





Cost Proposal
Voya Formal Proposal
Enhancements and Deviations

Cost Proposal

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**COST PROPOSAL
RFP 5953 Z1**

**BASIC LIFE, AD&D, SUPPLEMENTAL LIFE (DEPENDENT) AND SUPPLEMENTAL LIFE
(EMPLOYEE) INSURANCE PLAN OPTIONS**

Bidder Name: Voya Financial

Bidders shall fill in the proposed monthly premium amounts for each column provided below. All premium amounts specified are guaranteed by Bidder and are inclusive of all costs. Each monthly premium amount proposed should be evenly divisible by "2" with no rounding to accommodate two even deductions per month through our payroll system. Any premium amount not divisible by "2" will be reduced to the nearest lower amount that is divisible by "2" for scoring. By submitting this proposal, Bidder accepts this lower amount if a contract is awarded.

BASIC LIFE	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Rate for \$20,000 Per \$1,000 Per Month	\$ 0.050	\$ 0.050	\$ 0.050	\$ 0.050	N/A	N/A

AD&D	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Flat \$5,000 Per \$1,000	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A
Flat \$7,500 Per \$1,000	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A
Flat \$10,000 Per \$1,000	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A

SUPPLEMENTAL LIFE - DEPENDENT	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Low Option - \$5,000						
Spouse age below 70 and/or Dependent child(ren) up to age 26	\$ 1.54	\$ 1.54	\$ 1.54	\$ 1.54	N/A	N/A
Spouse Age 70 or Older and/or Dependent child(ren) up to age 26	\$ 4.10	\$ 4.10	\$ 4.10	\$ 4.10	N/A	N/A

SUPPLEMENTAL LIFE - DEPENDENT	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
High Option - \$10,000						
Spouse age below 70 and/or Dependent child(ren) up to age 26	\$ 3.00	\$ 3.00	\$ 3.00	\$ 3.00	N/A	N/A
Spouse Age 70 or Older and/or Dependent child(ren) up to age 26	\$ 8.22	\$ 8.22	\$ 8.22	\$ 8.22	N/A	N/A

SUPPLEMENTAL LIFE COVERAGE - EMPLOYEE

Rate/\$1,000	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Under 25	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A
25-29	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A
30-34	\$ 0.025	\$ 0.025	\$ 0.025	\$ 0.025	N/A	N/A
35-39	\$ 0.039	\$ 0.039	\$ 0.039	\$ 0.039	N/A	N/A
40-44	\$ 0.058	\$ 0.058	\$ 0.058	\$ 0.058	N/A	N/A
45-49	\$ 0.083	\$ 0.083	\$ 0.083	\$ 0.083	N/A	N/A
50-54	\$ 0.141	\$ 0.141	\$ 0.141	\$ 0.141	N/A	N/A
55-59	\$ 0.302	\$ 0.302	\$ 0.302	\$ 0.302	N/A	N/A
60-64	\$ 0.577	\$ 0.577	\$ 0.577	\$ 0.577	N/A	N/A
65-69	\$ 0.943	\$ 0.943	\$ 0.943	\$ 0.943	N/A	N/A
70-74	\$ 1.283	\$ 1.283	\$ 1.283	\$ 1.283	N/A	N/A
75-79	\$ 2.912	\$ 2.912	\$ 2.912	\$ 2.912	N/A	N/A
80 and over	\$ 5.896	\$ 5.896	\$ 5.896	\$ 5.896	N/A	N/A

**DEPARTMENT OF LABOR ACTIVE EMPLOYEES (Grandfathered Group)
BASIC LIFE, AD&D AND SUPPLEMENTAL LIFE (DEPENDENT) INSURANCE**

BASIC LIFE	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Rate per \$1,000 for base annual salary adjusted to next higher \$1,000 plus \$2,000. \$20,000 salary minimum. \$60,000 salary maximum. High age reductions.	\$ 0.094	\$ 0.094	\$ 0.094	\$ 0.094	N/A	N/A

AD&D	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Rate per \$1,000 for base annual salary adjusted to next higher \$1,000 plus \$2,000. \$20,000 salary minimum. \$60,000 salary maximum. High age reductions.	\$ 0.019	\$ 0.019	\$ 0.019	\$ 0.019	N/A	N/A

SUPPLEMENTAL LIFE - DEPENDENT	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Spouse - \$2,000; Child - \$500 (3 days - 6 months) \$1,000 (6 months - 19 years)	\$ 0.38	\$ 0.38	\$ 0.38	\$ 0.38	N/A	N/A

**DEPARTMENT OF LABOR RETIRED EMPLOYEES (Grandfathered Group)
BASIC LIFE INSURANCE**

BASIC LIFE	Initial Contract Period				Optional Year 1	Optional Year 2
	Year 1	Year 2	Year 3	Year 4		
Varies depending on amount in force at retirement. Refer to Attachment C: Census Report. Rate per \$1,000	\$ 0.190	\$ 0.190	\$ 0.190	\$ 0.190	N/A	N/A

