



Colgate's 2012 Global Expatriate Health & Insurance Programs Overview



If you are newly eligible for benefits as a result of a new Expat Assignment and you do not make your Health & Insurance Program elections within **31 days** of your hire date, you will receive the coverage shown in the “Default Coverage” section on page 9.

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Summary Plan Descriptions Are Available on www.ibenefitcenter.com/Colgate

Learn all you can about your Colgate benefit options and compare them before you enroll. Summary Plan Descriptions (SPDs) for each of the benefit plans referenced in this guide can be found by clicking on "Benefit Information and Resources" within the "My Health" section of the benefits website. See page 8 for important information about accessing the website for the first time. You can also access these documents at ourColgate.com → **ColgatePeople Direct Access** → **For Employees** → **Benefits**.

Medical Plan

The Medical Plan, administered by CIGNA, ensures that you have valuable protection if and when you or a covered dependent needs it. As a Global Expatriate, your Medical Plan option is the CIGNA International Indemnity Plan.

Benefit Category	CIGNA International Indemnity
Annual Deductible <ul style="list-style-type: none"> Individual Family 	\$0 per individual \$0 per family
Annual Out-of-pocket Maximum <ul style="list-style-type: none"> Individual Family 	\$1,350 per individual; includes coinsurance \$2,700 per family; includes coinsurance
Preventive Care*	Covered at 100%
Office Visits	Covered at 80% of R&C
Lab, X-ray and Diagnostic Services/Testing	Covered at 80% of R&C
Inpatient Hospital Care	Covered at 80% of R&C
Outpatient Surgical Facility	Covered at 80% of R&C
Emergency Room	Covered at 80% of R&C
Lifetime Maximum	Unlimited
Dependent Children	To age 26

* Refer to the SPD for a full list of covered services.

To enroll in the Medical Plan, obtain costs, or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For information regarding covered services and reimbursement of expenses, contact CIGNA directly at www.cignaenvoy.com. You can also call **1-800-441-2668** (toll free from within the U.S.) or **1-302-797-3100** (collect calls accepted from outside the U.S.).

If You Waive Coverage

If you decide to waive Medical Plan coverage, you will need to confirm that you have medical coverage elsewhere (under your spouse's plan, for example). If you are a full-time employee and you waive Medical Plan coverage, you will receive a credit. If you decline enrollment for yourself or your dependents (including your spouse), generally, you will not have another opportunity to elect medical coverage from the Company until the next Annual Enrollment period, unless you are eligible for HIPAA Special Enrollment, you experience a qualified life event or you meet other limited circumstances recognized under the federal tax laws. Please see the Medical Plan SPD for more information.

Prescription Drug Plan

If you have coverage under the Medical Plan, you are automatically covered for prescription drugs under the Prescription Drug Plan, which is administered by CIGNA. The cost of your prescriptions will be fully reimbursed except for a \$17 copay per prescription.

To access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, call CIGNA at **1-800-441-2668** (toll free from within the U.S.) or **1-302-797-3100** (collect calls accepted from outside the U.S.), or log on to www.cignaenvoy.com.

Vision Plan

Vision care is an important part of your overall health. The Vision Plan, administered by EyeMed, offers you coverage for annual vision examinations and substantial savings on eyewear through a large network of nationally recognized retail chains such as Target, Sears, Pearle Vision and LensCrafters. Similar to the Medical Plan PPO option, different benefits are available through the Vision Plan depending on whether you choose an in-network or out-of-network provider.

Vision Plan Benefit	In-Network	Out-of-Network
Vision Exams (one every 12 months)	\$0 copay	Up to \$35
Frames (one pair every 12 months)	\$130 allowance and 80% of balance over \$130	Up to \$65
Standard Plastic Lenses		
• Single vision	\$10 copay	Up to \$25
• Bifocal	\$10 copay	Up to \$40
• Trifocal	\$10 copay	Up to \$55
Laser Vision Correction (LASIK or PRK)	15% off retail price or 5% off promotional price	No benefit
Vision Plan Benefit	Coverage/Member Cost	Out-of-Network
Contact Lenses		
• Conventional	• \$130 allowance/85% of balance over \$130	• \$104
• Disposable	• \$130 allowance/100% of balance over \$130	• \$104
• Medically necessary	• \$0 copay/paid in full	• \$200
Contact Lenses Fit and Follow-up		
• Standard	• Up to \$55/100% of balance over \$55	• No benefit
• Premium	• 10% off retail price/90% of retail price	• No benefit

Note that coverage/reimbursement in the Vision Plan is provided for services rendered in the U.S. only.

