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Introduction
INTRODUCTION

Welcome to AIG Employee Benefit Solutions®

YOUR ONE-STOP SOURCE FOR EMPLOYEE BENEFITS
AIG Employee Benefit Solutions® gives you access to a full spectrum of employer-funded and employee-paid products from a single source—and pairs them with a truly outstanding service and support organization. We deliver our products with a focus on value, affordability, convenience and service — from the moment of the sale throughout the life of the plan.

ABOUT THE COMPANY
AIG Employee Benefit Solutions is the marketing brand under which various products are offered by the insurance companies of AIG American General. AIG American General is the marketing name for the insurance companies and affiliates of American International Group, Inc. ("AIG") that comprise AIG’s domestic life operations. Insurance company subsidiaries include AIG Life Insurance Company, American General Life Insurance Company, American International Life Assurance Company of New York and The United States Life Insurance Company in the City of New York.

YOUR ROLE AS THE GROUP INSURANCE PLAN ADMINISTRATOR
Administering a group insurance plan is a considerable responsibility. The administrative instructions contained within this manual will help you to effectively administer your plan. We urge you to thoroughly read these instructions and keep them in a convenient place for future reference.

HOW TO USE THE PLAN ADMINISTRATION GUIDE
The guide contains information you need to administer your group insurance plan including information about all standard coverages available in our insurance portfolio. Therefore, certain sections may not apply to your particular benefits program. Depending on the type of coverage purchased, you will need to refer to the appropriate sections of the manual. Please refer to the matrix on the following page to determine which section applies to the products for your particular benefits program. If you have any questions, please contact us and we’ll be happy to provide further clarification.

NOTE: This guide is not intended to replace your group insurance policy. To the extent that this guide differs from the terms of the group insurance policy, the terms of the insurance policy will control. The company reserves all rights and defenses in the policy.

CONTACT US

<table>
<thead>
<tr>
<th>Product Type</th>
<th>Contact Information</th>
</tr>
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<tbody>
<tr>
<td>Employer-Funded Group Insurance</td>
<td>AIG Tampa Solutions Center</td>
</tr>
<tr>
<td>Employee-Paid Group Insurance</td>
<td>Client Services Department</td>
</tr>
<tr>
<td></td>
<td>P.O. Box 30066</td>
</tr>
<tr>
<td></td>
<td>Tampa, FL 33630-3066</td>
</tr>
<tr>
<td></td>
<td>Office: 877-672-1648 / Fax: 877-672-1650</td>
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<tr>
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<td>The United States Life Insurance Company in the City of</td>
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<tr>
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<td>New York: 800-666-1051</td>
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<tr>
<td></td>
<td>A&amp;H Products: 800-811-2696</td>
</tr>
<tr>
<td>Employee-Paid Individual Insurance</td>
<td>Call your agent, broker or AIG Employee Benefit Solutions</td>
</tr>
<tr>
<td>Employer Contact</td>
<td>Representative</td>
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</table>
INTRODUCTION

Welcome to AIG Employee Benefit Solutions℠ (continued)

Please refer to the matrix below to identify the type of coverage you and/or your employees have purchased. Based on the coverage type, please refer to the applicable section in the manual.

<table>
<thead>
<tr>
<th>Product Lines</th>
<th>Employer-Funded Group Insurance</th>
<th>Employee-Paid Group Insurance</th>
<th>Employee-Paid Individual Insurance</th>
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| Estate Master Select™ Universal Life Insurance | ✓                               |                               |                                   | • American General Life Insurance Company  
• The United States Life Insurance Company in the City of New York |
| AIG Term MVP™ Insurance |                                 | ✓                             |                                   | American General Life Insurance Company                                             |
| AIG ROPTerm MVP™ Insurance |                                 |                                 | ✓                                 | American General Life Insurance Company                                             |
| AIG Group Term Life Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
| AIG Group Supplemental Life Insurance |                                 |                                 | ✓                                 | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
| AIG Group AD&D Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York (for NY appointments only) |
| **Supplemental Medical Solutions** |                                 |                               |                                   |                                                                                      |
| AIG CancerCare® Insurance |                                 |                               | ✓                                 | American General Life Insurance Company                                             |
| AIG Group CancerCare℠ Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
| AIG CriticalCare® Insurance |                                 |                               | ✓                                 | American General Life Insurance Company                                             |
| AIG Group CriticalCare℠ Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
| AIG EmergencyCare® Insurance |                                 |                               | ✓                                 | American General Life Insurance Company                                             |
| AIG Group Emergency Care℠ Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
| AIG Group HospitalCare℠ Insurance | ✓                                | ✓                             |                                   | • AIG Life Insurance Company  
• American International Life Assurance Company of New York |
## INTRODUCTION