Voya Life Proposal

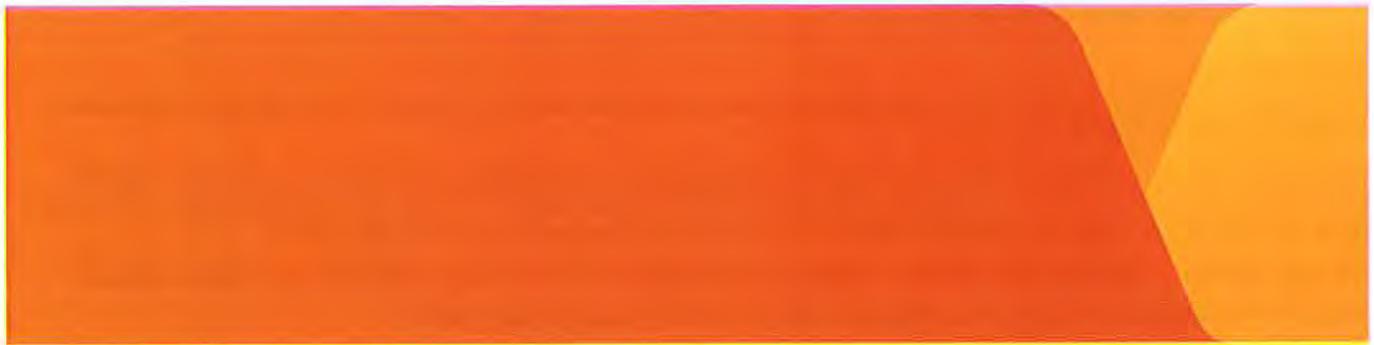
PLAN | INVEST | PROTECT



An Insurance Proposal for:

State of Nebraska

December 12, 2018



Presented To:

Direct - No Broker

Presented By:

Brett Lane

Ben LaBathe

Voya Employee Benefits

A Proposal for State of Nebraska

Our products help protect America's retirement assets

As an industry leader and advocate for greater retirement readiness, Voya Financial® is committed to delivering on our vision to be America's Retirement Company® and our mission to make a secure financial future possible — one person, one family and one institution at a time. As part of that vision, Voya Employee Benefits offers insurance products to help protect those retirement assets through our insurer, ReliaStar Life Insurance Company, a member of the Voya® family of companies.

Whether you want to offer traditional group benefits, voluntary products, or retirement planning services, Voya Employee Benefits offers choice and pledges ease and administrative efficiency for our clients. We have been offering group insurance solutions for more than 90 years, voluntary insurance solutions for more than 60 years, and stop loss insurance for more than 35 years. By combining our extensive product portfolio with our benefits expertise, we are able to solve common business issues such as: benefit plan program design, cost management issues, human resources administration, and employee recruitment and retention.

To learn more about Voya Financial see page 19.

Why work with us

With our consulting expertise and administrative capabilities, we can help you plan, design and deliver the solution your client needs in order to offer a cost-effective benefits package.

Voluntary Insurance Benefits: Our suite of voluntary benefits, including Critical Illness¹, Accident, and Hospital Confinement Indemnity Insurance, can help employees and their families cover their out-of-pocket medical costs. These are limited benefit policies. They are not health insurance and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

- True group products, designed to integrate enrollment and administration to complement an employer's core benefit offerings
- Products can be included on virtually any enrollment platform or benefits administration system
- Client can be the system of record - there are no tedious list bills to review or reconcile month-to-month and no missed deduction letters are sent out

Life Insurance: Group and voluntary options help employees provide financial protection for their loved ones.

- Accelerated Death Benefit payable in a monthly manner to help offset costs of continuous confinement in an institution, such as a hospital, nursing home or extended care facility
- Expedited benefit payment for amounts up to \$200,000
- Extensive range of Accidental Death and Dismemberment (AD&D) benefits

Disability Income Coverage: Fully-integrated products create seamless transitions between short and long-term disability claims. A dedicated claims manager also simplifies the process.

- Fully-insured, self-funded and voluntary group Short Term and Long Term Disability Income coverages
- Voya Absence Resources services can be added for administration of the employer's absence management program (Voya Absence Resources services are provided by FMLASource®, Inc.)

Stop Loss Insurance: Self-funded employers can better manage their risk and preserve their assets following a catastrophic health claim. And, since we're a direct writer, our claims process allows for faster reimbursement.

- Individual and aggregate excess risk insurance
- Flexible run-in and run-out options

¹Critical Illness is known as Specified Disease in some states.

This is a summary only. The policy, certificate and riders should be reviewed for complete provisions, conditions on benefit determination, exclusions and limitations. Product availability and specific provisions may vary by state.

A Life Insurance Proposal for:

State of Nebraska

December 12, 2018



Presented To:

Direct - No Broker

Presented By:

Brett Lane

Ben LaBathe

Voya Employee Benefits

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Outline of Benefits

This is a summary of certain benefit and rating features associated with this proposal. More detailed information about our products and benefits is available upon request.

This proposal assumes that our term life product is being offered as a stand-alone supplemental life product. If any other supplemental life product is offered in conjunction with this term life product, underwriting parameters and issue limits are subject to change.

Basic Life and Accidental Death and Dismemberment (AD&D) Insurance

	Benefit Amount	Reduction Schedule
Closed group of active NDOL Employees		
Life and AD&D	1 times basic annual earnings rounded to the next higher \$1,000 plus an additional \$2,000 to a maximum of \$60,000. Minimum benefit of \$10,000.	Benefit amount reduces to 65% at age 70. Coverage terminates at retirement unless retiree coverage is provided.
Active Permanent Employees		
Life	A flat amount of \$20,000.	No Reductions. Coverage terminates at retirement unless retiree coverage is provided.
AD&D	A flat amount of \$10,000, \$7,500 or \$5,000.	No Reductions. Coverage terminates at retirement unless retiree coverage is provided.
Closed group of NDOL Retirees		
Life	Amount of life insurance in force at time of retirement, not to exceed \$60,000.	Amount will be reduced as of the first of the month after you retire (unless your amount has been fully reduced already because of the plan's age reduction rules) by 2% on the first of each month and will reduce every month to a minimum of 25% of the amount in force at retirement.
AD&D	Not Included	Not Included

Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Supplemental Life Insurance

	Benefit Amount	Reduction Schedule
Active Permanent Employees		
Life	Choice of 0.5, 1.0, 1.5, 2.0, 3.0, 4.0 or 5.0 times basic annual earnings rounded to the next higher \$1,000 to a maximum of \$2,000,000. Minimum benefit of \$10,000.	No Reductions. Coverage terminates at retirement unless retiree coverage is provided.

