

Group Term Life Insurance

Enrollment at a glance

For the employees of: Hemet Unified School District (CSEBA)
Group #662003 (11thly)
Acct# 0051/0052

What is Group Term Life Insurance?

- Offered through your employer
- Pays a benefit to your beneficiary if you pass away during a specific period of time (“term”)
- Term is generally one year, renewing annually with other employer-offered benefits
- Your employer offers Basic Life Insurance and Accidental Death and Dismemberment (AD&D) Insurance, which is the amount they provide at no cost to you.
- You also have the option to elect additional coverage called Supplemental Life Insurance.

What is Accidental Death and Dismemberment (AD&D) Insurance?

AD&D Insurance pays a benefit to you or your beneficiary, separate from the life insurance benefit, if you are severely injured or die as the result of a covered accident. This coverage is part of the Group Term Life Insurance offered through your employer.

Eligibility and coverage options

	For you	For your spouse*	For your children
Eligibility	<p>Classified/Management All active employees working 20+ hours per week.</p> <p>Certificated Teachers All active employees working 10+ hours per week.</p> <p>All Other Employees All active employees working 40+ hours per week.</p>	<p>If your spouse is covered under the policy as an employee, then your spouse is not eligible for coverage as a spouse.</p> <p>Coverage is available only if Employee Supplemental Life Insurance is elected.</p>	<p>To age 26.</p> <p>If your child is covered under the policy as an employee, then your child is not eligible for coverage as a child.</p> <p>Coverage is available only if employee Supplemental Life Insurance is elected.</p> <p>If both parents are covered as employees, only one but not both may cover the same children. If the parent who is covering the children stops being insured as an employee, the other parent may apply for children's coverage.</p>
Basic Life and AD&D Insurance coverage options	<p>Superintendent Your employer provides you with Basic Life Insurance and AD&D Insurance of \$400,000. There is no cost to you for this insurance.</p> <p>Assistant Superintendent and all Area Superintendents Your employer provides you with Basic Life Insurance and AD&D Insurance of \$75,000. There is no cost to you for this</p>	<p>Not applicable.</p>	<p>Not applicable.</p>

	<p>insurance.</p> <p>All Other Employees Your employer provides you with Basic Life Insurance and AD&D Insurance of \$50,000. There is no cost to you for this insurance.</p>		
Supplemental Life and AD&D Insurance coverage options	Eligible employees may elect Supplemental Life and AD&D Insurance of \$10,000 to \$500,000 in \$20,000 increments, not to exceed 5 times your annual salary.	Eligible employees may elect Spouse Supplemental Life and AD&D Insurance of \$10,000 to \$500,000 in \$5,000 increments. Coverage cannot exceed 100% of your approved employee Supplemental Life Insurance amount.	Eligible employees may elect Children Supplemental Life and AD&D Insurance of \$2,000, \$4,000, \$6,000, \$8,000, or \$10,000.
New hires	<p>You may elect up to \$200,000 or 2 times your annual salary whichever is less, without providing evidence of insurability.</p> <p>If you elect higher amount(s), you will need to submit evidence of insurability to the insurance company for approval before coverage becomes effective.</p>	<p>You may elect up to \$25,000 of Supplemental Life Insurance on your spouse without providing evidence of insurability.</p> <p>If you elect higher amount(s), you will need to submit evidence of insurability on your spouse to the insurance company for approval before coverage becomes effective.</p>	<p>You may elect up to \$10,000 of Supplemental Life Insurance on your children without providing evidence of insurability.</p> <p>If you elect higher amount(s), you will need to submit evidence of insurability on your children to the insurance company for approval before coverage becomes effective.</p>
Increases in coverage	You must provide evidence of insurability for any increase to coverage elected during the current enrollment period.	You must provide evidence of insurability on your spouse for any increase to coverage elected during the current enrollment period.	You must provide evidence of insurability on your children for any increase to coverage elected during the current enrollment period.
Late entrants	If you are a late entrant, you must provide evidence of insurability for any coverage elected.	If you are a late entrant, you must provide evidence of insurability on your spouse for any coverage elected.	If you are a late entrant, you must provide evidence of insurability on your children for any coverage elected.
Evidence of insurability (health questions)	When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.	When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.	When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.
Age reductions Note: Your payroll deductions will be adjusted to pay premium based on the new benefit amount(s).	<p>Basic Life Insurance: Benefit amount reduces to 50% of original coverage at age 70.</p> <p>Supplemental Life Insurance: Benefit amount reduces to 65% of original coverage at age 70 and to 50% of original coverage at age 75.</p>	Benefit amount reduces to 65% of original coverage at spouse age 70 and to 50% of original coverage at age 75 and after.	Not applicable

*The use of “spouse” in this document means a person insured as a spouse as described in the certificate of insurance or rider. This may include domestic partners or civil union partners as defined by the group policy. Please contact your employer for more information.

