

Plan Highlights

Group Basic Life and AD&D, Supplemental and Dependent Life Insurance



Sample Company

ELIGIBILITY

Employees: Each Active, Full-time employee working 30 or more hours per week, except any person working on a temporary or seasonal basis.

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- ▶ your legal spouse not legally separated or divorced from you or your domestic partner.
 - ▶ your unmarried financially dependent children* age 14 days to 20 years (to 26 years if full-time student).
- *natural and adopted children; stepchildren and foster children in your custody.
Age limit does not apply to handicapped children.
- ▶ A person may not have coverage as both an Employee and Dependent.
 - ▶ Only one insured spouse may cover Dependent children.

BENEFIT AMOUNT

Basic Life

\$10,000

Supplemental Life

Choose from a minimum of \$10,000 to a maximum of \$300,000 in \$10,000 increments

Amounts of life insurance equal to \$150,000 or more may be subject to an earnings cap.

Dependent Life

Spouse

Choose from a minimum of \$5,000 to a maximum of \$150,000 in \$5,000 increments

(spouse amount may not exceed 50% of employee amount)

Dependent Child(ren)

14 to age 20 : \$10,000

GUARANTEED ISSUE (INITIAL ELIGIBILITY PERIOD ONLY)

Employee: \$150,000

Spouse: \$25,000

Child: all child amounts are guaranteed issue

CONTRIBUTION REQUIREMENTS

Basic Life:

Coverage is 100% employer paid.

BENEFIT REDUCTION DUE TO AGE

(applicable to employee/spouse coverage)

Age	Original Benefit
	Reduced To
65	65%
70	40%
75	20%

RATE

See attached Rate Sheet.

FEATURES

- ▶ Accelerated Death Benefit (expressed as Living Benefit Rider in some states and Imminent Death Benefit in PA)
- ▶ Air Bag Benefit
- ▶ Conversion Privilege
- ▶ Education Benefit
- ▶ FMLA/MSLA Continuation
- ▶ Loss of Use Benefit
- ▶ Portability
- ▶ Seat Belt Benefit
- ▶ Waiver of Premium

VALUE ADDED SERVICES

- ▶ Bereavement Counseling Service
- ▶ Travel Assistance Service

EXCLUSIONS

AD&D EXCLUSIONS:

AD&D benefits will not be payable for a loss: caused by suicide or intentionally self-inflicted injuries; caused by or resulting from war or any act of war, declared or undeclared; to which sickness, disease or myocardial infarction, including medical or surgical treatment thereof, is a contributing factor; sustained during an insured's commission or attempted commission of an assault or felony; to which the insured's acute or chronic intoxication is a contributing factor; or to which the insured's voluntary consumption of an illegal or controlled substance or a non-prescribed narcotic or drug is a contributing factor.

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for coverage and benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits

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Supplemental Life:

Coverage is 100% employee paid.

Spouse: Coverage is 100% employee paid.

Dependent Child(ren): Coverage is 100% employee paid.

and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-6422, et al.