Supplemental Spouse Life Insurance

	Benefit Amount	Reduction Schedule
Closed group of active NDOL Employees		
Life	A flat amount of \$2,000, not to exceed 50% of the employee's Supplemental Life insurance amount.	No Reductions. Coverage terminates when the spouse is no longer eligible.
Active Permanent Employees		
Life	Choice of \$5,000 or \$10,000, not to exceed 50% of the employee's Supplemental Life insurance amount.	No Reductions. Coverage terminates when the spouse is no longer eligible.

Supplemental Children Life Insurance

	Benefit Amount	Reduction Schedule
Closed group of active NDOL Employees		
Children Live birth to age 26	\$1,000	No Reductions. Child coverage terminates when the child is no longer eligible.
Active Permanent Employees		
Children Live birth to age 26	Choice of \$5,000 or \$10,000.	No Reductions. Child coverage terminates when the child is no longer eligible.

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Eligibility

Classification	Eligibility Waiting Period	Eligibility Definition
Closed group of active NDOL Employees and Closed group of NDOL Retirees	N/A	30 Hours/Week
Active Permanent Employees	The first day of the month coinciding with or next following the date you complete 30 days of continuous service with your employer.	20 Hours/Week

Rider form numbers (may vary by state):

Spouse Life Insurance Rider form #: LR14GP-SPR

Children's Life Insurance Rider form #: LR14GP-CHR

Accidental Death & Dismemberment Rider form #: LR14GP-ADD

Accelerated Death Benefit Rider form #: LR14GP-ABR

Portability Rider form #: LR14GP-PTS

Waiver of Premium Rider form #: LR14GP-WOP

Continuation of Insurance Rider form #: LR14GP-CNT

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation -

Estimated Monthly Cost

Basic Life and AD&D Insurance and Added Services

Coverage	Cost/\$1,000	Volume	Monthly Cost
Basic Life Active Permanent	\$0.050*	\$304,538,000	\$15,226.90
Basic Life NDOL Retiree (Closed)	\$0.190	\$2,174,000	\$413.06
AD&D Active Permanent	\$0.019	\$95,848,000	\$1,821.11
Basic Life and AD&D Closed group of active NDOL	\$0.094*	\$759,000	\$71.35
Total Estimated Monthly Cost			\$17,532.42

* Cost includes Basic Life and the following non-Insurance services: Voya Travel Assistance, and Funeral Planning and Concierge Services.

Supplemental Life Insurance

Age	Employee Rates/\$1,000
Under 20	\$0.019
20-24	\$0.019
25-29	\$0.019
30-34	\$0.025
35-39	\$0.039
40-44	\$0.058
45-49	\$0.083
50-54	\$0.141
55-59	\$0.302
60-64	\$0.577
65-69	\$0.943
70-74	\$1.283
75-79	\$2.912
80+	\$5.896

Dependent Supplemental Life Insurance

Coverage	Rates/Unit per Month
Option 1 Spouse (< 70) and Children = \$5,000	\$1.54
Option 2 Spouse (= or > 70) and Children = \$5,000	\$4.10
Option 3 Spouse (< 70) and Children = \$10,000	\$3.00
Option 4 Spouse (= or > 70) and Children = \$10,000	\$8.22
Closed Class NDOL Actives with Spouse \$2,000/Child \$1,000	\$0.38

For Individuals who choose to port their coverage, a different rate schedule will apply.

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Account Assumptions

	Basic Life and AD&D	Supplemental Life
Effective Date	July 1, 2019	
Proposal Expiration Date	June 30, 2019	
Situs State	Nebraska	
Commissions	Basic Life: Net AD&D: Net	Supplemental Life: Net
Eligible Employees	15,204	15,204
Retired Eligible Employees	156	
Accelerated Death Benefit	Included for all employee Basic and Supplemental Life Coverage	
Life Expectancy	24 months	
Continuous Confinement	Included	
Minimum Benefit	\$5,000	
Maximum Benefit	\$500,000	
% of Face Amount	75%	
Spouse Accelerated Death Benefit	Included	
Portability	Included	Included
	Maximum total coverage eligible to be ported is the lesser of \$750,000 or 5 times Basic Yearly Earnings. Coverage must be ported prior to age 70.	
Continuity of Coverage (Change of Insurance Carrier)	Included	Included
Conversion	Included	Included
Funding	Pooled	Pooled
Rate Guarantee	48 months	48 months
Administration	Employer	Employer
Employer Contribution	100%	0%
Employee Participation	100%	52%
Minimum Participation Required	100%	20% covered employees required to establish a Supplemental Life Plan. See Evidence of Insurability page for further participation requirements.
Suicide Exclusion	N/A	2 years on contributory Employee, Spouse, and Children Life

Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Waiver of Premium	Included for Employee Coverage	Included for Employee Coverage
Waiver Waiting Period	The lesser of 6 months or the Long Term Disability (LTD) elimination period (if we issue your LTD policy and approve the employee's LTD claim)	The lesser of 6 months or the Long Term Disability (LTD) elimination period (if we issue your LTD policy and approve the employee's LTD claim)
Waiver Age at Disability	Must be totally disabled prior to age 60 to qualify	Must be totally disabled prior to age 60 to qualify
Waiver Termination	The earlier of the date of recovery or the date the employee does not provide proof of total disability as requested.	The earlier of the date of recovery or the date the employee does not provide proof of total disability as requested.
Voya Travel Assistance	Included	
Funeral Planning and Concierge Services	Included: Level 1 Employee, Spouse & Children	
AD&D	24-hour Coverage	
AD&D Enhancements for Basic AD&D	Included Airbag use Burn Disfigurement Coma Exposure and Disappearance Safety Belt use Transportation/Repatriation	Included (Employee Only) Child Education Child Care Occupational assault Spouse education Spouse training

This is a summary of certain benefit and rating features associated with this offer. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Group Term Life Insurance is underwritten by ReliaStar Life Insurance Company, a member of the Voya® family of companies. Policy form #: LP14GP, Certificate form #: LC14GP. Form numbers, provisions and availability may vary by state.

Note: Non-insurance services included in this proposal: Voya Travel Assistance services are provided by Europ Assistance USA, Bethesda, MD. Funeral Planning and Concierge services are provided by Everest Funeral Package, LLC, Houston, TX.

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Assumptions and Exclusions

Group Term Life Product Assumptions

- Rates may be adjusted with enrollment shifts of 15% or more.
- Any changes may require an adjustment to the Life and AD&D rates.
- All claims are paid in U.S. dollars.
- Individuals who are U.S. Citizens and are assigned outside of the U.S., or Foreign Nationals, will not be covered by this policy.
- For any grandfathered coverage, a listing of current participants including name, DOB, and amount of insurance must be provided and approved.
- This proposal assumes our standard contract language.
- Spouse coverage includes domestic partners as defined.
- This proposal assumes pricing of basic and supplemental coverage together. Underwriting approval would be required for a quote of either coverage separately.
- Retirees are not eligible for Voya Travel Assistance.
- Retirees are not eligible for Funeral Planning and Concierge Services.
- If included, commission for Supplemental Spouse Life, Children Life, and AD&D coverage match the commissions for Employee Supplemental Life and AD&D.
- In addition to base commissions, certain brokers and/or service providers may receive compensation related to factors such as overall sales of Company products, total premium for products sold through the broker/service provider, growth in the number of customers, and retention of existing customers. Compensation and fees may also be paid to brokers and/or service providers for administrative services in connection with Company products. Please contact us if you would like additional detail on compensation and fees payable on your case.
- Implementation fees may be paid for reasonable costs directly associated with the initial implementation of our products. All fees must be requested and approved during the proposal process. In order to issue payment, a detailed invoice, Statement of Work, or other applicable Agreement (as directed by us) must be provided to us showing the costs incurred that are associated with the implementation and/or ongoing administration of our product(s). We will only remit payment directly to the selected vendor providing services, and will not provide payment to an employer. We do not pay fees on behalf of the employer that the employer would have otherwise incurred unrelated to our products, nor will we issue credits against premiums for implementation fees.

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

AD&D Exclusions (may vary by state)

Benefits are not payable for any loss caused or contributed to by any of the following:

- Suicide or attempted suicide, or intentionally self-inflicted injury, regardless of mental capacity.
- Disease or infirmity of mind or body, or medical and surgical treatment for such disease or infirmity.
- An infection, other than an infection that is a direct result or consequence of an Accidental Injury.
- War or any act of war, whether declared or undeclared, other than acts of terrorism.
- Accidental Injury that occurs while on full-time active duty as a member of the armed forces of any country or subdivision thereof. We will refund, upon written notice of such service, any Premium that has been accepted under this rider for any period not covered as a result of this exclusion.
- Active participation in a riot, insurrection or terrorist activity.
- Committing or attempting to commit a felony.
- Participation in an illegal occupation or activity.
- Intoxication as defined by the jurisdiction where the accident occurred.
- Voluntary intake or use by any means of any drug, other than those prescribed or administered by a Doctor and taken in accordance with the Doctor's instructions or an over-the counter drug taken in accordance with the manufacturer's instructions.
- Voluntary intake or use by any means of poison, gas or fumes, unless a direct result of an occupational accident.
- Travel in or descent from an aircraft, if the Covered Person acted in a capacity other than as a passenger.

Benefits are not payable for loss caused or contributed to by a covered person's accidental injury that occurs while the covered person is incarcerated.

Benefits for safety belt use and airbag use are not payable if the death was caused or contributed to by any use of intoxicating liquors, marijuana, narcotic drugs, depressants or similar substances, whether or not prescribed by a doctor, by the covered person or by the driver of the automobile in which the covered person was riding.

A Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Evidence of Insurability

Evidence of Insurability is required for any elected increase or any coverage amount above the limits described below.

Basic Life Insurance	Evidence Required
Coverage on the policy effective date continued from the policyholder's prior plan	Any amount exceeding the lesser of the most recent coverage from the policyholder's prior plan or the plan maximum
Initial eligibility on or after the policy effective date	Evidence is not required for any amount less than or equal to the plan maximum

Supplemental Life Insurance	Evidence Required
Coverage on the policy effective date continued from the policyholder's prior plan	Any amount exceeding the lesser of the most recent coverage from the policyholder's prior plan or the plan maximum
Initial eligibility for supplemental coverage on or after the policy effective date	Any amount exceeding \$750,000
Enrollment for supplemental coverage on the policy effective date, for employees who had supplemental coverage under the policyholder's prior plan	All increased amounts
Enrollment for supplemental coverage on the policy effective date, for employees who had no supplemental coverage under the policyholder's prior plan	All amounts
Enrollment at a scheduled annual enrollment period for an increase to existing supplemental coverage...	Any amount of total Supplemental Life Insurance exceeding 1 plan increment.

