



Sandia National Laboratories

Sandia Group Accident Plans

Summary Plan Descriptions

Effective: September 1, 2011

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Introduction

The Sandia Corporation Group Accident Plans are designed to help protect you and your family from the financial hardships associated with a job-related accident that results in your death or disability. The Sandia Group Accident Plans supplement the insurance available under the Sandia Group Term Life Insurance Plans. Sandia pays the total cost of this insurance. The Group Accident Plans consist of four separate plans:

- Special Risk Accident Insurance Plan
- Job Incurred Accidental Death Insurance Plan
- High Risk Foreign Travel Insurance Plan
- Emergency Response Teams Insurance Plan

Chartis is the underwriter for the coverages.

This document contains an outline of the principal features of these four plans as of September 1, 2011. Every effort has been made to reflect the provisions accurately. However, in the event of a discrepancy between this summary and the Chartis contracts, the Chartis contracts will govern.

Please read this document carefully and share it with your family.

The Special Risk Accident Insurance, Job Incurred Accidental Death Insurance, High Risk Foreign Travel Insurance, and Emergency Response Teams Insurance Plans are maintained at the discretion of Sandia and are not intended to create a contract of employment and do not change the at-will employment relationship between you and Sandia. The Sandia Board of Directors (or its designated representative) reserves the right to amend (in writing) any or all provisions of the Group Accident Insurance Plans and to terminate (in writing) the Plans at any time without prior notice, subject to applicable collective bargaining agreements. The Group Accident Insurance Plans cannot be modified by written or oral statements to you from human resources representatives or HBE or other Sandia personnel.

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Special Risk Accident Insurance Plan

Section 1. Eligibility

Eligible Employees

You are eligible to participate in the Special Risk Accident Insurance Plan if you are a regular or non-regular employee working full or part time.

A regular employee is an individual employed by Sandia Corporation for an unspecified time period working a full-time or part-time schedule. Limited term employees, post-doctoral appointees, recurrent employees and student interns are non-regular employees.

Effective Date of Coverage

Your coverage becomes effective immediately when you start employment as a regular or non-regular Sandia employee.

Section 2. Payment of Benefits

Qualification for Benefits

Benefits for Special Risk Accident Insurance are paid if you die or become disabled as the direct result of a covered job-related accident. The accident is covered if (1) the loss occurs within 365 days of the date of the accident, and (2) the accident involves one of the following special risks:

- Air travel anywhere in the world unless you are the pilot or a crew member (observers and instrument handlers are not considered crew members);
- Travel or work in any other means of travel (non-air) outside the United States;
- Special hazards or environmental factors encountered because of (1) work with rich explosives or radioactive materials, or (2) work with devices not common to normal industrial practice;
- Any act of war (declared or undeclared) anywhere in the world except in the United States, including the District of Columbia;
- Exposure to the elements or your disappearance resulting from the hazards above.

Prospective new hires are also covered while they are on Sandia-authorized flights.

Exclusions

Special Risk Accident Insurance does not cover losses caused by:

- Piloting or serving as a crew member in any form of aircraft;
- Suicide or attempted suicide (except in very unusual circumstances involving threat of death or torture);
- Intentionally inflicted injury, attempt at intentionally self-inflicted injury, or auto-eroticism;
- Military service for any country or international authority, excluding short-term National Guard or reserve duty for scheduled training purposes;
- Sickness, disease, mental incapacity, infections;
- Any act of war within the United States including the District of Columbia, or your country of permanent residence;
- Being under the influence of intoxicants while operating any vehicle or means of transportation;
- Being under the influence of drugs (except under the advice of a physician);

- Commission of or attempt to commit a crime;
- Medical or surgical treatment of sickness, disease, mental incapacity;
- Certain heart and brain diseases and accidents.