To enroll in the Vision Plan, obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. To obtain a list of network providers, call EyeMed at **1-513-765-3380** or log on to www.eyemedvisioncare.com.

Dental Plan

Dental care is an important part of maintaining good health. By having routine checkups on a regular basis, you can often identify minor problems before they become serious and expensive. Recognizing this, the Dental Plan, administered by CIGNA, helps protect your dental health by encouraging preventive dental care. As a Global Expatriate, your Dental Plan option is the CIGNA International Dental Plan, which gives you the freedom to select any dentist in any country.

Benefit Category	CIGNA International
Diagnostic and Preventive Care	Covered 100% of R&C
Restorative Care	Covered 100% of R&C
Prosthetics	Covered 55% of R&C
Lifetime Maximum	\$7,000 for implants per covered person; \$3,500 for orthodontia per covered person

To enroll in the Dental Plan, obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For claim inquiries or to locate a dentist in your area, contact CIGNA at **1-800-441-2668** (toll free from within the U.S.) or **1-302-797-3100** (collect calls accepted from outside the U.S.), or log on to www.cignaenvoy.com.



Income Protection Plans

Owning a home, raising a family or providing for college education are just some of the major financial responsibilities many of us have in common or will face in the future. To protect your family's security, Colgate offers insurance plans. Accidents and illnesses create not only a physical and emotional strain on you and your family, but a financial burden as well. For this reason, the Company offers disability plans that help replace a portion of your income if you are unable to work. These plans work when you cannot and let you concentrate on getting better without the added worry of financial stress.

Life Insurance

Life Insurance, which is administered by the Aetna Life Insurance Company, pays a benefit to your beneficiary if you die.

- The Company pays the full cost of Life Insurance coverage equal to 1½ times your Group Life Earnings (GLE).
- Initial enrollments do not require Evidence of Insurability. Note for future enrollments, such as following a qualified life event or during Annual Enrollment, you are required to submit Evidence of Insurability if you elect to increase your coverage by more than one level (½ times your GLE).
- You can choose a higher level of Life Insurance (2 times through 8 times your GLE) and pay the additional cost, or you can choose a lower level (½ times or 1 times your GLE) and receive a credit that is based on the non-smoker rates. Note that there is a financial incentive for not smoking.
- Coverage is limited to a maximum of \$2,500,000.
- Federal tax law provides that the employer cost of Company-paid group term life insurance in excess of \$50,000 is taxable imputed income to the covered employee.

To obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, and for questions about Evidence of Insurability, contact Megan Byrne at Aetna by calling **1-860-808-2866** or Lizz McDonald at **1-860-808-5732**.

Accidental Death & Dismemberment (AD&D) Insurance

AD&D Insurance, which is administered by the Aetna Life Insurance Company, provides an additional benefit if you die or are dismembered or otherwise seriously injured as a result of an accident.

- The Company pays the full cost of AD&D Insurance equal to 1½ times your GLE.
- You can choose a higher level of AD&D Insurance (2 times through 8 times your GLE) and pay the additional cost, or you can choose a lower level (½ times or 1 times your GLE) and receive a credit.
- Coverage is limited to a maximum of \$2,500,000.

To increase or decrease your coverage level, obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, contact Megan Byrne at Aetna by calling **1-860-808-2866** or Lizz McDonald at **1-860-808-5732**.

Spouse Life/AD&D Insurance

Spouse Life/AD&D Insurance, which is administered by the Aetna Life Insurance Company, pays a benefit to you if your spouse dies or is dismembered or otherwise seriously injured as a result of an accident.