Supplemental Spouse Life Insurance	Evidence Required
Coverage on the policy effective date continued from the policyholder's prior plan	Any amount exceeding the lesser of the most recent coverage from the policyholder's prior plan or the plan maximum
Initial eligibility for supplemental spouse coverage on or after the policy effective date	Evidence is not required for any amount less than or equal to the plan maximum
Enrollment for supplemental spouse coverage on the policy effective date, for employees who had supplemental spouse coverage under the policyholder's prior plan	All Increased amounts
Enrollment for supplemental spouse coverage on the policy effective date, for employees who had no supplemental spouse coverage under the policyholder's prior plan	All amounts
Enrollment at a scheduled annual enrollment period for an increase to existing supplemental spouse coverage	Any amount of total Supplemental Spouse Life Insurance exceeding 1 plan increment.

Supplemental Children's Life Insurance	Evidence Required
Coverage on the policy effective date continued from the policyholder's prior plan	Any amount exceeding the lesser of the most recent coverage from the policyholder's prior plan or the plan maximum

Proposal for State of Nebraska

Life Insurance Benefits and Cost Representation

Initial eligibility for supplemental children's coverage on or after the policy effective date

Evidence is not required for any amount less than or equal to the plan maximum

Enrollment at a scheduled annual enrollment period for initial supplemental children's coverage, or an increase to existing supplemental children's coverage

Evidence is not required for any increase in which the total Supplemental Children's Life Insurance amount is less than or equal to the plan maximum

* If employee participation in the supplemental plan falls below or does not achieve 54%, Evidence of Insurability may be required for all future supplemental, spouse, or child coverage issued.

Funeral Planning & Concierge Services

About Funeral Planning & Concierge Services

Voya Employee Benefits works with Everest Funeral Package, LLC* to offer employer groups funeral planning and concierge services. This is a unique opportunity for employees to discuss and obtain information from independent experts regarding the planning of a funeral. With this service, employees have the ability to contact professionals who will aid them with funeral planning for themselves and eligible family members. Everest, an independent consumer advocate, helps consumers prepare for and deal with all aspects of a funeral.

The funeral planning and concierge service is available in conjunction with our Group Life Insurance contracts. Employers can elect to offer one of the plan levels available for all eligible employees.

Key program features

Employees will receive the following benefits:

- Advisor Planning Assistance from highly trained advisors, 24 hours a day, 7 days a week
 - Assistance to discuss funeral planning issues
 - Help creating a personal funeral plan
- PriceFinder research reports
 - Detailed, local funeral home price comparisons
 - Available on demand via Everest's website
- Online funeral planning tools
- Family assistance and plan implementation
- Negotiation Assistance

Plan Levels

Employers can choose one of the following:

Level 1: Employee, Spouse and Children

Level 2: Employee, Spouse, Children and Parents of the Employee and Spouse

* Funeral Planning and Concierge Services are provided by Everest Funeral Package, LLC, Houston TX.

Travel Assistance Services

About Voya Travel Assistance

Travel assistance services have become increasingly important for employers looking to provide employees and their dependents a sense of security when traveling away from home or the office. For this reason, Voya Employee Benefits is pleased to announce its collaboration with Europ Assistance USA, to provide the Voya Travel Assistance Program.

Voya Travel Assistance Services are provided by Europ Assistance USA, Bethesda, MD. Availability may vary by state.

Services

When traveling more than 100 miles from home, whether domestic or international travel, Voya Travel Assistance provides eligible participants four types of services: Emergency Transportation Services, Medical Assistance Services, Emergency Personal Services, and Pre-trip Information. These services are described in further detail below.

Eligible participants will have toll-free access to the Voya Travel Assistance customer service center 24 hours a day from anywhere in the world.

Emergency Transportation Services

This service offers the following features:

- **Emergency Evacuation/Medically Necessary Repatriation:** In the event of a medical emergency where it is determined medically necessary for an eligible participant to be transported under medical supervision to the nearest hospital or treatment facility or to be returned to his/her place of residence for treatment, Voya Travel Assistance will arrange and pay for the transport under proper medical supervision. All decisions as to the medical need for evacuation and/or return home, the means and/or timing of any evacuation, the medical equipment and escort to be used, and the final destination are decisions which will be made by physicians designated by Voya Travel Assistance in consultation with a local attending physician based on medical factors.
- **Visit by a Family Member or Friend:** If an eligible participant is traveling alone and is likely to be hospitalized for seven (7) consecutive days, or is in critical condition, Voya Travel Assistance will arrange and pay for economy class round trip transportation for one (1) member of the eligible participant's immediate family or one (1) friend designated by the eligible participant from his or her home to the place where he or she is hospitalized.
- **Traveling Companion Transportation:** If a travel companion loses previously made travel arrangements due to an eligible participant's medical emergency, Voya Travel Assistance will arrange and pay for the traveling companion's return home by the most direct and economical route.
- **Return of Dependent Children:** If an eligible participant is traveling alone and is likely to be hospitalized for seven (7) consecutive days, or is in critical condition and dependent children traveling with the eligible participant are left unattended because the eligible participant is in the hospital, Voya Travel Assistance will arrange and pay for their economy class transportation home with a qualified escort if necessary.
- **Return of Mortal Remains:** In case of death while traveling, Voya Travel Assistance will arrange and pay for the proper return of remains to the deceased's place of residence for burial, including all necessary government authorizations and transportation.

