Dmorier@tmrandassoc.com

Section III - Legal Shield

Legal Plans | ID Theft Plans





Have You Ever

- □ Needed your Will prepared or updated?
- ☐ Signed a contract?
- □ Received a moving traffic violation?

- ☐ Worried about being a victim of identity theft?☐ Been concerned about your child's identity?
- ☐ Lost your wallet?

The LegalShield Membership Includes:

- Dedicated Law Firm Direct access, no call center
- Legal Advice/Consultation on unlimited personal issues
- Letters/Calls made on your behalf
- Contracts/Documents Reviewed up to 15 pages each
- Residential Loan Document Assistance for the purchase of your primary residence
- Will Preparation Will/Living Will/Health Care Power of Attorney
- Non-criminal Moving Traffic Violation Assistance (15 daywaiting period)
- IRS Audit Assistance (begins with the tax return due April 15th of the year you enroll)
- Trial Defense (if named defendant/respondent in a covered civil action suit)
- Uncontested Divorce, Separation, Adoption and/or NameChangeRepresentation(available90daysafter enrollment)
- 25% Preferred Member Discount (bankruptcy, criminal charges, DUI, personal injury, etc.)
- 24/7 Emergency Access for covered situations

The IDShield Membership Includes:

- Continuous Credit Monitoring IDShield continuously monitors your credit report. If changes occur, you'll receive an instant alert.
- Auto-Monitoring Provides monitoring services directly upon enrollment using member-provided Personally Identification Information (PII) such as name, Social Security number and date of birth.
- Hard Credit Inquiry Alerts Monitors your credit report for new hard inquiries. When an inquiry is made by the creditor, a notification is triggered in real-time and you will receive an alert.
- Credit Freeze and Fraud Alert Assistance We help in placing a credit freeze and/or fraud alert on your credit reports.
- Unlimited Consultation On any cyber security issue.
- Full-Service Restoration Our Licensed Private Investigators will work tirelessly to restore your identity to its pre-theft status.
- IDShield Plus Mobile App Features include identity threat and credit inquiry alerts, the ability to track and edit monitored information and direct access to IDShield Licensed Private Investigators.
- 24/7 Emergency Access We're here in the event of an identity theft emergency.





Put your law firm and identity theft protection in the palm of your hand with the LegalShield & IDShield Plus mobile apps

Plan	Family Price ^{26(pay period)}	Individual Price 26(pay period)
LegalShield	\$9.67	\$9.67
IDShield	\$13.36	\$6.90
Combined	\$21.64	\$16.57

Prepared for: St. Clair County Community Mental Health

For more information, contact your Independent Associate:

Dennis Morier

dmorier@tmrandassoc.com
313-963-1135

LegalShield legal plans cover the member; member's spouse; never married dependent children under 26 years of age living at home or full-time students; dependent children under the age 18 for whom the member is the legal guardian; or physically or mentally disabled dependent children. IDShield is a product of Pre-Paid Legal Services, Inc. d/b/a LegalShield ("LegalShield"). LegalShield provides access to identity theft protection and restoration services. For complete terms, coverage and conditions, please see www. idshield.com. All Licensed Private Investigators are licensed in the state of Oklahoma. A \$1 million insurance policy is issued through a nationally recognized carrier. LegalShield/IDShield is not an insurance carrier. Certain limitations apply. IDShield plans are available at individual or family rates. A family rate covers the member, member's spouse and up to 10 dependents up to the ages 18. It also provides consultation and restoration for dependent children age 18 to 26. This is a general overview and is for illustrative purposes only. Plans and services vary from state to state. See plan details for your state of residence for complete terms, coverage, amounts, conditions and limitations.





St. Clair County Community Mental Health

Promoting Discovery & Recovery Opportunities for Healthy Minds & Bodies

Dennis Morier (313) 963-1135 Dmorier@tmrandassoc.com

Section IV - Nationwide

Pet Insurance | Pet Protection



Pet insurance from Nationwide®

With new options for every budget, there's never been a better time to protect your pet.



Our popular My Pet Protection® pet insurance plans now feature more choices and more flexibility

- ✓ Get cash back on eligible vet bills Choose your reimbursement level of 50%, 70% or 90%¹
- ✓ Available exclusively for employees
 Plans with preferred pricing only offered through your company
- ✓ Same price for pets of all ages Your rate won't go up because your pet had a birthday
- ✓ **Use any vet, anywhere**No networks, no pre-approvals
- ✓ Optional wellness coverage available Includes spay/neuter, dental cleaning, exams, vaccinations and more

Choose from three levels of coverage with My Pet Protection

50% reimbursement \$20-\$38/month²

70% reimbursement

\$26-\$51/month²

90% reimbursement \$33-\$64/month²

How to use your pet insurance plan





Visit any vet, anywhere

2



3



Get reimbursed.

Get a fast, no-obligation quote today at

To enroll your bird, rabbit, reptile or other exotic pet, call 877-738-7874.

¹Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions. Reimbursement options may not be available in all states. ²Starting prices indicated. Final cost varies according to plan, species and ZIP code.

Products underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH, an A.M. Best A+ rated company (2020); National Casualty Company (all other states), Columbus, OH, an A.M. Best A+ rated company (2020). Agency of Record: DVM Insurance Agency. All are subsidiaries of Nationwide Mutual Insurance Company. Subject to underwriting guidelines, review and approval. Products and discounts not available to all persons in all states. Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Nationwide, the Nationwide N and Eagle, and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. © 2021 Nationwide. 20GRP7859A



TMR & ASSOCIATES, INC.

Dennis Morier (313) 963-1135 Dmorier@tmrandassoc.com

THANK YOU!

Visit the Sign Up Genius link below to schedule a one on one consultation with me!

https://www.signupgenius.com/go/scccmh

Dennis Morier Enrollment Specialist (313) 963-1135 Dmorier@tmrandassoc.com