- The Company pays the full cost of Spouse Life/AD&D Insurance coverage equal to \$7,500.
- You can elect up to \$200,000 in coverage, but elections above \$50,000 will be subject to Evidence of Insurability.
- Coverage for your spouse cannot exceed the amount of your coverage.
- Federal tax law provides that the employer cost of Company-paid group term dependent life insurance in excess of \$2,000 is taxable imputed income to the covered employee.

To increase or decrease your spouse's coverage level, obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, and for questions about Evidence of Insurability, contact Megan Byrne at Aetna by calling **1-860-808-2866** or Lizz McDonald at **1-860-808-5732**.

Child Life/AD&D Insurance

Child Life/AD&D Insurance, which is administered by the Aetna Life Insurance Company, pays a benefit to you if your child dies or is dismembered or otherwise seriously injured as a result of an accident.

- The Company pays the full cost of Child Life/AD&D Insurance coverage equal to \$5,000 for each child.
- You can elect a higher level of coverage up to \$20,000 for each child.
- Coverage for your child cannot exceed the amount of your coverage.

To increase your child's coverage level, obtain costs or access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, contact Megan Byrne at Aetna by calling **1-860-808-2866** or Lizz McDonald at **1-860-808-5732**.

Short-Term Disability (STD)

STD, which is administered by MetLife, allows you to receive your full base salary for up to 180 days (6 months) at no cost to you if you are disabled or injured due to an approved and substantiated illness or injury.

- Enrollment is automatic and the Company pays the full cost of STD coverage.
- Coverage is effective upon your hire date.

To access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, contact MetLife. If you are calling from outside the U.S., first dial the AT&T USADirect access number of the country from which you are calling. An AT&T operator will then prompt you to enter the toll-free number, **800-237-5298**. No other codes or digits are required, and you do not need to dial "1" before the area code.

Note that if the operator requests a calling card number, you should advise them that you are dialing AT&T USADirect toll free. You should not provide a calling card or other form of payment.

Long-Term Disability (LTD)

LTD, which is administered by MetLife, replaces a portion of your income if you are disabled or injured due to an approved and substantiated illness or injury that requires your absence from work beyond 180 days.

- The Company pays the full cost of LTD coverage equal to 50% of Recognized Earnings (RE).
- You can elect a higher percentage of coverage (60% or 70% of RE), but you are responsible for the additional cost.
- The maximum covered RE is \$300,000.

To access general information, visit www.ibenefitcenter.com/Colgate or call **1-857-362-5987**. For additional information, contact MetLife. If you are calling from outside the U.S., first dial the AT&T USADirect access number of the country from which you are calling. An AT&T operator will then prompt you to enter the toll-free number, **800-237-5298**. No other codes or digits are required, and you do not need to dial "1" before the area code.

Note that if the operator requests a calling card number, you should advise them that you are dialing AT&T USADirect toll free. You should not provide a calling card or other form of payment.

Long-Term Care (LTC)

LTC, which is administered by Prudential, is the assistance you or a loved one may need as a result of an accident, debilitating disease, chronic illness, disability or cognitive impairment. It can help cover the costs of specialized care in a nursing home or in an assisted living/residential care facility. Often, these services are not covered by Medicare or our Medical Plan, except in limited situations that require skilled medical services.

- Coverage is available for you, your spouse or domestic partner, parents, parents-in-law, grandparents, grandparents-in-law and your adult children and their spouses or domestic partners.
- A choice of daily and lifetime maximums and optional features are available to best meet your needs.

For more information and to view costs and elect coverage, log on to Prudential's website, gltc.prudential.com/gltc (**Group name:** Colgate; **Password:** colgategltc), or call **1-215-658-5150**. Enrollment for this benefit is not available on www.ibenefitcenter.com/Colgate.

Critical Illness Insurance

Critical Illness Insurance, which is administered by MetLife, provides additional financial protection for the following medical conditions: heart attack, cancer, stroke, kidney failure, major organ transplant or coronary artery disease. If you or your covered dependents experience one of these medical conditions and meet all the coverage requirements, you will receive a lump-sum benefit that can be used to help with expenses (e.g., copays, deductibles, travel to treatment centers) that are not covered by your Medical Plan or LTD.