Medical Assistance Services

If medical care is required while abroad, Voya Travel Assistance can assist in the following ways:

- **Medical Referrals:** Voya Travel Assistance will assist eligible participants in finding physicians, dentists, and medical facilities.
- **Medical Monitoring:** During the course of a medical emergency, professional case managers, including physicians and nurses, will make sure the appropriate level of care is maintained or determine if further intervention, medical transportation, or possible repatriation (return to U.S.) is needed.

- **Emergency Medical Payments:** When it is necessary for an eligible participant to obtain medical services, Voya Travel Assistance, upon request, will advance up to \$10,000 to cover on-site medical expenses. The advance of funds will be made to the medical provider after Voya Travel Assistance has secured funds from the eligible participant or the eligible participant's family.
- **Replacement of Medication and Eyeglasses:** Voya Travel Assistance will arrange to fill a prescription that has been lost, stolen, or requires a refill, subject to local law, whenever possible. Voya Travel Assistance will also arrange for shipment of replacement eyeglasses. Costs for shipping of medication or eyeglasses, or a prescription refill, etc. are the eligible participant's responsibility.

Emergency Personal Services

To prepare for unexpected situations of a non-medical nature, Voya Travel Assistance offers these services:

- **Urgent Messages:** Voya Travel Assistance can send urgent messages and keep messages for eligible participants in its offices for up to 15 days.
- **Emergency Travel Arrangements:** If appropriate, Voya Travel Assistance will make new travel arrangements or change airline, hotel, and car rental reservations.
- **Emergency Cash:** Voya Travel Assistance will advance up to \$500 after satisfactory guarantee of reimbursement from an eligible participant. Any fees associated with the transfer or the delivery of funds are the eligible participant's responsibility.
- **Location Lost/Stolen Luggage/Personal Possessions:** Voya Travel Assistance will assist in locating and replacing lost or stolen luggage, documents, and personal possessions.
- **Legal Assistance/Bail:** Voya Travel Assistance will locate an attorney and advance bail funds, where permitted by law, with satisfactory guarantee of reimbursement (the eligible participant must pay attorney fees).
- **Interpretation/Translation:** Voya Travel Assistance will assist with the telephone interpretation in all major languages or will refer a eligible participant to an interpretation or translation service for written documents.

PreTrip Information

Voya Travel Assistance offers a wide range of information services before an eligible participant leaves home, including:

- Visa, Passport, Inoculation and Immunization Requirements
- Cultural Information
- Temperature and Weather Conditions
- Embassy and Consular Referrals
- Foreign Exchange Rates
- Travel Advisors
- International "Hot Spots"

Plan Administration

In the event of an Emergency Medical situation involving an employee or their dependent, Voya Travel Assistance will need to contact the Group Policyholder to verify coverage. Voya Travel Assistance will contact in this order:

- The Billing Contact as identified by Voya Employee Benefits
- The Case Contact as Identified by Voya Employee Benefits

It is the responsibility of the Group Policyholder to notify both Voya Employee Benefits and Voya Travel Assistance if you change your contact person. The Contact will be required to provide verification that (a) the Group Policyholder has current coverage with ReliaStar Life Insurance Company, and (b) the employee is individually covered under the Group Policy.

Payment for Services

After coverage has been verified, Voya Travel Assistance will arrange and pay for the following within the guidelines previously described:

- Emergency Evacuation Medically Necessary Repatriation
- Visit by a Family Member or Friend
- Traveling Companion Transportation
- Return of Dependent Children
- Return of Mortal Remains

These services are only eligible for payment by Voya Travel Assistance if Voya Travel Assistance is contacted at the time of service and arranged for the service.

Terminations

Europ Assistance USA will provide Travel Assistance services under the Voya Travel Assistance Program until the Group Policyholder's expiration or cancellation date, whichever comes first, or if Voya Employee Benefits terminates its Travel Assistance Program with Europ Assistance USA.

Exclusions and Limitations

- A. Voya Travel Assistance shall not evacuate or repatriate an eligible participant if the individual has a) infections that are under treatment that have not yet healed or b) if the individual is pregnant and is either in or passed her sixth month of pregnancy or c) if the Voya Travel Assistance designated physician determines that such transport is not medically advisable or necessary.
- B. Voya Travel Assistance shall not provide benefits and/or services enumerated if the coverage is sought as a result of:
- Suicide or attempted suicide;
 - Intentionally self-inflicted injuries;
 - War, invasion, acts of foreign enemies, hostilities between nations (whether declared or not), civil war;
 - Participation in any military maneuver or training exercise;
 - Being under the influence of alcohol;
 - Being under the influence of drugs or intoxicants unless prescribed by a physician;
 - Commission or the attempt to commit a criminal act;
 - Participation in bodily contact sports, skydiving, hang-gliding, parachuting, mountaineering, any race, bungee cord jumping, or speed contest;
 - Spelunking or caving, heliskiing, extreme skiing;
 - Pregnancy or childbirth (except for complications of pregnancy);
 - Curtailments or delayed return for other than medical reasons;
 - Traveling for the purpose of securing medical treatment;
 - Injury or illness which can be treated locally and does not prevent the continuing of the trip;
 - Travel undertaken against the advice of a physician;
 - Service not shown as covered.