Amount of Benefit

The amount of your benefit depends on the type of loss sustained, as shown in the following table:

Type of Loss	Percentage of Principal Sum
Loss of Life	100%
Permanent Total Disability	100%
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
Speech and Hearing in Both Ears	100%
One Hand or One Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%
Hearing in One Ear	25%
Thumb and Index Finger of Same Hand	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%
Uniplegia	25%

“Permanent total disability” refers to a determination by Chartis that you are permanently unable to perform the duties of your job or any other job suitable to your education, training, and experience. The disability must start within 365 days of the accident and be considered permanent. This benefit is paid at the rate of \$500 dollars per month, beginning in the 13th month, up to a \$50,000 maximum.

The maximum benefit is \$50,000 per accident. For example, your beneficiary cannot file a claim for a loss-of-life benefit upon your death if you have already been paid for the loss of two or more members.

In the case that you sustain a loss and your individual policy would normally not cover this loss, the amount of benefit is \$150,000.

Benefit Payment

Generally, benefits are paid in a lump sum. However, benefits for permanent total disability are paid in monthly installments, beginning in the 13th month, for up to 100 months. When the claim has been processed and allowed by Chartis, you or your beneficiary will receive payment.

Section 3. Beneficiaries

If you are living, benefits are payable to you. Otherwise, benefits are payable to the beneficiary(ies) of your choice.

Your selected beneficiary(ies) under the Sandia Primary Group Term Life Insurance Plan automatically become(s) your selected beneficiary(ies) under the Special Risk Accident Insurance Plan. If this is not acceptable, you may change your beneficiary at any time by contacting your Sandia Benefits representative and completing a beneficiary change form. The change becomes effective on the date the form is signed (except that it will not apply to any amount paid by Chartis prior to receipt of the change).

If the beneficiary(ies) you have selected predeceases you and you have not completed a beneficiary change form (either under the Sandia Primary Group Term Life Insurance Plan or this plan), your insurance will be payable to your surviving spouse, children, parents, sibling, or estate (in that order). If the payee is a minor child with no legal guardian for his or her property, the benefit will not exceed \$1,000, payable to a custodial relative of the child. The payee will be determined by Chartis.

Section 4. Termination of Coverage

Your insurance will terminate if you cease to be an eligible employee or if the Special Risk Accident Insurance Plan is discontinued.

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Job Incurred Accidental Death Insurance Plan

Section 1. Eligibility

Eligible employees

You are eligible to participate in the Job Incurred Accidental Death Insurance Plan if you are a regular or non-regular Sandia employee working full or part time.

A regular employee is an individual employed by Sandia Corporation for an unspecified time period working a full-time or part-time schedule. Limited term employees, post-doctoral appointees, recurrent employees and student interns are non-regular employees.

Effective Date of Coverage

Your coverage becomes effective immediately when you start employment as a regular or non-regular Sandia employee.

Section 2. Payment of Benefits

Qualification for Benefits

Benefits for Job Incurred Accidental Death Insurance are paid if you die as the direct result of any type of job-related accident. These benefits are payable if your death occurs within 365 days of the date of the accident. Benefits may also be paid due to exposure to the elements or your disappearance resulting from the hazards covered under this policy.

Exclusions

Job Incurred Accidental Death Insurance does not cover losses caused by:

- Piloting or serving as a crew member in any form of aircraft;
- Suicide or attempted suicide (except in very unusual circumstances involving threat of death or torture);
- Intentionally inflicted injury, attempt at intentionally self-inflicted injury, or auto-eroticism;
- Military service for any country or international authority, excluding short-term National Guard or reserve duty for scheduled training purposes;
- Sickness, disease, mental incapacity, infections;
- Any act of war within the United States including the District of Columbia, or your country of permanent residence;
- Being under the influence of intoxicants while operating any vehicle or means of transportation;
- Being under the influence of drugs (except under the advice of a physician);
- Commission of or attempt to commit a crime;
- Medical or surgical treatment of sickness, disease, mental incapacity;
- Certain heart and brain diseases and accidents.

