

Benefits Handbook Date January 1, 2013

Alere

Marsh & McLennan Companies



Alere

Alere is a suite of wellness benefits designed to help you and your family members maintain and improve your health. Using the Alere wellness benefits can open your eyes to new ways of thinking about your health. It can also connect you with health professionals who specialize in the steps you want to take, and choices you want to make.

A Note about ERISA

The Employee Retirement Income Security Act of 1974 (ERISA) is a federal law that governs many employer-sponsored plans including this one. Your ERISA rights in connection with Alere's Health Advisor Program, Online Wellness Programs, Health Improvement Programs and Condition Management Programs are detailed in the Administrative Information section and that, together with this section and the applicable section about participation constitute the Summary Plan Description for Alere's Health Advisor Program, Online Wellness Programs, Health Improvement Programs and Condition Management Programs.

Alere's Health Assessment Program is not governed by ERISA. For example, ERISA requirements such as providing a Summary Plan Description, filing an annual report (Form 5500 Series), or making a summary annual report available do not apply to the Health Assessment Program.

SPD and Plan Document

This section provides a summary of Alere as of January 1, 2013.

This section, together with the Administrative Information section and the applicable section about participation, forms the Summary Plan Description and plan document of Alere.

The Program at a Glance

Alere is a comprehensive suite of wellness benefits. The chart below contains some important program features. For more information, see “How the Program Works” on page 4.

Program Feature	Highlights
How the Program Works	<ul style="list-style-type: none"> ▪ Alere wellness benefits are designed to help you and your family maintain and improve your health. ▪ It features a Health Assessment, Health Advisor Program, Online Wellness Programs, Health Improvement Programs, and Condition Management Programs. ▪ Employees and their eligible spouse or domestic partner can earn incentives for completing certain health activities. ▪ See “How the Program Works” on page 4 for details.
Eligibility	<ul style="list-style-type: none"> ▪ You are eligible to participate in the Alere wellness benefits if you meet the eligibility requirements described under “Eligible Employees” on page 2. ▪ See “Participating in the Program” on page 2 for details.
Family and Household Member Eligibility	<ul style="list-style-type: none"> ▪ Your family and household members can use Alere if they meet the eligibility requirements described under “Family Member Eligibility” on page 3. ▪ See “Participating in the Program” on page 2 for details.
Enrollment	<ul style="list-style-type: none"> ▪ Coverage is automatic.
Cost	<ul style="list-style-type: none"> ▪ There is no cost to you for using any of the Alere wellness benefits. However, if Alere provides referrals to other services, you are responsible for paying for any services you choose.
Confidentiality	<ul style="list-style-type: none"> ▪ Your privacy is guaranteed. Reporting of information adheres to Health Insurance Portability and Accountability Act (HIPAA) privacy laws. ▪ See “How the Program Works” on page 4 for details.
Contact Information	<p>For more information:</p> <ul style="list-style-type: none"> ▪ Contact Alere at +1 866 201 7918 or ▪ Visit www.HealthyMeMMC.com <p>Alere administers its wellness benefits for Marsh & McLennan Companies. Alere’s decisions are final and binding and Marsh & McLennan Companies does not have any authority to change Alere’s decisions.</p>

Participating in the Program

The following section provides information on how you start participating in the program.

If you are an employee of Marsh & McLennan Companies or any subsidiary or affiliate of Marsh & McLennan Companies and you meet the requirements described, you become eligible on your eligibility date.

Your eligible family and household members are also covered under this program.

Eligible Employees

To be eligible for the benefits described in this section you must meet the eligibility criteria listed below.

Marsh & McLennan Companies Employees (other than MMA)

You may be eligible to participate in the Alere wellness benefits if you are an employee classified on payroll as a U.S. regular employee of Marsh & McLennan Companies or any subsidiary or affiliate of Marsh & McLennan Companies (other than Marsh & McLennan Agency LLC and any of its subsidiaries (MMA)). Spouses, domestic partners and eligible children also may participate. Condition Management Programs are available only to individuals enrolled in a Marsh and McLennan Companies medical plan administered by Aetna, United Healthcare, or Empire Blue Cross Blue Shield.

Individuals who are classified on payroll as temporary employees or who are compensated as independent contractors are not eligible to participate in the Alere wellness benefits.