What does my life insurance include?

The benefits listed below are included with your life insurance coverage.

- **Accelerated Death Benefit:** If you are diagnosed with a terminal illness with a limited life expectancy, you may receive a portion of your death benefit while still living.
- **Accidental Death and Dismemberment (AD&D) Insurance:** Pays a benefit to you or your beneficiary, separate from the life insurance benefit, if you are severely injured or die as the result of a covered accident. The proceeds can be used however you or your beneficiary would like. Coverage on your spouse and children is also available.
- **Conversion*:** You may convert life insurance coverage to an individual Whole Life Insurance policy when you leave your employer or due to loss of eligibility under the employer’s group policy.
- **Portability:** You may apply to continue your Basic and Supplemental coverage when you leave your current employer, and pay premiums to the insurance company directly.
- **Waiver of Premium:** If you become unable to work due to total disability, your Basic and Supplemental Life Insurance can be continued without premium payment.
- **Convenient payroll deductions:** Premium deductions for Supplemental coverages are taken directly from your paycheck, so you never have to worry about late payments or lapse notices.

A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders.

*Coverage on your spouse and children is available if they are enrolled for life insurance.

How much does my life insurance cost?

The cost for Supplement Life is calculated based on the start of the plan's current policy year.

Employee Supplemental Life Insurance Rates

Employee age	11thly rate per \$1,000 of coverage
Under 25	\$0.037
25-29	\$0.043
30-34	\$0.058
35-39	\$0.084
40-44	\$0.119
45-49	\$0.190
50-54	\$0.287
55-59	\$0.462
60-64	\$0.711
65-69	\$1.221
70-74	\$2.197
75+	\$4.595

Spouse Supplemental Life Insurance Rates

Spouse Age	11thly rate per \$1,000 of coverage
Under 25	\$0.087
25-29	\$0.099
30-34	\$0.118
35-39	\$0.162
40-44	\$0.225
45-49	\$0.354
50-54	\$0.556
55-59	\$0.866
60-64	\$1.551
65-69	\$2.650
70-74	\$4.730
75 +	\$9.203

Supplemental Accidental Death and Dismemberment (AD&D) Insurance Rates

Coverage type	11thly rate per \$1,000 of coverage
Employee Supplemental AD&D	\$.018
Spouse Supplemental AD&D	\$.018
Children Supplemental AD&D	\$.018

Children Life Insurance Rates

Coverage levels	11thly cost
\$2,000	\$0.64
\$4,000	\$1.28
\$6,000	\$1.92
\$8,000	\$2.56
\$10,000	\$3.20

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Use the steps below to calculate your premium for you and your spouse based on the amount of insurance you elected:

Step 1: Enter the rate per \$1,000 based on age: _____

Step 2: Take the amount of insurance and divide it by 1,000:
(Example: For \$150,000 of coverage, enter "150") _____

Step 3: Multiply lines 1 and 2 (this is your tenthsly cost): _____

11thly cost for your children: (covers all eligible children)
Enter the tenthsly cost for the amount of coverage from the table above: _____

Exclusions and limitations

Supplemental Life Insurance coverages have a two-year suicide exclusion from the effective date of coverage or an increase in coverage.

AD&D Insurance has exclusions that are described in the certificate of insurance or rider.

Are there additional non-insurance services available?

- **Voya Travel Assistance**
Voya Travel Assistance services are provided by Europ Assistance USA, Bethesda, MD.



Where do I get more information?

For more information or to access the certificate of insurance, please call the Voya Employee Benefits Customer Service Team at (800) 955-7736. Online EBRC/Microsite: <https://presents.voya.com/EBRC/HemetUSD>

This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Group Term Life Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy form ICC LP14GP or LP00GP (may vary by state).

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