Amount of Benefit

The amount of your benefit is equal to two times your annual base pay, subject to a maximum of \$500,000. This benefit is reduced by like payments received under Workers' Compensation or similar laws.

For purposes of this plan, your annual base pay will include your current annual rate of pay plus any lump sum awards which you received in the past 12 months (such as Individual Performance Awards, advancement awards and Distinguished Appointment Awards). Shift differentials, other allowances, or extra payments for overtime are not included in annual base pay.

Benefit Payment

Generally, benefits are paid in a lump sum. When the claim has been processed and allowed by Chartis, your beneficiary will receive payment.

Section 3. Beneficiaries

If you are living, benefits are payable to you. Otherwise, benefits are payable to the beneficiary(ies) of your choice.

Your selected beneficiary(ies) under the Sandia Primary Group Term Life Insurance Plan automatically become(s) your selected beneficiary(ies) under the Job Incurred Accidental Death Insurance Plan. If this is not acceptable, you may change your beneficiary at any time by contacting your Sandia Benefits representative and completing a beneficiary change form. The change becomes effective on the date the form is signed (except that it will not apply to any amount paid by Chartis prior to receipt of the change).

If the beneficiary(ies) you have selected predeceases you and you have not completed a beneficiary change form (either under the Sandia Primary Group Term Life Insurance Plan or this plan), your insurance will be payable to your surviving spouse, children, parents, sibling, or estate (in that order). If the payee is a minor child with no legal guardian for his or her property, the benefit will not exceed \$1,000, payable to a custodial relative of the child. The payee will be determined by Chartis.

Section 4. Termination of Coverage

Your insurance will terminate if you cease to be an eligible employee or if the Job Incurred Accidental Death Insurance Plan is discontinued.

High Risk Foreign Travel Insurance Plan

Section 1. Eligibility

Eligible Employees

You are eligible to participate in the High Risk Foreign Travel Insurance Plan if:

- You are a regular or non-regular employee working full or part time;
- You travel on Sandia business to a foreign location where civil order cannot be maintained by the local authorities or where hostile military operations are already in progress or imminently threatened
- The authorized Sandia officer approves your travel and insurance coverage prior to departure.

A regular employee is an individual employed by Sandia Corporation for an unspecified time period working a full-time or part-time schedule. Limited term employees, post-doctoral appointees, recurrent employees and student interns are non-regular employees.

Effective Date of Coverage

Your insurance becomes effective upon departure on a foreign trip approved for coverage under this Plan by the authorized Sandia officer.

Section 2. Payment of Benefits

Qualification for Benefits

Benefits for High Risk Foreign Travel Insurance are paid if you die or become disabled as the direct result of a covered incident while on a specific job-related assignment. The incident is covered if (1) the loss occurs within 365 days of the date of the injury, and (2) the injury occurs while on a covered foreign assignment. Benefits may also be paid due to exposure to the elements or your disappearance resulting from the hazards covered under this policy.

Exclusions

High Risk Foreign Travel Insurance does not cover losses caused by:

- Piloting or serving as a crew member in any form of aircraft;
- Suicide or attempted suicide (except in very unusual circumstances involving threat of death or torture);
- Intentionally inflicted injury, attempt at intentionally self-inflicted injury, or auto-eroticism;
- Military service for any country or international authority, excluding short-term National Guard or reserve duty for scheduled training purposes;
- Sickness, disease, mental incapacity, infections;
- Any act of war within the United States including the District of Columbia, or your country of permanent residence;
- Being under the influence of intoxicants while operating any vehicle or means of transportation;
- Being under the influence of drugs (except under the advice of a physician);
- Commission of or attempt to commit a crime;
- Medical or surgical treatment of sickness, disease, mental incapacity;
- Certain heart and brain diseases and accidents.