Eligible MMA Employees

You may be eligible to participate in the Alere wellness benefits if you are an employee classified on payroll as a U.S. regular employee of Marsh & McLennan Agency – Corporate (MMA-Corporate), Insurance Alliance, a Marsh & McLennan Agency LLC company (Insurance Alliance), Marsh & McLennan Agency LLC – Northeast (MMA-Northeast) or Marsh & McLennan Agency LLC – Alaska (MMA-Alaska). Spouses, domestic partners and eligible children also may participate. Condition Management Programs are available only to individuals enrolled in a Marsh & McLennan Companies medical plan administered by Aetna, United Healthcare, or Empire Blue Cross Blue Shield.

Individuals who are classified on payroll as temporary employees or who are compensated as independent contractors are not eligible to participate in the Alere wellness benefits.

“You,” “Your,” and “Employee”

As used throughout this plan summary, “employee”, “you” and “your” always mean:

- For Marsh & McLennan Companies participants: a U.S. regular employee of Marsh & McLennan Companies or any subsidiary or affiliate of Marsh & McLennan Companies (other than MMA and any of its subsidiaries).
- For MMA participants: a U.S. regular employee of MMA-Corporate, Insurance Alliance, MMA-Northeast or MMA-Alaska.

Incentives

You may be eligible to earn incentives by completing certain health initiatives. See “Incentives” on page 5 for more information.

Your Eligibility Date

	No Waiting Period	30 Day Waiting Period
Marsh & McLennan Companies (other than Marsh, MMA)	There is no waiting period if you are actively at work. Your eligibility date is the first day you are actively at work on or after your date of hire.	
Marsh		There is a 30-day waiting period after your date of hire for Alere.
MMA-Corporate, Insurance Alliance, MMA-Northeast or MMA-Alaska		There is a 30-day waiting period after your date of hire for Alere.

Family Member Eligibility

Your family and household members may be eligible to use Alere. A family and household member is your:

- spouse
- approved domestic partner
- child for whom you are the legal guardian
- child of an approved domestic partner
- legally adopted child
- biological child
- stepchild.

Dependent children may be eligible until the end of the calendar year in which they attain age 26. This eligibility provision applies even if your child is married, has access to health coverage through his or her employer, doesn't attend school full-time or live with you, and is not your tax dependent.

Only dependent children over age 18 are permitted to call Alere. A parent or guardian must call on behalf of dependent children over the age of 6 that are eligible for the Asthma Disease Management Education Only or the Disease Management Coaching Programs.

Marsh & McLennan Companies has the right to require documentation to verify the relationship (such as a copy of the court order appointing legal guardianship). Alere does not cover foster children or other children living with you, including your grandchildren, unless you are their legal guardian with full financial responsibility—that is, you or your spouse claims them as a dependent on your annual tax return.

When Coverage Starts and Ends

You are covered under this program on the later of your first day of employment or eligibility.

Coverage ends when the first of the following occurs:

- the date you no longer meet the eligibility requirements
- the date you terminate employment
- the date of your death
- the date the program is terminated.

Cost

There is no cost to you for using any of the Alere wellness benefits. However, if Alere provides referrals to other services, you are responsible for paying for any services you choose.

Converting to an Individual Policy

Can I convert this coverage to an individual policy when my coverage ends?

No. You cannot convert this coverage to an individual policy when your coverage ends.

COBRA Coverage

Can I continue coverage through COBRA?

Yes. You can continue coverage under this program through COBRA if you experience a COBRA qualifying event and register your event within the legally allowable time frame.

How do I apply for COBRA?

For more information about your rights and coverage options under the Consolidated Omnibus Budget Reconciliation Act, see “Continuing Coverage” in the *Participating in Healthcare Benefits* section.

How the Program Works

Alere offers a comprehensive suite of wellness benefits designed to help you improve and maintain your health, including:

- An Online Health Assessment
- A Health Advisor Program
- Online Wellness Programs
- Health Improvement Programs
- The Quit For Life[®] Tobacco Cessation Program

- Condition Management Programs
- A Gaps in Care Program.

Incentives

If you are eligible, you and your spouse or domestic partner may also be eligible to earn incentives by completing certain health activities. Your other dependents are not eligible to earn incentives.

