

Coverage and Eligibility Definitions

Partner or Staff:

- Must be A US partner or staff member, scheduled to work a minimum of 20 hours per week, a US resident living within the US, and actively at work for at least 30 days before electing this benefit.
- Guaranteed Issue Eligibility: Issue Ages 18 – 64; up to \$250,000.
- Simplified Issue Eligibility: Issue Ages 18 – 64 for amounts above \$250,000 or Issue Ages 65 - 70; up to \$300,000.

If you are already enrolled in the Trustmark program, no action is required. However, you may increase your existing coverage with guaranteed acceptance by \$25,000 up to the plan maximum of \$250,000 based on the eligibility age listed above. Increases above \$25,000 require evidence of insurability up to the plan maximum of \$300,000.

Spouse or Domestic Partner

- Modified Guaranteed Issue: Issue Ages 18 – 64; up to \$15,000.
- Simplified Issue Eligibility: Issue Ages 18 – 64 for amounts above \$15,000 or Issue Ages 65 - 70; up to \$300,000.

Guaranteed Issue (GI): No health questions asked to obtain coverage for first time enrollees and current participants increasing their coverage by \$25,000. Automatic acceptance into the program provided you are actively at work upon enrollment. Partners, staff, and their dependents who previously applied for coverage which has been not taken, declined, cancelled, withdrawn, lapsed, or surrendered are not eligible for GI; their enrollments qualify under SI (see below).

Modified Guaranteed Issue (MGI): A shortened health questionnaire consisting of 2 medical questions (3 MGI questions for NY residents). If an MGI question is answered “yes”, additional underwriting for Simplified Issue is required. Underwriting must be passed to obtain coverage.

Simplified Issue (SI): A full health questionnaire, height/weight evaluation, Medical Information Bureau (MIB) screen, and a prescription drug screen. Additional medical questions may be asked based on findings within the MIB, prescription drug screen, or the application. Underwriting must be passed to obtain coverage.

When an application is qualified for a GI amount, but excess coverage is applied for, the excess will be underwritten using an accept or decline basis. If Trustmark declines the excess, Trustmark will issue the available maximum amount based on the GI rules.

Provided you meet the eligibility requirements, coverage is also available for your spouse/domestic partner age 18 – 70 – whether you participate or not. All enrollees must be US residents and living within the U.S. at the time of enrollment. Other family members, such as dependents, parents, siblings, etc. are not eligible for coverage.

Interns and temporary employees are ineligible for the program. US partners and staff deployed on global mobility long-term and short-term assignment are also not eligible. PwC Mexico partners and staff and individuals who are not on PwC’s payroll, such as persons classified by PwC as independent contractors and individuals whose services are provided through a staffing agency, even if they are retroactively reclassified as common law employees of PwC pursuant to applicable law or otherwise, cannot participate in this program.

The maximum amount of coverage for any one life is limited to the maximum limits above even when multiple offers are made available.

This plan includes the Terminal Illness Benefit and Long-Term Care (LTC) Benefit.