The services described above currently are available in every country except Afghanistan, Somalia, Eritrea, Yemen and Eastern Timor. Voya Travel Assistance reserves the right to update the list of countries in which its services are not available. It is the responsibility of the eligible participant to inquire whether a country is "open" for assistance prior to his or her departure and during his or her stay.

Voya Travel Assistance also reserves the right to suspend, curtail or limit its services in any area in the event of rebellion, riot, military uprising, war, terrorism, labor disturbance, strikes, nuclear accidents, acts of god or refusal of authorities to permit Voya Travel Assistance to fully provide services.

If an eligible participant requests transport related to a condition for which a transport has not been deemed medically necessary by a physician designated by Voya Travel Assistance in consultation with a local attending physician or to any condition excluded hereunder, and the Group Policyholder agrees to be financially responsible for all expenses related to that transport, Voya Travel Assistance will arrange but not pay for such transport to a medical facility or to the eligible participant's residence and will make such arrangements using the same degree of care and completeness as if Voya Travel Assistance was providing service under this agreement.

Voya Travel Assistance shall not be responsible for any claim, damage, loss, costs, liability or expense which arises in whole or in part as a result of Voya Travel Assistance's inability to contact the Group Policyholder's authorized Contact for any reason beyond Voya Travel Assistance's control or as a result of the failure and/or refusal of the Group Policyholder to authorize services proposed by Voya Travel Assistance.

About Voya Financial®

Voya Financial, Inc. (NYSE: VOYA), helps Americans plan, invest and protect their savings - to get ready to retire better. Serving the financial needs of approximately 13.6 million individual and institutional customers in the United States, Voya is a Fortune 500 company that had \$11 billion in revenue in 2016. The company had \$517 billion in total assets under management and administration as of June 30, 2017. With a clear mission to make a secure financial future possible - one person, one family, one institution at a time - Voya's vision is to be America's Retirement Company®. Certified as a "Great Place to Work" by the Great Place to Work® Institute, Voya is equally committed to conducting business in a way that is socially, environmentally, economically and ethically responsible and has been recognized as one of the 2017 World's Most Ethical Companies® by the Ethisphere Institute, as well as one of the Top Green Companies in the U.S., by Newsweek magazine. For more information, visit voya.com. Follow Voya Financial on Facebook and Twitter @Voya.

Voya's Employee Benefits business is a top provider of stop loss coverage in the U.S. In addition, Voya provides a comprehensive and highly flexible portfolio of life, disability, and supplemental voluntary insurance products to businesses covering 6.2 million individuals. The business has more than 90 years of experience in the design, implementation and administration of employee benefits plans, and offers a full range of supplemental voluntary products that include critical illness, accident and hospital confinement indemnity insurance.

Awards and Accolades

2017 World's Most Ethical Companies®

Ethisphere Institute

In 2017, Voya was honored as a 2017 World's Most Ethical Companies® by the Ethisphere Institute, a global leader in defining and advancing the standards of ethical business practices. This is the fourth consecutive year that Voya earned this honor.

Fortune 500 Company

Fortune Magazine

Voya once again grabbed a spot on Fortune magazine's perennial Fortune 500 list. Our 2017 ranking at No. 266 marks our third consecutive appearance on the magazine's annual ranking of the country's largest companies by revenue. This year's ranking is 266, compared with No. 252 in 2016 and No. 268 in 2015.

Enhancements and Deviations

State of Nebraska RFP 5953 Z1

Benefit Enhancements & Deviations

Voya Employee Benefits is offering the following enhanced Life benefit and service enhancements at no charge:

- *Voya Employee Benefits has agreed to waive life insurance premiums on eligible individuals who are considered disabled under another carrier's Long Term Disability (LTD) plan, as described below. Individuals will be considered Totally Disabled during the same period that they are considered disabled under the LTD plan for purposes of Life Waiver of Premium (WOP) subject to the below requirements. The Employer must provide proof of the other company's LTD approval and ongoing LTD status information for Voya Employee Benefits to appropriately administer WOP claims. Please review this document thoroughly for instructions and data requirements.*
- *Aside from the standard 'terminal illness' requirement, our **Accelerated Death Benefit** can be utilized if an employee is diagnosed with a medical condition that is reasonably expected to require continuous confinement to a healthcare facility (where one is expected to remain for the rest of their life). The benefit can be accessed in a lump sum or monthly installments. A common use would be long term care.*
- *We are including **Everest Funeral Planning and Concierge Services**, which gives 24/7 Advisor Assistance to discuss issues around funeral planning. This service provides pre-negotiated pricing from funeral homes via a PriceFinder Report. The Voya-Everest Expedited Claim Process allows life insurance claims to be paid within 48 hours without requiring a certified death certificate if the claim meets certain conditions.*
- *We are including **Travel Assistance**, which provides planning and emergency services for employees traveling 150 miles or more from home.*
- *We are including **Portability and Conversion Assistance** that allows the employer to fully outsource the portability and conversion application process to Voya Financial. Voya will handle delivery of portability and conversion rights to all employees when their employment terminates, tracking all notifications.*
- *Should The State of Nebraska terminate the master policy, employees will be able to **convert up to the in-force amount**, regardless of coverage duration. This is an enhancement over the current plan's Conversion restrictions.*

Voya Employee Benefits is offering the following enhanced Life and AD&D Insurance benefits at no additional cost:

- *Voya Employee Benefits definition of child is Live Birth. The current carrier's definition for NDOL actives is at least 3 days old, and for Active Permanent Employees at least 14 days old.*
- *The Current Carrier includes a Loss of thumb/index finger of the same hand at 25% of the principal sum. Voya classifies this benefit as 'Loss of Hand' and the payout for this loss is 50% of the principal sum.*
- *Our offer includes Burn Disfigurement of 10% of the full amount up to \$30,000. Voya's definition of Burn Disfigurement is damage to the skin or other body parts resulting in permanent scarring on at least 5% of the body. The in-force carrier includes a Third Degree Burn Benefit. If the Third Degree Burn covers 50-74% of your body your benefit is 50% of the principal sum. If the Third Degree burn covers 75% or more of your body your benefit is 100% of the principal sum.*
- *Our offer includes an Occupational Assault benefit at 100% of the full benefit amount for the loss to a maximum of \$10,000. This was not offered by the in-force carrier.*
- *We are proposing maximums for Portability with up to \$750,000 of employee coverage eligible to be ported. Portability was not offered by the in-force carrier.*
- *Should The State of Nebraska terminate the master policy, employees will be able to convert up to the in-force amount, This is an enhancement to the current \$10,000 maximum by person.*

State of Nebraska RFP 5953 Z1 Benefit Enhancements & Deviations

Voya Employee Benefits agrees to match prior carrier benefits using Voya's standardly filed contract language.

The submitted proposal adheres to the current and proposed plan designs and all other requirements outlined in the RFP with the following deviations/exceptions:

Voya presents deviations to the current Life/AD&D insurance as described below:

- *The current carrier includes a coma benefit at 5% principal sum, paid for up to 11 months in a row; 45% of your principal sum if still comatose in month 12. Voya will match this benefit however our maximum payout will not exceed \$50,000.*
- *Voya Employee Benefits conversion provision is included for Life coverage only. AD&D is not convertible. The current carrier includes conversion for AD&D.*
- *The current AD&D exclusions include "Intended or accidental contact with nuclear or atomic energy by explosion and/or release". Voya Employee Benefits does not include this exclusion under our filed contract language. Should Voya Employee Benefits be named a finalist for State of Nebraska, Voya will consider single case filing to match the current provision if deemed necessary by the State.*
- *The current AD&D exclusions include "Third degree burns resulting from sunburn". Voya Employee Benefits does not include this exclusion under our filed contract language. Should Voya Employee Benefits be named a finalist for State of Nebraska, Voya will consider single case filing to match the current provision if deemed necessary by the State.*
- *The current AD&D exclusions include "Ligature strangulation resulting from auto-erotic asphyxiation". Voya Employee Benefits does not include this exclusion under our filed contract language. Should Voya Employee Benefits be named a finalist for State of Nebraska, Voya will consider single case filing to match the current provision if deemed necessary by the State.*

Voya Employee Benefits presents the following deviations to the proposed Standard Terms and Conditions Agreement:

- *Upon award of the business, ReliaStar will enter into a Services Agreement with the customer that will work in concert with the insurance contract. Certain items in the Terms & Conditions are not applicable or appropriately customized for the contemplated relationship and ReliaStar welcomes the opportunity to work through those items with the customer.*
- *Certain specific deviations are noted as redlined responses in the actual Standard Terms and Conditions Agreement that was provided as part of this marketing.*

Voya Presents Deviations to RFP Requests

Procurement Procedure - PRICES

- *The State of Nebraska is requested that prices submitted on the cost proposal form, once accepted by the State, shall remain fixed for the initial period of the contract. Any request for a price increase subsequent to the initial period of the contract shall not exceed five percent (5%) of the price bid for the period. Increases shall not be cumulative and will only apply to that period of the contract. The request for a price increase must be submitted in writing to the State Purchasing Bureau a minimum of 120 days prior to the end of the current contract period. Documentation may be required by the State to support the price increase. The State reserves the right to deny any requested price increase. No price increases are to be billed to any State Agencies prior to written amendment of the contract by the parties.*

State of Nebraska RFP 5953 Z1

Benefit Enhancements & Deviations

If after the first 42 months the incurred loss ratio (the sum of paid and pending claims, interest, conversion charges, change in waiver reserves and change in IBNR divided by total premium) is less than 87.5%, then Voya will renew rates at current for the 5th & 6th year. This includes Employee Basic Life, Retiree Basic Life and Employee Supplemental Life and excludes any AD&D and Dependent Life.

Procurement Procedure – REFERENCES AND CREDIT CHECKS

- The State reserves the right to conduct and consider reference and credit checks. The State reserves the right to use third parties to conduct reference and credit checks. By submitting a proposal in response to this RFP, the bidder grants to the State the right to contact or arrange a visit in person with any or all of the bidder's clients. Reference and credit checks may be grounds to reject a proposal, withdraw an intent to award, or rescind the award of a contract.

The scope of the referenced provision would not be applicable to the contemplated relationship.

Voya Employee Benefits is a member of the Voya® family of companies. It has been offering group insurance products for more than 90 years and worksite voluntary insurance products for more than 60 years. Its pedigree includes roots in Northwestern Aid Association, established in 1885, which merged with National Mutual Life Association to form Northwestern National Life Insurance Company in 1901. That company went public in 1995 as ReliaStar Life Insurance Company, and was purchased in 2000 by ING Groep N.V. Voya Financial, Inc., which rebranded from ING U.S., announced its Initial Public Offering (IPO) price on May 1, 2013, and began trading under the NYSE ticker symbol VOYA as a standalone company on May 2, 2013.

