

**LIFE INSURANCE COMPANY OF NORTH AMERICA
1601 CHESTNUT STREET
PHILADELPHIA, PA 19192-2235**

AMENDATORY RIDER

Policyholder or Subscriber: **Prolifics, Inc**

Policy No.: **LK 964973** Effective Date: **January 1, 2023**

Applicable to Class(es): All Classes

This Amendatory Rider is attached to and made part of the Policy specified above.

The Company and the Policyholder hereby agree that the Policy is amended to include the following provision:

The Insurance Company may provide, or arrange for third parties to provide Eligible Participants services that are related to the benefits provided by the Policy, including services that would help to mitigate losses for which claims are paid, or their effects on Eligible Participants. These programs may be extended, modified or terminated at our discretion. The Insurance Company will provide the Policyholder or Subscriber with detailed information regarding these services and notice of any changes to these services. Services are the responsibility of the service providers the Insurance Company has retained. Some services may include discounts on additional services for which a charge may be made. Participation and use of services is voluntary and does not affect benefits under the Policy.

These services include but are not limited to the following:

Health Care Support Services

The Insurance Company has arranged for a third party provider to provide or arrange access for Eligible Participants to receive information and assistance to assist them in utilizing the benefits of their health care programs, which shall include (i) information concerning medical terms, tests, medications and treatments; (ii) identification of in-network and other primary health care providers, specialists, sources for second opinions, and ancillary services such as hospice, home care, medical equipment, and elder care facilities; (iii) assistance with pre-authorizations, referrals, and transfer of records; and (iv) assistance with understanding and resolving benefit claim issues. These services are not and do not include insurance benefits, medical, health care or legal services.

“Eligible Participants” mean an insured Employee and their family members.

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Employee Assistance Program

The Insurance Company has arranged for a third party provider to provide access to an Employee Assistance Program (EAP) to Eligible Participants. This program includes confidential consultation and referral services for issues involving mental health, substance abuse, and other problems of daily living, by telephone, 24 hours a day, seven days a week. In an emergency, trained clinicians will be available to address the situation and make a referral to a local counselor or crisis intervention center.

Eligible Participants may receive up to three in-person or virtual visits per issue per calendar year. Fees for clinical services other than assessment, referral and clinical visits in excess of three visits per person per issue per year will be the Eligible Participant's responsibility.

"Eligible Participants" mean an insured Employee and their family members.

Money Coaching Services

The Insurance Company will provide or will arrange for a third party provider to make available a 30 day money coaching program to Eligible Participants. This program will consist of (1) performing a financial needs analysis and creating a short-term plan to address the most severe financial needs; (2) working with the Eligible Participants to develop mid-term and longer-term financial goals; and (3) helping the Eligible Participants develop good money management habits. No financial products or services will be offered or sold to Eligible Participants in connection with this money coaching program.

In addition, we will make available web-based educational resources, including resources to assist Eligible Participants with the preparation of wills and similar legal documents, and discounted tax preparation services by a third party provider.

"Eligible Participants" mean an insured Employee and their household members.

Except as provided above, this Rider does not amend the terms of the Policy.

LIFE INSURANCE COMPANY OF NORTH AMERICA

A handwritten signature in blue ink that reads "Scott Berlin". The signature is written in a cursive style.

Scott Berlin, President