Welcome to AIG Employee Benefit Solutions℠ (continued)

<table>
<thead>
<tr>
<th>Product Lines</th>
<th>Employer-Funded Group Insurance</th>
<th>Employee-Paid Group Insurance</th>
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GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Common Insurance Terminology

These common terms have been included for your convenience and general information. In some cases, the definitions provided here may vary from the terms of your group insurance policy. The terms of your group insurance policy will control.

CLASS
Defined as “All full-time employees of the policy holder, except temporary, part-time, seasonal employees or employees subject to a collective bargaining agreement.” Class can further be defined in terms based directly on conditions of employment such as salary or job title.

DATE OF ELIGIBILITY
The date on which an employee becomes eligible for group insurance. This is usually the employee’s date of hire plus any applicable waiting period. The employee should enroll on the first day of employment or during the waiting period, if applicable.

WAITING PERIOD
The amount of time that you have stipulated an employee must work in an eligible class before becoming eligible for coverage.

DEFINITION OF DEPENDENT
Dependent is defined as the insured employee’s:
- Lawful spouse
- Unmarried children supported by the insured employee
  - For specific age requirements, please see the certificate booklet
  - “Children” includes stepchildren and adopted children who are supported by the insured employee

NOTE: A spouse or child who is eligible for insurance under the group plan as an insured employee will not be considered a dependent, unless required by state law.

GROUP CASE SUMMARY
This is a useful tool, which summarizes many important features of the plan selected.

EVIDENCE OF INSURABILITY (EOI)
EOI may be required for coverage other than dental insurance. When EOI is required for enrollment, a fully completed Statement of Insurability Form must be submitted in addition to the completed Enrollment Form. This is a form completed by the proposed insured and/or dependents providing information regarding the state of their current physical condition, as well as prior medical history.

There are several reasons when EOI may be required:
- EOI is a plan requirement
- The applicant is applying for a life insurance amount over the guarantee issue
- The applicant is applying for coverage that was previously refused
- The applicant is a late entrant to the plan
- The applicant's dependents are late entrants to the plan

An individual is considered a late entrant when, on contributory coverage, the Enrollment Form is signed more than 31 days after the eligibility date.

Any Statement of Insurability Form signed more than 60 days prior to the date it is received by the home office will be returned for completion of a new statement. If approved, the coverage effective date will be based on the date the new Statement of Insurability is received by the home office.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Common Insurance Terminology (continued)

LATE ENTRANT
An individual is considered a late entrant when, on contributory coverage, the Enrollment Form is signed more than 31 days after the eligibility date. The signature date is regarded as the request date. When Evidence of Insurability is a plan requirement, an applicant's status as a late entrant is based on when our office receives a complete application.

NONCONTRIBUTORY INSURANCE
Coverage for which the policy holder (Employer) pays the entire cost of insurance. For coverages that are contracted on a noncontributory basis, all eligible employees must apply for insurance. **Employees may not refuse coverage.**

CONTRIBUTORY EMPLOYEE INSURANCE
Coverage for which the Employee shares the cost of insurance with the Employer. For cases or coverage that is contracted on a contributory basis, all eligible employees are not required to apply for insurance. However, employees who are eligible and do not wish to enroll must submit a fully completed Refusal/Waiver of Insurance Form.