- You can elect coverage in \$10,000 increments up to \$100,000 for yourself, a spouse or a domestic partner.
- Coverage is \$5,000 per child.

For more information or to enroll in coverage, log on to mybenefits.metlife.com or contact MetLife customer service at **1-908-253-2328**. Enrollment for this benefit is not available on www.ibenefitcenter.com/Colgate.

Flexible Spending Accounts

Flexible Spending Accounts, administered by Anthem Blue Cross and Blue Shield, enable you to save money on a before-tax basis to pay for eligible health care and dependent care expenses, thereby reducing your taxable income. As a result, your federal income taxes, Social Security taxes and most state and local taxes will be lower.

Health Care Account (HCA)

The Medical, Dental and Vision Plans provide comprehensive coverage and are designed to pay a major portion of the expenses you incur for these services. Yet they do not always pay 100% of the expenses. To complement these plans, the Company provides the HCA – a tax-effective way for you to pay part or all of certain expenses that are not covered under the Medical, Vision and Dental Plans, such as deductibles, copays and expenses over the R&C charge.

You can also be reimbursed from your HCA for expenses you incur for prescription drugs, as well as for over-the-counter items and supplies, such as blood pressure monitors, thermometers, insulin, bandages and first aid kits. The HCA cannot reimburse you for over-the-counter drugs unless they are prescribed by a doctor.

- You can save a per-family maximum of \$5,000* (and a minimum of \$104) annually in your HCA account.
- HCA contributions made during the year can be used for expenses incurred through March 15 of the following year.
- You will forfeit any unused amounts.

** If you are married and file separate income tax returns, your annual contribution limit is \$2,500. If you have questions about what types of expenses are reimbursable, please refer to IRS Publication 502, at www.irs.gov.*

To enroll or to access general information, visit www.ibenefitcenter.com/Colgate or call 1-857-362-5987. For additional information, log on to www.benefitadminsolutions.com/anthem or contact Anthem Blue Cross and Blue Shield at 1-214-596-2141 (fax: 1-214-596-2143 or 1-214-596-2144).

Dependent Care Account (DCA)

The Company also provides a DCA, so that you can use your before-tax contributions to pay part or all of certain dependent care expenses you incur in order to work, such as child care or babysitting in your home. If you are married, the dependent care expenses must also enable your spouse (if married) to work or attend school full time.

- You can save a per-family maximum of \$5,000 (and a minimum of \$312) annually in your DCA account.
- DCA contributions made during the year must be used during the calendar year.
- You will forfeit any unused amounts.

If you have questions on what types of expenses are reimbursable, please refer to IRS Publication 502, at www.irs.gov.

To enroll or to access general information, visit www.ibenefitcenter.com/Colgate or call 1-857-362-5987. For additional information, log on to www.benefitadminsolutions.com/anthem or contact Anthem Blue Cross and Blue Shield at 1-214-596-2141 (fax: 1-214-596-2143 or 1-214-596-2144).

Vacation Exchange Program

Each year, during Annual Enrollment, the Company offers the Vacation Exchange Program to non-union, full-time employees to give you the flexibility to increase or decrease your vacation time by up to five days a year (maximum days are defined by your work schedule). If you are eligible to participate in this program, you can purchase additional vacation days, or you can sell vacation days and receive a credit.



Select Your Coverage

You can enroll in most of your benefits online through www.ibenefitcenter.com/Colgate from work or from home. You must enroll directly with the carrier for Long-Term Care and Critical Illness Insurance. Refer to page 6 for Long-Term Care and Critical Illness Insurance contact information.

Make Informed Decisions

Review this guide for an overview of benefit offerings. Visit www.ibenefitcenter.com/Colgate or [ourColgate \(ourColgate.com\)](http://ourColgate.com) → [ColgatePeople Direct Access](#) → [For Employees](#) → [Benefits](#) to access SPDs that provide detailed information on your benefits. Also, you can view the per-pay-period costs associated with these benefits online. If you are newly eligible for benefits as a result of a new Expat Assignment, go to the “Your Health” section of the website to enroll. Then click on the “You Have a Pending Qualified Life Event Change” link in the “Action Items” to make your elections.