Amount of Benefit

The amount of your benefit depends on the type of loss sustained, as shown in the following table:

Type of Loss	Percentage of Principal Sum
Loss of Life	100%
Permanent Total Disability	100%
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
Speech and Hearing in Both Ears	100%
One Hand or One Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%
Hearing in One Ear	25%
Thumb and Index Finger of Same Hand	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%
Uniplegia	25%

“Permanent total disability” refers to a determination by Chartis that you are permanently unable to perform the duties of your job or any other job suitable to your education, training,

and experience. The disability must start within 365 days of the accident and be considered permanent. This benefit is paid at the rate of \$9,500 dollars per month, beginning in the 13th month, up to a \$950,000 maximum.

The maximum benefit is \$950,000 per accident. For example, your beneficiary cannot file a claim for a loss-of-life benefit upon your death if you have already been paid for the loss of two or more members.

Benefit Payment

Generally, benefits are paid in a lump sum. However, benefits for permanent total disability are paid in monthly installments, for up to 100 months. When the claim has been processed and allowed by Chartis, you or your beneficiary will receive payment.

Section 3. Beneficiaries

If you are living, benefits are payable to you. Otherwise, benefits are payable to the beneficiary(ies) of your choice.

Your selected beneficiary(ies) under the Sandia Primary Group Term Life Insurance Plan automatically become(s) your selected beneficiary(ies) under the High Risk Foreign Travel Plan. If this is not acceptable, you may change your beneficiary at any time by contacting your Sandia Benefits representative and completing a beneficiary change form. The change becomes effective on the date the form is signed (except that it will not apply to any amount paid by Chartis prior to receipt of the change).

If the beneficiary(ies) you have selected predeceases you and you have not completed a beneficiary change form (either under the Sandia Primary Group Term Life Insurance Plan or this Plan), your insurance will be payable to your surviving spouse, children, parents, sibling, or estate (in that order). If the payee is a minor child with no legal guardian for his or her property, the benefit will not exceed \$1,000, payable to a custodial relative of the child. The payee will be determined by Chartis.

Section 4. Termination of Coverage

Your insurance will terminate if you cease to be on designated foreign travel or if the High Risk Foreign Travel Insurance Plan is discontinued.

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Emergency Response Teams Insurance Plan

Section 1. Eligibility

Eligible Employees

You are eligible to participate in the Emergency Response Teams Insurance Plan if you are a regular or non-regular employee working full-time and participate in Department of Energy designated practice exercises, actual alerts, or emergencies as a member of an approved nuclear Emergency Response Team. Designated Emergency Response Teams include Accident Response Group (ARG), Nuclear Emergency Search Team (NEST), Joint Technical Operations Team (JTOT), and Radiological Assistance Program (RAP).

A regular employee is an individual employed by Sandia Corporation for an unspecified time period working a full-time schedule. Limited term employees, post-doctoral appointees, recurrent employees and student interns are non-regular employees.

Effective Date of Coverage

Your coverage becomes effective immediately when you participate in Department of Energy designated practice exercises, actual alerts, or emergencies as a member of an approved Emergency Response Team.

Section 2. Payment of Benefits

Qualification for Benefits

Benefits for Emergency Response Teams Insurance are paid if you die or become disabled as the direct result of a covered job-related accident while participating in Department of Energy designated practice exercises, actual alerts, or emergencies as a member of the an approved Emergency Response Team. The accident is covered if the loss occurs within 365 days of the date of the accident. Benefits may also be paid due to exposure to the elements or your disappearance resulting from the hazards covered under this policy.