REFUSAL/WAIVER OF INSURANCE
This portion of the Enrollment Form is to be completed if the employee is refusing any or all contributory coverage. (**noncontributory coverage cannot be refused.)**

PREMIUM FREQUENCY
The frequency at which premiums are paid (for example, monthly, quarterly, semi-annual, annual).
Understanding Your Group Case Summary

Your Group Case Summary, a document included in your administration materials, is a useful tool which summarizes many important features of the plan you have selected. Please refer to the Group Case Summary at this time. Some of the items you will most often reference are as follows:

**POLICY NO.**
Group policy number

**EFFECTIVE DATE**
Original effective date of group insurance

**BILLING LOCATION**
If your plan has multiple billing locations, there will be a separate Group Case Summary for each location. Review each Group Case Summary carefully, as benefits may vary for each billing location.

**BILLING MODE**
The frequency at which premiums are to be paid (for example, monthly, quarterly, semi-annual, or annual)

**GROUP REPRESENTATIVE**
Name of the AIG Employee Benefit Solutions Sales Representative

**GENERAL AGENT**
Name of the general agent

**PRODUCER**
Name of the producer

**ELIGIBLE CLASSES OF EMPLOYEES**
Used to determine who is eligible for insurance

**CLASS DESCRIPTION**
Used to describe the eligible class of employee as well as type and amount of benefit

**ELIGIBILITY WAIT PERIOD**
The amount of time a newly hired employee must wait before becoming eligible for insurance

**PRODUCT & BENEFIT INFORMATION**
List of each coverage, the coverage effective date, whether the coverage is noncontributory (NC) or contributory (C), class of employee for which the coverage is available and summary of plan
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Enrolling New Employees

WHO SHOULD BE ENROLLED?
Each eligible employee must be given an opportunity to enroll. To determine if an employee meets the eligibility definition, refer to the sections entitled Eligibility and Class Description on your Group Case Summary. If your plan has multiple billing locations, there will be a separate Group Case Summary for each billing location. Refer to the appropriate Group Case Summary for applicable classes and coverage.

WHEN SHOULD THE EMPLOYEE ENROLL?
The employee should enroll on the first day of employment or during the waiting period (if applicable). Please refer to the Group Case Summary to determine the eligibility waiting period.

HOW DOES THE EMPLOYEE ENROLL?
The employee enrolls by filling out and submitting the necessary enrollment forms.

- Group Employee Enrollment Form
  Please check to make sure that the:
  - Employee has entered all of the information requested AND
  - Employee has signed and dated the Enrollment Form AND
  - Group policy number, billing location and class number are included on the Enrollment Form.

- Statement of Insurability
  If Evidence of Insurability (EOI) is required for any or all coverages, the employee and/or dependents must complete a Statement of Insurability as well as an Enrollment Form. EOI is required for amounts greater than the Guarantee Issue (see Group Case Summary) or if EOI is a requirement based on the plan you purchased.

Note: A Statement of Insurability must be completed if coverage(s) is contributory and the employee is enrolling more than 31 days beyond the eligibility date. (Late Entrant)

Please verify that the employee has fully and properly completed all sections of the Group Employee Enrollment Form and Statement of Insurability, if applicable.

After the appropriate forms are completed:
- If insurance takes effect right away, file it with the other active employees' forms.
- If there is a waiting period, place the Enrollment Form in a pending file until the employee is eligible for insurance. You should review this pending file monthly.
- All Statements of Insurability should be forwarded to the Home Office for processing.

In all cases, the employee should be added to the plan on the eligibility date and the proper information should be entered on the next Premium Statement you prepare via the Self Billed Administrator (see "How to Prepare Your Premium Statement" section).

When you add an employee to the plan, give the employee a certificate booklet.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Enrolling New Employees (continued)

DETERMINING THE EFFECTIVE DATE OF COVERAGE

NON-CONTRIBUTORY EMPLOYEE INSURANCE
Coverage for which the Policyholder (Employer) pays the entire cost of insurance. For coverage that is contracted on a Non-Contributory basis, all eligible employees must enroll for insurance.