The specific incentives available and the steps you need to take to earn them may change periodically. For more information on incentives, contact Alere at +1 866 201 7918.

How will Alere try to get in touch with me?

If you are eligible to participate in a Health Improvement Program or Condition Management Program, Alere will do one or more of the following:

- Mail a letter to your address on file,
- Send you an e-mail, and/or
- Make an outbound call to you.

The letter will invite you to call an Alere representative and provide instructions. An Alere Health Advisor may contact you or your eligible family member by phone if there is no response to the initial outreach by mail. Please be aware that delays in U.S. postal service delivery may result in a situation where a call is made to you before the initial letter arrives at your home.

Can I opt out of having Alere contact me?

If Alere contacts you about participating in a Health Improvement Program or Condition Management Program and you decline to participate, Alere will not contact you about that particular program again. However, Alere may contact you later if you are identified as a candidate for a different program.

Will Alere try to contact other family members about their own health?

Yes, if one of your eligible family members is eligible for a Health Improvement Program or Condition Management Program. For this purpose, an “eligible family member” is your spouse or domestic partner or child over the age of 18.

If I have an authorized unpaid leave of absence, can I still participate in the Alere wellness benefits?

If Marsh & McLennan Companies grants you an authorized unpaid leave of absence, coverage for you and your family members continues for the duration of your authorized period of leave.

If I become disabled, does Alere still provide a benefit?

During a period of approved disability, you and your covered family members remain eligible for coverage.

If I die, does Alere still provide a benefit to my eligible family members?

If you die while you are an active employee, your eligible family members may be eligible for coverage under the Consolidated Omnibus Budget Reconciliation Act (COBRA). For information on COBRA, see “Continuing Coverage” in the *Participating in Healthcare Benefits* section.

If I no longer satisfy Alere’s eligibility requirements, what happens to my Alere benefits?

Your coverage ends on the date you no longer satisfy Alere’s eligibility requirements. Coverage for eligible family members ends when yours does.

When coverage ends, COBRA coverage may be available, as described under “Continuing Coverage” in the *Participating in Healthcare Benefits* section.

If my family member loses eligibility status, what happens to their Alere benefits?

If your family member no longer meets the eligibility requirements, his or her coverage ends.

Family members who lose coverage may be eligible for coverage under COBRA provisions as described under “Continuing Coverage” in the *Participating in Healthcare Benefits* section.

Health Assessment

The Health Assessment is a questionnaire about your everyday living habits and medical history. Your answers are used to provide you with an overview of your current risk for health problems. This overview will also outline simple steps you can take to reduce your risk. The Health Assessment and report are confidential, free and completely voluntary.

The Health Assessment is generally available once per year for a limited period of time. You will receive a separate communication regarding the availability of the Health Assessment. Taking the Health Assessment will instantly provide you with an overview of your current health status and some suggested action steps.

What do I need to prepare?

Have a copy of your most recent blood pressure and lab results on hand; call your doctor if you do not already have these “health numbers.” The Health Assessment will ask you for your cholesterol, triglyceride and blood sugar levels. These numbers are required for completion and to provide the most accurate assessment of your health status.

What happens next?

You can call an Alere Health Advisor who will walk you through your personalized Health Assessment report and make suggestions about next steps. Keep in mind, only Alere has access to the information you enter in your Health Assessment.

Based on the results of your Health Assessment, your Alere Health Advisor may assign a personal Alere Health Coach to help you set goals and make progress toward mutually agreed upon health priorities. Your Alere Health Advisor may also suggest self-directed Online Wellness Programs if your Health Assessment report does not indicate a need for an Alere Health Coach or if you are not interested in working with an Alere Health Coach.

Health Advisor Program

An Alere Health Advisor is a health professional who is familiar with the Alere resources available to you. You can receive confidential guidance from an Alere Health Advisor by phone.

The Alere Health Advisor is available during the annual Health Assessment enrollment campaign. If you have not yet taken the Health Assessment, your Alere Health Advisor will tell you all about it, including how to get there and what to expect. If you have completed the Health Assessment, an Alere Health Advisor will walk you through your personalized Health Assessment report and make suggestions about next steps (only Alere has access to the information you enter in your Health Assessment).