Exclusions

Emergency Response Teams Insurance does not cover losses caused by:

- Piloting or serving as a crew member in any form of aircraft;
- Suicide, attempted suicide (except in very unusual circumstances involving threat of death or torture);
- Intentionally inflicted injury, attempt at intentionally self-inflicted injury, or auto-eroticism;
- Military service for any country or international authority, excluding short-term National Guard or reserve duty for scheduled training purposes;
- Sickness, disease, mental incapacity, infections;
- Any act of war within the United States including the District of Columbia, or your country of permanent residence;
- Being under the influence of intoxicants while operating any vehicle or means of transportation;
- Being under the influence of drugs (except under the advice of a physician);
- Commission of or attempt to commit a crime;
- Medical or surgical treatment of sickness, disease, mental incapacity;
- Certain heart and brain diseases and accidents.

Amount of Benefit

The amount of your benefit depends on the type of loss sustained, as shown in the following table:

Type of Loss	Percentage of Principal Sum
Loss of Life	100%
Permanent Total Disability	100%
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
Speech and Hearing in Both Ears	100%
One Hand or One Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%
Hearing in One Ear	25%
Thumb and Index Finger of Same Hand	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%
Uniplegia	25%

“Permanent total disability” refers to a determination by Chartis that you are permanently unable to perform the duties of your job or any other job suitable to your education, training, and experience. The disability must start within 365 days of the accident and be considered

permanent. This benefit is paid at the rate of \$9,500 dollars per month, beginning in the 13th month, up to a \$950,000 maximum.

The maximum benefit is \$950,000 per accident. For example, your beneficiary cannot file a claim for a loss-of-life benefit upon your death if you have already been paid for the loss of two or more members.

Benefit Payment

Generally, benefits are paid in a lump sum. However, benefits for permanent total disability are paid in monthly installments, beginning in the 13th month, for up to 100 months. When the claim has been processed and allowed by Chartis, you or your beneficiary will receive payment.

Section 3. Beneficiaries

If you are living, benefits are payable to you. Otherwise, benefits are payable to the beneficiary(ies) of your choice.

Your selected beneficiary(ies) under the Sandia Primary Group Term Life Insurance Plan automatically become(s) your selected beneficiary(ies) under the Emergency Response Teams Insurance Plan. If this is not acceptable, you may change your beneficiary at any time by contacting your Sandia Benefits representative and completing a beneficiary change form. The change becomes effective on the date the form is signed (except that it will not apply to any amount paid by Chartis prior to receipt of the change).

If the beneficiary(ies) you have selected predeceases you and you have not completed a beneficiary change form (either under the Sandia Primary Group Term Life Insurance Plan or this plan), your insurance will be payable to your surviving spouse, children, parents, sibling, or estate (in that order). If the payee is a minor child with no legal guardian for his or her property, the benefit will not exceed \$1,000, payable to a custodial relative of the child. The payee will be determined by Chartis.

Section 4. Termination of Coverage

Your insurance will terminate if you cease to be an eligible employee or if the Emergency Response Teams Insurance Plan is discontinued.

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Appendix A. General Information

(Applies to All Plan)

Your Rights under ERISA

As a participant in the Group Accident Insurance Plans, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). Chartis as Claims Administrator has the sole discretion to interpret the terms of the group insurance contract, to make factual findings, and to determine benefit coverage. The Chartis decision shall not be overturned unless arbitrary and capricious.

Rights and Protections Provided by ERISA

ERISA provides that you, as a Plan participant, shall be entitled to:

- Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites and union halls, all documents governing the plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- Obtain, upon written request to the plan administrator, copies of documents governing the operation of the plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The plan administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

Prudent Actions by Plan Fiduciaries

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of this Plan. The people who operate your Plan, called "fiduciaries" of the Plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries.

No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a welfare benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a federal court. In such a case, the court may require the Plan administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator.

If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or federal court after exhausting the appeals mechanisms provided in the Plan. (See Appeals of Adverse Determination.)

If it should happen that Plan fiduciaries misuse the Plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees (for example, if it finds your claim is frivolous).