When You Access www.ibenefitcenter.com/Colgate for the First Time

Enter your User Name, which is initially your Social Security number, and your Password, which will initially be your full date of birth (MMDDYYYY). You will be asked to change your User Name and Password and to select security questions that you may use to log on to the website in the future if you forget your User Name and/or Password.

A Word About Security

Your benefits website, www.ibenefitcenter.com/Colgate, allows you to make important benefit decisions online and to view and print personalized information. The login process provides a level of security that only allows you to access your information. You should also take the following precautions to ensure the integrity of your personal information:

- **Print it and pick it up.** If you are printing personal information at work, be sure to pick it up from the printer immediately.
- **Leave it and sign off.** When you leave your desk, log off of www.ibenefitcenter.com/Colgate by clicking on the “Logout” button.
- **Keep it secret and keep it safe.** Do not share your Social Security number or Password with anyone.

A Few Words About Eligibility

In general, the Health & Insurance Programs described in this guide are available to Colgate employees who are on Global Expatriate Assignments outside of the U.S.

You are eligible for the following programs immediately upon hire: Medical Plan, Vision Plan, Dental Plan, STD, LTD, Flexible Spending Accounts, Long-Term Care and Critical Illness Insurance. You are eligible for the following programs on the first of the month following one full month of service: Life Insurance, AD&D Insurance, Spouse Life/AD&D Insurance and Child Life/AD&D Insurance.

Medical Plan

Your children under age 26 are eligible for coverage under the Medical Plan. The Internal Revenue Service (IRS) defines a “child” as a son, daughter, stepson or stepdaughter, or an individual lawfully placed with the employee for legal adoption by an authorized placement agency or by a judgment, decree or other court order.

Other Health & Insurance Programs

Dependents eligible for coverage include your spouse or domestic partner;* your unmarried children under age 23 who are not employed full time and are dependent on you for support; your unmarried children of any age who are or become physically or mentally disabled while covered, and who are not employed full time and are dependent on you; and alternate recipients under a Qualified Medical Child Support Order (QMCSO) approved by the Plan Administrator.

For purposes of the Health & Insurance Programs, children include your natural children; your legally adopted children (covered at the time of placement for adoption);** your stepchildren; and any other children who live in your home, who are supported solely by you and to whom you are related by blood or marriage or for whom you are the legal guardian, and who are not eligible for or enrolled in any other medical coverage.

* You may enroll your domestic partner in the Medical, Vision, Dental and Critical Illness Insurance Plans. For details about domestic partner coverage under the Medical, Vision and Dental Plans, please contact the Colgate Benefits Information Center at 1-857-362-5987. For details about domestic partner coverage under the Critical Illness Insurance Plan, please contact MetLife customer service at 1-908-253-2328.

** Placement for adoption means the assumption and retention of a legal obligation for total or partial support of a child in anticipation of the child's adoption. Placement terminates when the legal obligation terminates.

Default Coverage

If you are newly eligible for benefits as a result of a new Expat Assignment, you must make most of your Health & Insurance Program elections within **31 days** of your hire date. If you do not make your elections within 31 days, you will receive default coverage according to the table below. This includes the programs for which you are eligible on the first of the month following one full month of service (any associated costs are not applicable until coverage is effective).

Benefit	Default coverage
Medical (including prescription drug coverage)	CIGNA International Indemnity Plan, employee-only coverage
Vision	No coverage
Dental	No coverage
Life Insurance	Free coverage equal to 1½ times your GLE
Spouse Life/AD&D (if applicable)	Free coverage equal to \$7,500 for spouse
Child Life/AD&D (if applicable)	Free coverage equal to \$5,000 for each child
STD	Free coverage equal to your full base salary for up to 180 days (6 months)
LTD	Free coverage equal to 50% of your RE
Long-Term Care (elections can be made at any time)	No coverage
Critical Illness Insurance (elections can be made at any time)	No coverage
Flexible Spending Accounts: HCA and DCA	No coverage

Changing Coverage During the Year

Your benefit elections (with the exception of Long-Term Care and Critical Insurance) cannot be changed until the next Annual Enrollment period, unless you experience a qualified life event. If you experience a qualified life event, you can make changes to your benefit elections within 31 days of the event by logging on to www.ibenefitcenter.com/Colgate and clicking on “Start Qualified Life Event Change” within the “Your Health” section of the website. If you do not make changes within 31 days, you will have to wait until you experience another qualified life event, or until Annual Enrollment of the following year, to make changes.