The effective date for a Non-Contributory coverage will be the eligibility date unless Evidence of Insurability is required. In that case, if approved for coverage, the effective date will be the later of:

- the date a fully completed Statement of Insurability is received by the home office, or
- the eligibility date

CONTRIBUTORY EMPLOYEE INSURANCE
Coverage for which the employee shares in the cost of the insurance with the employer. For coverage that is contracted on a Contributory basis, all eligible employees are not required to apply for insurance. However, employees who are eligible, and do not desire the Contributory coverage must submit a fully completed Refusal/Waiver of Insurance Form to you.

The effective date for Contributory coverage will be the later of:

- the date the enrollment form is signed, or
- the eligibility date

EFFECTIVE DATE OF DEPENDENT COVERAGE
For dependents that the employee has when he or she becomes eligible, dependents’ insurance will take effect as follows:

- **Non-Contributory Dependent Insurance**
  
  If the dependent coverage on a plan is contracted on a Non-contributory basis, the dependents are insured on the date the employee is eligible for dependent coverage, except when Evidence of Insurability is a plan requirement.

- **Contributory Dependent Insurance**
  
  If the employee contributes toward the cost of dependent coverage, a request for dependent insurance must be made in writing. The employee must elect coverage for each dependent within 31 days of acquiring a dependent, (marriage, birth or adoption of a child). If coverage is not requested for each dependent within 31 days of becoming eligible under the plan, the dependent may be considered a late entrant.

THE EFFECTIVE DATE FOR CONTRIBUTORY EMPLOYEE / DEPENDENT COVERAGE IS GOVERNED BY THE DATE THE COVERAGE IS REQUESTED IN WRITING - THIS IS THE SIGNATURE DATE ON THE ENROLLMENT FORM

- If coverage is requested, on or before the date of eligibility, coverage will be effective on the eligibility date.
- If coverage is requested within the 31-day period following the date of eligibility, coverage will be effective on the date the application is signed by the employee.
- If coverage is requested more than 31 days following the date of eligibility, the employee is considered a "Late Entrant". For non-dental coverage, Evidence of Insurability (EOI) is required. Consequently, a Statement of Insurability form must be completed by the applicant(s). If approved, the effective date is based on the date the fully completed form is received by the home office.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Terminating an Employee's Insurance

The most common reasons for termination of and employee’s or dependent’s insurance coverage are:
- termination of employment
- retirement
- voluntary withdrawal (with continuing employment)
- transfer to a class of employees excluded for coverage
- death
- dependent reaches limiting age or status as full-time student

Voluntary withdrawal: Voluntary withdrawal is permissible only if the coverage is contributory. The employee must complete the Refusal section of the Enrollment form. Attach the refusal form to the employees original enrollment form. Make the necessary adjustments to your next Self Administered Billing Statement.

Termination of Employment: Record the termination date on the employee's Group Employee Enrollment form, place it in a termination file and report it on your next premium statement online via the Self Billed Administrator. Please ensure that the proper retroactive adjustment is made, if applicable.

If an individual's employment terminates, please refer to your benefit information to determine if he or she has the right to convert to an Individual Life Insurance plan.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Terminating or Reinstating Your Group Insurance

Each premium may be paid up to 31 days after the due date. This period is the grace period. If premium is not paid, you may be sent a delinquent payment notice. If premium is still not paid within the time period stipulated on this notice, your group insurance plan will be terminated for non-payment. A final notice will be mailed for any estimated outstanding premium, including the grace period premium.

OTHER WAYS INSURANCE MAY END

You can end your group insurance by giving advance (30 days) written notice to our office. If you do this, your group insurance will end on the later of the date:

- Stated in your notice, or
- We receive your notice

POLICY RESPONSIBILITIES

State law requires you to notify your employees if group insurance ends. You should do this as soon as possible. Some states impose a penalty on you if you do not give timely notice. Others make you liable for benefits to the same extent as AIG American General would have been liable if proper notice were given.

LIABILITY TO PAY PREMIUMS IF INSURANCE ENDS

If insurance ends for any reason, you are liable for all premiums due and unpaid for any period that insurance was in effect.