Assistance with Your Questions

If you have any questions about these Plans, contact your Benefits representative at Sandia National Laboratories at 505-844-4237. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, DC 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

Claims Information

How to File a Claim

Chartis must be notified within 20 days (or as soon thereafter as possible) after an insured person's loss. The Sandia Benefits Department should be notified of a loss as soon as possible. Your Benefits representative will also assist you or your beneficiary in filing claims. Claim forms must be submitted in accordance with the instructions on the claim form.

Chartis has the right to require you to have a medical examination as often as reasonably necessary while a claim is pending. Chartis may also request an autopsy unless prohibited by law.

Determination of Benefits

After Chartis receives your claim for Benefits, Chartis will review your claim and notify you of its decision to approve or deny your claim. Such notification will be provided to you within a reasonable period, not to exceed 90 days from the date Chartis received your claim, unless Chartis notifies you within that period that there are special circumstances requiring an extension of time of up to 90 additional days. If Chartis denies your claim in whole or in part, the notification of the claims decision will state the reason why your claim was denied and reference the specific Plan provision(s) on which the denial is based. If the claim is denied because Chartis did not receive sufficient information, the claims decision will describe the additional information needed and explain why such information is needed. The notification will also include a description of the Plan review procedures and time limits, including a statement of your right to bring a civil action if your claim is denied after an appeal.

Appeals of Adverse Benefits Determination

If a claim is denied either in whole or in part, you or your beneficiary will receive written notification from Chartis stating the reason for the denial. This request may be appealed by submitting a written request for review (including an explanation and any documentation in support of the appeal) within 60 days after receiving the rejection notice. Chartis must provide a written response to the appeal within 60 days after it is received. Chartis has the exclusive right to interpret the provisions of this Plan.

Contact Information for Claim Appeals

Send all claim appeals for benefits to Chartis. Determinations by Chartis, as the claims fiduciary, will be conclusive and not subject to review by Sandia.

Appeals Procedures Concerning Eligibility

You may use the eligibility appeals procedure to request an informal review, a formal review, or both, if:

- You had a benefit claim that was denied by a claims administrator based solely on eligibility; or
- You have been informed by Sandia that you are not eligible for participation in the Special Risk Accident, Job Incurred Accidental Death, High Risk Foreign Travel and Emergency Response Teams Insurance Plans.

Deadline for Submitting Review Requests

The deadline for submitting a request for an informal or formal review of your eligibility to the Benefits Department will be 180 days after you receive written notification of the denial of the claim by Chartis or denied participation by the Sandia Benefits Department to participate in the Special Risk Accident, Job Incurred Accidental Death, High Risk Foreign Travel and Emergency Response Teams Insurance Plans.

Once a final determination has been made on your eligibility appeal by Sandia, you then have 180 days (from the date of the written notification by Sandia) to appeal your denied claim for benefits with Chartis.

Request for Informal Review

You have the option to request an informal review of your appeal for eligibility by contacting Sandia HBE at (505) 844-HBES (4237). The Sandia Benefits Department will review all pertinent information and render a written decision as soon as possible but no later than 14 calendar days of the receipt of all material facts. If you are not satisfied with the decision of the Sandia Benefits Department, you can request a formal review.

Request for Formal Review

To request a formal review of a denial based solely on eligibility, you must submit an appeal in writing to the Secretary of the Employee Benefits Committee, c/o Benefits Department, PO Box 5800, Albuquerque, NM 87185, MS 1022. If the denied claim is based on any reason other than eligibility, you must file the appeal with Chartis.

If the appeal related solely to eligibility is denied, the notification will:

- Explain the specific reasons and specific Plan provisions on which the decision is based
- Include a statement describing any voluntary appeal procedures offered by the Plan and the claimant's right to obtain information about these procedures
- Include a statement regarding the claimant's right to bring a civil action under ERISA 502(a)
- Offer to provide the claimant, on request, free of charge, reasonable access to and copies of all documents, records, and other information relevant to the claimant's eligibility claim.