If your personalized Health Assessment report indicates that you have modifiable health risks, your Alere Health Advisor will recommend that you enroll in a Health Improvement Program and work with a personal Alere Health Coach. Your Alere Health Advisor may also suggest self-directed Online Wellness Programs if your Health Assessment report does not indicate a need for an Alere Health Coach or if you are not interested in working with an Alere Health Coach. If you use tobacco, there are additional resources available. Your Alere Health Advisor may refer you to the tobacco cessation specialists through the Quit For Life[®] Program.

What if I don't call an Alere Health Advisor – will an Alere Health Advisor call me instead?

You — or an eligible family member — may be contacted by Alere in the following circumstances:

- Your Health Assessment results suggest a health risk and that you may benefit from participating in a Health Improvement Program, or
- Your Health Assessment results or your medical claims history suggest the presence of a chronic medical condition and that you may benefit from participating in a Condition Management Program.

We encourage you to call an Alere Health Advisor after completing your Health Assessment to benefit from their insights into the results in your Health Assessment.

Online Wellness Programs

Alere offers a broad range of online wellness information and activities to help you. These are available to all eligible employees and their family members. Although you may not be working directly with an Alere Health Coach, you'll be taking steps along the same path guided by the sound principles of preventive health. These programs include:

- Healthy Living Programs
 - Easy Start
 - Weight Loss
 - Healthier Diet
 - Get In Shape
 - Healthy Aging
 - Healthy Heart
 - Diabetes Fighting
 - Cancer Fighting
 - Custom Program
 - Stress Relief
 - Smoke Free
 - Healthy Kids
 - Healthy Seniors
 - Your Healthy Living Program (Maintenance)
- Wellness Information
 - Online Bulletin Board
 - Health News
 - Fitness and Nutrition Content, Tips & Interactive Tools
 - Drug Database that consists of Medications, Supplements & Herbals
 - Online Seminars
 - Self-Care Information
 - Health Encyclopedia
 - Video and Audio Libraries

- Chronic Care Information (includes centers for common chronic conditions)
- Personal and Family Health Information (including Pregnancy and Self Care)
- Personal Health Record

Health Improvement Programs

When you take the annual Health Assessment, your personalized Health Assessment report will suggest steps you can take to maintain and improve your health. If your results indicate the presence of a health risk, your Alere Health Advisor will discuss options with you, including support from an Alere Health Coach through a Health Improvement Program.

Your Alere Health Coach will help you identify health risks that you are ready to improve, develop an action plan with specific goals, learn more about your personal motivators and barriers to change and incorporate positive health behaviors into your daily life.

When are you enrolled in the program, you will work with your Alere Health Coach to create an experience tailored to your individual needs and health objectives, which are associated with:

- Healthy Weight (BMI) Maintenance
- Smoking/Tobacco Cessation (in addition to the Quit For Life[®] Program)
- Physical Activity
- Healthy Eating/Nutrition
- Managing Stress

Your Alere Health Coach will also send you a Lifestyle Behavior Change workbook to help you meet your goals. Health Improvement Programs are confidential, voluntary, and provided at no cost to you. Program lengths are flexible depending on the pace you want to follow.

How do I know if I am eligible to participate in a Health Improvement Program?

Your eligibility to participate in a Health Improvement Program is based on indicators in the Health Assessment that identify your greatest health risks and your interest in changing behaviors. Upon completing the Health Assessment, you would be informed of your eligibility for a Health Improvement Program, if applicable. You may also be referred to a Health Improvement Program through the Health Advisor Program.

You may also self-refer into a Health Improvement Program if you would like to work with an Alere Health Coach.

How do I enroll in a Health Improvement Program?

Call +1 866 201 7918 to contact an Alere Health Advisor about enrolling in a Health Improvement Program or log on to www.HealthyMeMMC.com to initiate the enrollment process.

When are the Alere Health Coaches available?

Alere Health Coaches are available to speak with eligible participants at +1 866 201 7918 from 8:00 a.m. to 8:00 p.m. Monday through Friday, and 9:00 a.m. to 6:00 p.m. on Saturday, regardless of your time zone.

What if I prefer not to provide Health Improvement Program enrollment over the phone?