For Long-Term Care, you can enroll at any time following the initial 31-day election period by completing an Evidence of Insurability Form.

What Qualifies as a Life Event?

Examples include:

- Marriage or divorce.
- Child birth or adoption, or child placed with you for adoption.
- Loss of coverage by spouse or domestic partner.

Need More Help?

If you would prefer to speak with someone about your Health & Insurance Programs, you can contact a customer service representative at the Colgate Benefits Information Center at **1-857-362-5987**. Customer service representatives are available from 8:30 a.m. to 5:30 p.m. Eastern Time, Monday through Friday. You may leave a voicemail message during hours that customer service representatives are not available.

Things to Consider

Before making your decisions, carefully consider your coverage needs, the potential for tax or other cost savings and your beneficiaries.

Review the Medical Plan Summary. This illustrates the features of the plan for which you are eligible. Please take the time to review the Medical Plan information carefully. Also, consider these questions:

- How does the cost of coverage under the Health & Insurance Programs compare with the cost under your spouse's or domestic partner's plan?
- How do the benefits compare?
- How do you and your spouse's or domestic partner's plans coordinate benefits if you both decide to elect coverage?

Find the Medical Plan summary on page 2 of this guide, or view them while you are making your benefit elections on www.ibenefitcenter.com/Colgate.

Take Advantage of Online Tools. Log on to www.ibenefitcenter.com/Colgate and look under "Managing Your Health and Insurance" within the "Your Health" section of the website for tools that allow you to create customized benefit scenarios.

- **Save on Taxes:** Use the tax savings estimators to see how much you could save by contributing to a Health Care or Dependent Care Account.
- **Review Your Life Insurance Needs:** Determining how much life insurance you should have can be challenging. For additional help, use the Life Insurance Estimator. The estimator looks at several factors to help you decide if you and your family are sufficiently protected, including:
 - Current assets.
 - Current expenses and liabilities.
 - Projected expenses such as college tuition and mortgage payments.



Do Not Forget to Designate a Beneficiary

When you establish a beneficiary, you determine who will receive the value of your benefits in the event of your death. If you do not choose your own, your beneficiary will be chosen for you based on the provisions of each benefit program.

To elect your Life Insurance and AD&D Insurance beneficiary, log on to www.ibenefitcenter.com/Colgate. Go to the "Your Health" section of the benefits website, then choose "Your Beneficiary Data" in the left navigation bar.

You can also elect a beneficiary for your Savings & Investment (S&I) Plan account by clicking on "Your Beneficiaries" within the "Your Savings" section of the website.

Terms and Acronyms

Terms to Know

Coinsurance: The percentage the plan pays for covered services after you pay the deductible. For example, the PPO option has an in-network coinsurance of 90%. Once you pay the deductible, the plan pays 90% of the remaining costs, and the amount you pay (your coinsurance) is 10%.

Copay: The amount you pay up front each time you receive certain services. Copays do not count toward your deductible or Out-of-pocket Maximum. Also, they will continue to apply once the Out-of-pocket Maximum is reached.

Deductible: The amount you pay before the plan starts to pay its share. The Medical Plan has no deductible.

Group Life Earnings (GLE): Equals your highest Recognized Earnings, determined for each year you are eligible to participate in a benefit plan or plans. By providing coverage based on Group Life Earnings, your life insurance will not decrease from one year to the next as your Recognized Earnings change.

Imputed Income: The term the IRS uses to designate the value of benefits or coverage that it considers income for tax purposes. For example, the value of Company-paid life insurance of over \$50,000 is considered imputed income.

Out-of-pocket Maximum: The most you will pay for covered medical expenses in one year before the plan pays 100% of covered medical expenses for the rest of the year.

Reasonable & Customary (R&C): The usual amount paid in your geographic region for a specific health care service or supply.