REINSTATEMENT OF YOUR GROUP POLICY

If your group insurance plan ends, we may approve your request to reinstate your insurance. To apply for reinstatement of your insurance, you must do the following:

- Complete the required Reinstatement Consideration Form
- Submit all outstanding premium necessary to pay your policy in full to the current date

If approved, your group insurance plan will be reinstated on the date stated in writing by us. If we accept premium after the date your group insurance plan ends, this will not act to "reinstate" your insurance. Insurance will be reinstated only if you request it in writing and we agree to do so in writing. After your request for reinstatement is denied, premiums paid in excess of the final statement amount will be refunded.

Your Reinstatement Form and appropriate premium should be sent to:

AIG Tampa Solutions Center
Client Services Department
P.O. Box 30066
Tampa, FL  33630-3066

If you need additional information, please call our Client Services Department at 877-672-1648.
Changing Your Group Employer-Funded Coverage — Amendment

AMENDMENT
While your group insurance plan is in effect you may wish to make changes that affect the entire plan. Some examples of this type of change include:

- Change of group name
- Change of eligibility requirements, (e.g., eligibility waiting period, definition of employee classifications)
- Change of existing benefits, (e.g., amount of life schedule)
- Adding or deleting a coverage
- Adding or deleting an affiliate
- Change of premium billing frequency

These types of group level changes require an amendment to your plan. Amendments must be reviewed and approved by our group underwriting department. We reserve the right to refuse to amend the plan.

If you have questions about benefit options available to you, or would like to be quoted rates for an alternative plan of benefits, please contact our Sales Department at 877-672-1647.

Requests to amend your plan must be made in writing by an officer of your company. The request should be on company letterhead. The requested change may be submitted to:

AIG Tampa Solutions Center
Attn: New Business
P.O. Box 30083
Tampa, FL  33630-3083

Or fax to 877-672-1651
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Conversion Option

If an employee ceases full-time employment for any of the reasons indicated below, insurance may be continued, at the option of the employer, for a maximum of the period specified:

- Disability — 12 months
- Layoff — 31 days
- Part-time work — 31 days
- Leave of absence — 31 days
- Strike — 31 days

Premium payment is required for any period of continuation allowed as a result of the conditions outlined above. If an employee’s insurance is continued, dependents’ insurance may also be continued.

EMPLOYEE’S OPTION TO CONVERT INSURANCE UPON TERMINATION

The employee may have the option to convert to an individual plan or continue insurance for a limited time period as a result of state or federal mandates.

Following is a brief explanation of the conversion option:

LIFE CONVERSION TO AN INDIVIDUAL WHOLE LIFE POLICY

Notice of Conversion Right.

It is the employer’s responsibility to advise an insured of the right to convert his coverage to an individual whole life policy. Notice of the Insured's right to convert to an individual policy will be presented to the Insured or delivered to the Insured’s last known address within 15 days from the date his or her coverage ends. If notice is not given within this 15-day period, the 31-day conversion period will be extended by 15 days after the date notice is given. However, in no event will the conversion period be extended more than 60 days after the expiration date of the initial 31-day conversion period.

In order to determine the cost and availability of converting the term life policy to an individual whole life policy, please contact our Client Services Department at 877-672-1648.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Web Site Functionality

SERVICE AT YOUR FINGERTIPS
We want to make it easy for you to keep up to date on your insurance benefits. Therefore, we developed an interactive Web site to provide access to real-time data 24/7 — no waiting.

Our Web address is www.aigebs.com. Our online features provide enhanced service, including the ability to:
• Create premium statement via self billed administrator
• Schedule payment
• Check billing status and history
• List of contacts

PASSWORD PROTECTION ENSURES PRIVACY
Accessing confidential information on the secured pages of the Web site requires a user name and password to log on.

LOGIN INFORMATION: EMPLOYER
When you log in to www.aigebs.com for the first time, you will have to validate your identity by entering three pieces of information about your policy. You will then be prompted to set up a password.

IVR Functionality

SERVICE AT YOUR FINGERTIPS
We offer a variety of IVR features from our toll-free line, 877-672-1648. If you would like to know your current billing information and payment history, just follow the prompts. In addition, it provides the ability to speak to one of our Client Services staff members. IVR service is available 24/7, 365 days a year.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Creating Your Online Premium Statement Using the Self Billed Administrator

GENERAL INFORMATION
You must prepare your Group Premium Statement online every month, every three months (quarterly), every six months (semi-annually), or every year (annually), depending on the mode you have selected. Your billing date will always be on the first of the month. If the effective date of your policy is any date other than the first of the month, your first online Premium Statement will reflect prorated premium from your effective date to the end of the current billing period.