If you prefer not to enroll over the phone, you can enroll online. Please visit www.HealthyMeMMC.com to enroll online.

Quit For Life[®] Tobacco Cessation Program

The Quit For Life[®] Program is provided through the American Cancer Society[®] and Alere Wellbeing[®] (formerly Free and Clear[®]). The two organizations have 35 years of combined experience in tobacco cessation coaching and have helped more than one million tobacco users. The program integrates free nicotine replacement therapy (patch/gum), web-based learning and confidential phone-based support from expert Quit Coaches[®].

What does the Quit For Life[®] Program include?

When you join the program, a Quit Coach will help you create a plan to successfully quit smoking. The program may include:

- Unlimited toll-free access to Quit Coaches, who offer as much or as little support as you need
- A printed workbook that you can reference in any situation to help you stick with your quitting plan
- Access to Web Coach[®], a private, online community where you can complete activities, watch videos, track your progress and join in discussions with others in the program
- Recommendations on type, dose and duration of nicotine replacement therapy (patch/gum) or medication (bupropion or Chantix[™]), if appropriate
- Free nicotine replacement therapy (patch/gum) mailed directly to your home if appropriate

How much does it cost to participate in the Quit For Life[®] Program?

There is no cost to you to participate in the Quit For Life[®] Program. Even the cost of nicotine patches and gum is fully covered.

What about other forms of tobacco besides cigarettes?

The Quit For Life[®] Program offers support to users of all types of tobacco, including cigarettes, cigars, pipes or smokeless tobacco.

How can I enroll in the Quit For Life[®] Program?

Call +1 866 784 8454 or visit www.quitnow.net/mmc to get started. A registration specialist will verify your eligibility to enroll and transfer you to a Quit Coach.

Is there evidence that the Quit For Life[®] Program works?

The American Cancer Society and Alere Wellbeing (formerly Free and Clear) have 35 years of combined experience in tobacco cessation coaching and have helped more than one million tobacco users.

The program first was validated in 1989 through a randomized clinical trial funded by the National Cancer Institute and the University of North Carolina. The study demonstrated that combination of self-help materials and telephone counseling boosted quit rates by 50 percent. The program has continued to conduct large, randomized trials to prove its methods and effectiveness over the years and also has received six consecutive awards from America's Health Insurance Plans (AHIP) for achievements in tobacco control initiatives.

Can I enroll again if I begin using tobacco again?

Yes, the Quit For Life[®] Program was designed to support participants through all phases of quitting, including relapse.

Condition Management Programs

Chronic illness can affect you in many ways — physically, emotionally, even socially or financially — and that can be hard to manage. Your assigned Alere Health Coach can help you:

- Understand your condition
- Learn about effective treatment options
- Coordinate health care services
- Prepare for appointments with your doctor
- Adopt healthier habits to manage your condition.

You will be contacted by Alere if you are eligible to participate in a Condition Management Program. Eligibility will generally be based on the medical claims history on record for you as a participant in a Marsh & McLennan Companies medical plan administered by Aetna, UnitedHealthcare or Empire Blue Cross Blue Shield; Health Assessment results may also be considered.

What if I prefer not to provide Condition Management Program enrollment over the phone?

If you prefer not to enroll over the phone, you can enroll online. Please visit www.HealthyMeMMC.com to enroll online.

Gaps in Care

Alere also offers a Gaps in Care program, designed to make sure you are receiving the best care possible and that you are working to maintain your health. To do this, Alere:

- Screens pharmacy, medical and laboratory claims data for potential care gaps
- Sends quarterly messages to your physician and monthly messages to you about any care gaps identified
- Tracks changes in treatment to monitor success and determine the need for further follow-up
- Monitors medication adherence by comparing data with recommended medications and on-going refill requirements

Complete Confidentiality

Your privacy is guaranteed just as it is for your other health information. Reporting of information adheres to strict Health Insurance Portability and Accountability Act (HIPAA) privacy laws. Your specific name and medical information will NOT be shared with Marsh & McLennan Companies. Only non-identifying and aggregate information will be used for program evaluation and improvement purposes.

Alere wellness benefits were designed to provide for your privacy and to comply with all federal and state privacy laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Personal health information is maintained Alere and is not maintained on Marsh & McLennan Companies data systems.