Recognized Earnings (RE): Generally, RE will be the greater of:

- Your total compensation paid during the previous calendar year, minus such items as moving expenses, special awards and the employer cost of life insurance above \$50,000; or
- Your regular hourly rate as of the most recent January 1, excluding overtime or abnormal schedules, but including average incentive payments and night shift premiums paid in the prior year, amounts allocated to your S&I Plan account under the Bonus Savings Account (BSA) program, excluding any gross-up; and amounts allocated in the prior year to your S&I Plan account under the Income Savings Account (ISA) program, excluding any gross-up.

Commonly Used Acronyms

When it comes to benefits terminology, it can seem like alphabet soup. Here is a guide to some of the more commonly used acronyms.

- **AD&D** – Accidental Death & Dismemberment
- **DCA** – Dependent Care Account
- **EOI** – Evidence of Insurability
- **GLE** – Group Life Earnings
- **HCA** – Health Care Account
- **LTC** – Long-Term Care
- **LTD** – Long-Term Disability
- **R&C** – Reasonable & Customary
- **RE** – Recognized Earnings
- **SPD** – Summary Plan Description
- **STD** – Short-Term Disability

Important Legal Notices

Women's Health and Cancer Rights Act of 1998

Health care plans that cover mastectomies must cover post-mastectomy reconstructive breast surgery. Specifically, health plans must cover:

- Reconstruction of the breast on which the mastectomy has been performed.
- Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- Prostheses.
- Treatment of physical complications at all stages of the mastectomy, including lymphedemas.

Benefits required by law will be provided in consultation between the patient and the attending physician. These benefits are subject to the health plan's regular coinsurance, copays and deductibles.

Newborns' and Mothers' Health Protection Act

Under federal law, health care plans may not restrict any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a normal delivery or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother and with the mother's consent, from discharging the mother or her newborn earlier than 48 hours (or 96 hours, as applicable).

Medicaid and the Children's Health Insurance Program (CHIP) Offer Free or Low-Cost Health Coverage to Children and Families

If you are eligible for employer health coverage but are unable to afford the premiums, some states have premium assistance programs that can help pay for coverage. These states use funds from their Medicaid or CHIP programs to help people who are eligible for employer-sponsored health coverage, but need assistance in paying their health premiums.

If you or your dependents are already enrolled in Medicaid or CHIP, you can contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are not currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your state Medicaid or CHIP office. Dial 1-877-KIDS NOW or log on to www.insurekidsnow.gov to find out how to apply. If you qualify, you can ask the state if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, the Colgate Plan will permit you and your dependents to enroll in the plan, in accordance with CHIP regulations. Colgate will offer a "special enrollment" opportunity as long as you request coverage within 60 days of being determined eligible for premium assistance as long as you and your dependents are eligible and are not already enrolled in the plan.

Wellstone-Domenici Mental Health Parity and Addiction Equity Act of 2008

Like the Mental Health Parity Act of 1996, the new federal parity law applies to group health plans with 50 or more employees, and states that benefit limits for mental illness and substance-use disorders cannot be more restrictive than limits for medical conditions and surgical procedures. However, while the original legislation required parity only in terms of annual and lifetime dollar limits, the new law expands the requirement to include financial and numerical limits on inpatient and outpatient services. This includes deductibles, copays and other expenses, as well as the number of allowed visits, days of coverage and similar limits.

Colgate's Medical Plan is compliant with this legislation, which means mental health and substance-use disorder benefits are paid in the same manner as other medical expenses.

This guide describes some of the benefits available to certain employees of the Colgate-Palmolive Company. It is not intended to be a plan document or an insurance carrier contract. In the event of any conflict between this guide and the official plan documents and/or insurance carrier contracts, the terms and provisions of the plan documents and/or insurance carrier contracts always govern. The benefits described in this guide do not constitute an employment contract, nor do they guarantee future employment. The Plan Administrator (or its delegates) reserves the sole and absolute discretion to interpret the plans and make all determinations thereunder (including factual determinations) and such determinations are binding on all parties. Colgate reserves the right to amend or terminate (in whole or in part) any of its benefits plans and programs at any time and for any reason.