CREATING YOUR PREMIUM STATEMENT
You will receive an e-mail as a notice that the Self Billed Administrator is ready for you to create your premium statement.

To create your premium statement online, log onto the AIG Employee Benefit Solutions website at www.aigebs.com. Complete the Log In procedure by using your User ID and password.

Click on the “Review and Pay Bill” tab in order to begin processing. Click on the premium statement you wish to create, i.e. the current premium period. (Previous statements are available to review by clicking on those bill period dates.)

Choose the class you would like to work with from the drop down menu, then modify the premium statement by inserting the current volume and number of lives insured. The rate field is hard coded with the rates and cannot be altered. The “Self Billed Administrator” will automatically calculate the premium total in the “Total Premium” field. Be sure to complete the information for all classes for your group plan.

PREMIUM ADJUSTMENT
Any changes, which occurred other than the month being reported, should be listed in the “Back Charges” or “Back Credits” fields. You must calculate the actual premium amounts for the back charges and/or back credits. The “Total Premium” field will update depending on the changes you made to those fields.

For premium accounting purposes only, all additions and changes effective on any day other than the 1st of the month are effective on the next day; however, premium is due starting the 1st of the following month.

For example: New employee hired 11/19/05. After completing a 30-day waiting period, insurance is effective 12/19/05. The individual should be added effective 01/01/06.

The same applies to Terminations. Should an employee terminate on any day other than the 1st of the month coverage ceases the same day; however, premium is due for the entire month.
GROUP INSURANCE: EMPLOYER-FUNDED (SELF ADMINISTRATION)

Creating Your Online Premium Statement Using the Self Billed Administrator (continued)

COMPLETING THE PREMIUM STATEMENT PROCESS
You may save the changes made, without finalizing the premium statement by clicking the “Save Changes” button. This will hold the information you have input until you are ready to finalize and pay your premium. When you wish to finalize the premium statement, click on the “Finalize Bill” tab. This action locks the bill. No further changes can be made.

After selecting “Finalize Bill”, you are ready to schedule your payment. Click on the “Schedule Payment” button. Notice that the “Total Premium Due Now” amount has been transferred to the “Payment Amount”. You must pay the entire amount due. Follow the instructions to complete the payment process, then, “Schedule Payment” is selected and you will proceed to the ACH payment processing screen for the conclusion of the billing/payment process. The payment due must equal the “Total Amount Due” field.

MULTIPLE BILLING LOCATIONS
If your group has multiple billing locations, you will receive separate User IDs for each location. You must create a separate Premium Statement online via the Self Billed Administrator for each billing location.

For assistance with the Self Billed Administrator you may contact our Client Services Department at 877-672-1648.
AIG Life Insurance Company
Wilmington, Delaware

American General Life Insurance Company
Houston, Texas

American International Life Assurance Company of New York
New York, New York

The United States Life Insurance Company in the City of New York
New York, New York

Member companies of American International Group, Inc.
www.aigbs.com

The underwriting risks, financial obligations and support functions associated with the products issued by each of the listed companies are the responsibility of each individual issuing company. Each of the listed companies is responsible for its own individual financial condition and contractual obligations.

This guide is a summary only of products and services offered. All products are subject to the terms, conditions, limitations, and exclusions of the policy. Actual offerings may vary by group size and subject to state insurance law and the benefits/provisions as described may vary due to such law. Please see Certificate of Insurance for details.

An employer-funded program may be funded 100 percent by the employer or a combination of both employer and employee funding.


AIG GLOBAL BENEFITS NETWORK™
The AIG Global Benefits Network, part of the AIG Group Management Division (GMD), is the only network with market-leading positions in North America, Asia, Latin America, the Middle East and Europe. AIG Global Benefits Network products and services are offered through the various life companies of American International Group, Inc., including AIG American General.

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