All information provided through Alere is available for review by you, your doctors, and other health care professionals. Safeguards have been implemented to prevent your personal information from being seen by or shared by other persons. No Marsh & McLennan Companies employee will see your health information on the Personal Health Record website. Marsh & McLennan Companies will receive aggregate reports to review the performance of the program.

By enrolling in the a Marsh & McLennan Companies medical plan you consent to the terms and conditions of Alere, as they may be amended from time to time. If you are enrolled in an Aetna, UnitedHealthcare, or Empire BlueCross BlueShield medical plan, your claims information (including prescription drug information), will be transmitted to Alere as part of your participation in a Marsh & McLennan Companies medical plan.

Will Alere try to contact other family members about my health?

No. Alere will not discuss your health with other eligible family members, unless you give Alere permission. You may revoke that permission at any time by calling Alere.

Will Alere contact me about the health of another family member?

The only time Alere will contact you about another family member's health is if you have a child under the age of 18 who is identified as a candidate for the Pediatric Asthma Condition Management Program.

How do you keep other household members from knowing that I may have a health condition?

Calls or mailings from Alere will be addressed directly to you. With mail, nothing on the outside of the envelope will indicate its contents, beyond the phrase "Important Benefit Information Enclosed" (or a similar phrase). When Alere calls, an Alere representative will ask to speak to the participant AND verify his/her identity before discussing anything related to a condition. Alere requires your permission (which will be documented by Alere) before their professionals can discuss your health condition with anyone other than you or your health care provider (except in emergency circumstances). You may revoke that permission at any time by calling Alere.

How does Alere get personal health information about me and my eligible family members?

Alere's services are additional benefits provided under the Marsh & McLennan Companies health plan. As such, Alere may have access to your health care information:

- If you completed the Health Assessment on www.HealthyMeMMC.com, and/or
- Through your Marsh & McLennan Companies health plan, which generally consists of your medical plan and prescription drug benefits.

Since Alere is acting on behalf of the health plan, it is subject to the same legal restrictions regarding your health information as the health plan. Alere is required under Federal law and applicable state laws to protect your health care information and to use it only for purposes permitted under the applicable laws and as outlined in our legal agreement. Your personal health information is not shared with other parties unrelated to the health plan unless you give authorization. Your personal health information is not shared with Marsh & McLennan Companies.

You have every right to be informed about who gets your health care information and why. If you have additional concerns, please contact the Marsh & McLennan Companies Employee Service Center at +1 866 374 2662.

Is my health plan allowed to share my personal health information with Alere?

Yes. Under the Federal law known as the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), your personal health information is protected but can be shared by your health plan in connection with health care treatment and health care operations; your consent is not required. The services offered by Alere are generally considered health care operations, including activities like quality assessment and improvement and medical review (for example, the Condition Management Programs).

Can I prohibit my health plan from sharing my personal health information with Alere?

No. In order for you and Marsh & McLennan Companies to realize the benefit of the Alere programs, Alere must have access to your information just like other third parties that provide benefits under, and services to, the plan. Under HIPAA, that information can be shared, subject to the conditions mentioned in this section; your consent is not required.

Does the sharing of personal health information with Alere conform to my HIPAA privacy rights?

Yes. Alere receives personal health information in a manner permitted by HIPAA. Marsh & McLennan Companies has a Business Associate Agreement in place with Alere, as required by HIPAA. The Business Associate Agreement obligates Alere to protect your personal health information as required by HIPAA. If you would like a copy of the Marsh & McLennan Companies Notice of Privacy Practices, which outlines the process for registering a complaint in the event that you feel your privacy rights have been violated, please contact the Marsh & McLennan Companies Employee Service Center at +1 866 374 2662.

What does Alere do with the personal health information it receives from my health plan?

Alere is part of your Marsh & McLennan Companies medical plan. As such, Alere is subject to the privacy rules under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). This means that Alere only may use or disclose your health information for a medical plan purpose. For example, an Alere nurse may share certain information with your physician such as an alert about a potential medication gap. Alere may not use or disclose your information for a non-plan purpose.

Does Marsh & McLennan Companies receive my personal health information?