A claim or appeal regarding eligibility may be filed by an authorized representative on behalf of a claimant. If your appeal is denied by the Employee Benefits Committee (EBC), you can appeal to the Employee Benefits Claim Review Committee (EBCRC). The EBCRC will be the final and conclusive administrative review for claims pertaining to plan participation or eligibility under the Sandia Group Accident Insurance Plans. The claimant is required to pursue all administrative appeals described above as a precondition to challenging the denial of the claim in a lawsuit.

Other Important Information

Plan Sponsor

Sandia Corporation is the Plan sponsor. Inquiries should be directed to:

Sandia Corporation
P.O. Box 5800, MS 1302
Albuquerque, NM 87185-1302
(505) 284-2168

Plan Administrator

The Employee Benefits Committee is the Plan Administrator. Inquiries should be directed to:

Employee Benefits Committee
P.O. Box 5800, MS 1022
Albuquerque, NM 8785-1022
(505) 284-1800

The Employee Benefits Committee has full discretionary authority to administer and interpret the Plans, including full discretionary authority to determine eligibility for benefits under the Plans, to correct errors (to the extent practicable), and to construe ambiguous terms. Determinations by the Employee Benefits Committee (or its authorized delegate) will be final and conclusive upon all persons.

Agent for Service of Legal Process

The Sandia Legal Division is the agent for service of legal process. Inquiries should be directed to:

Sandia Legal Division
Sandia Corporation
1515 Eubank SE, MS 0141
Albuquerque, NM 87123

Service of legal process also may be made upon the Plan Administrator.

Plan Names and Identification Numbers

The official names of the Plans are:

- Special Risk Accident Insurance Plan, which Sandia has assigned identification number 509
- Job Incurred Accidental Death Insurance Plan, which Sandia has assigned identification number 508
- Sandia Corporation High-Risk Foreign Travel Plan, which Sandia has assigned identification number 530
- Emergency Response Teams Insurance Plan, which Sandia has assigned identification number 555

The Employer Identification Number assigned to Sandia by the IRS is 85-0097942.

Insurance Coverage

The insurance benefits for the plans described in this booklet are provided by Chartis, 777 S. Figueroa Street, Los Angeles, California 90017 under Policy # 9125552 for Special Risk Accident Insurance, #9114629 for Job Incurred Accidental Death Insurance, #9125551 for High Risk Foreign Travel Insurance and #9125553 for Emergency Response Teams Insurance.

Plan Type

The Special Risk Accident Insurance Plan is a welfare plan providing employee life and accident insurance. The Job Incurred Accidental Death Insurance Plan is a welfare plan providing life insurance. The High Risk Foreign Travel Plan is a welfare plan providing life and accident insurance. The Emergency Response Teams Insurance Plan is a welfare plan providing life and accident insurance.

Plan Year

The plan year for the Special Risk Accident, Job Incurred Accidental Death, High Risk Foreign Travel and Emergency Response Teams Insurance Plans is a calendar year, beginning each January 1 and ending December 31.

Plan Documents

These Summary Plan Descriptions summarize the principal features of these Plans. Statements contained in this booklet are subject to the provisions of the insurance policies that set forth the benefits, terms, and conditions of the Plans and that legally govern the Plans' operations. If there is any conflict between this booklet and the applicable policy, the applicable insurance policy with Chartis will govern. These contracts are available for inspection upon your request.

Other plan documents include the annual report, and other documents and reports maintained by the Plan or filed with a federal government agency. You or your beneficiaries can review copies of the documents during normal working hours in the offices of the Pension Fund and

Savings Plan Department at Sandia National Laboratories. You can also request copies of any Plan documents by writing to Sandia at the address above. Copies of Plan documents will be furnished within 30 days at a reasonable charge.

Plan Continuation

Sandia expects to continue these benefit Plans indefinitely, but reserves the right to amend or terminate them at any time, subject to applicable collective bargaining agreements. Written notification of Plan termination will be given at least 30 days in advance of termination.