No. Marsh & McLennan Companies does not receive any claims information regarding your ‘condition’ or medical status or any information you may provide in your Health Assessment or to Alere. The Health Assessment, Online Wellness Programs, Health Improvement Programs, Condition Management Programs and other services available are completely confidential and administered by third party vendors. Only aggregate group information, which is not identifiable to any individual, will be available to Marsh & McLennan Companies. This aggregate information will be used to help assess the success of the Alere wellness benefits and to develop other programs and initiatives.

Does Marsh & McLennan Companies know if I have earned an incentive?

Alere will inform Marsh & McLennan Companies if you receive an incentive so that Marsh & McLennan Companies can withhold the applicable taxes, but Marsh & McLennan Companies is not informed about whether the incentive was earned by you or by your spouse or domestic partner, or the program in which you participated.

Glossary

ACTIVELY AT WORK

You are “actively at work” if you are fulfilling your job responsibilities at a Marsh & McLennan Companies -approved location on the day coverage is supposed to begin (e.g., you are not out ill or on a leave of absence).

APPROVED SPOUSE AND DOMESTIC PARTNER

Adding a spouse or same gender or opposite gender domestic partner to certain benefits coverage is permitted upon employment or during the Annual Enrollment period for coverage effective the following January 1st if you satisfy the plans’ criteria, or immediately upon satisfying the plans’ criteria if you previously did not qualify. To obtain spousal or domestic partner coverage, you will need to complete an Affidavit of Eligible Family Membership via PeopleLink (www.mmcpeoplelink.com) declaring that:

Spouse / Domestic Partner

- You have already received a marriage license from a U.S. state or local authority, or registered your domestic partnership with a U.S. state or local authority.

Spouse Only

- Although not registered with a U.S. state or local authority, your relationship constitutes a marriage under U.S. state or local law (e.g. common law marriage or a marriage outside the U.S. that is honored under U.S. state or local law).

Domestic Partner Only

- Although not registered with a U.S. state or local authority, your relationship constitutes an eligible domestic partnership. To establish that your relationship constitutes an eligible domestic partnership you and your domestic partner must:
 - be at least 18 years old
 - not be legally married, under federal law, to each other or anyone else or part of another domestic partnership during the previous 12 months
 - currently be in an exclusive, committed relationship with each other that has existed for at least 12 months and is intended to be permanent
 - not be Medicare eligible
 - currently reside together, and have resided together for at least the previous 12 months, and intend to do so permanently
 - have agreed to share responsibility for each other’s common welfare and basic financial obligations
 - not be related by blood to a degree of closeness that would prohibit marriage under applicable state law.

- Marsh & McLennan Companies reserves the right to require documentary proof of your domestic partnership at any time, for the purpose of determining benefits eligibility. If requested, you must provide documents verifying either the registration of your domestic partnership with a state or local authority or your cohabitation and/or mutual commitment.

Once your Affidavit of Eligible Family Membership is completed and processed, you may cover the dependent child(ren) of your spouse or domestic partner.

Complete your affidavit, via PeopleLink (www.mmcpeoplelink.com). Select the **Finances** tab and under **Insurance Benefits**, click **Basic Life**. Then go to **Take Action** in the right navigation bar and select **Enroll, view, change benefits**.

ELIGIBLE MMA EMPLOYEES

As used throughout this document, “MMA Employees” are defined as employees classified on payroll as U.S. regular employees of MMA-Corporate, Insurance Alliance, MMA-Northeast or MMA-Alaska.

ELIGIBLE MARSH & MCLENNAN COMPANIES EMPLOYEES (OTHER THAN MMA)

As used throughout this document, “Marsh & McLennan Companies Employees” are defined as employees classified on payroll as U.S. regular employees of Marsh & McLennan Companies or any subsidiary or affiliate of Marsh & McLennan Companies (other than MMA and any of its subsidiaries).

QUALIFYING EVENT

A “qualifying event” under COBRA includes loss of coverage as a result of your leaving Marsh & McLennan Companies (other than for your gross misconduct); a reduction of hours; your death, divorce or legal separation; your eligibility for Medicare, or a dependent child’s loss of dependent status; or, if you are a retiree, loss of coverage due to Marsh & McLennan Companies filing for bankruptcy.