# **Additional Life Coverage Highlights**City of Bellevue

### Additional Life and Accidental Death & Dismemberment (AD&D) Insurance

Standard Insurance Company has developed this document to provide you with information about the optional coverage you may select through the City of Bellevue. Written in non-technical language, this is not intended as a complete description of the coverage. If you have additional questions, please refer to the Additional Life Employee Brochure included in your packet or check with your human resources representative.

## **Employer Plan Effective Date**

The *group policy* effective date is January 1, 2002. The City of Bellevue will provide Basic Life coverage from The Standard. If you qualify for Basic Life, you may also apply for Additional Life coverage to supplement your Basic Life amount.

## Eligibility

To be eligible for this plan:

- You must be insured for Basic Life
- You must be an active regular or limited term employee of the City of Bellevue, excluding temporary or seasonal employees, full-time members of the armed forces, leased employees or independent contractors
- You must be regularly working at least 20 hours each week
- For Dependents Life insurance Your spouse or children must not be full-time members of the armed forces

## **Employee Coverage Amount**

You may elect Additional Life coverage in units of \$10,000 to a maximum of \$500,000. The minimum amount you can elect is \$10,000.

If you wish to become insured for an amount of Additional Life in excess of the lesser of 4 times your *annual earnings* or \$200,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases are also subject to medical underwriting approval.

Additional Accidental Death and Dismemberment insurance from Standard Insurance Company is also available with this plan.

Dependents Life insurance from Standard Insurance Company is also available with this plan.

### Spouse Coverage Amount

This coverage is available in units of \$10,000 to a maximum of \$250,000, but not to exceed 100 percent of your combined Basic and Additional Life coverage.

Note: *Spouse* is defined as the person to whom you are legally married or your domestic partner as recognized by law.

If you elect an amount for your *spouse* greater than \$20,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases will also require medical underwriting approval.

Additional Accidental Death and Dismemberment insurance from Standard Insurance Company is also available with this plan.

# Coverage Amount for Children

You may elect \$2,000, \$5,000 or \$10,000 of Dependents Life insurance for your eligible *children*. All late applications will be subject to medical underwriting approval.

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## **Employee Life Rates**

If you elect Additional Life insurance, your monthly premium rate for this plan is indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Employee's Age (as of last	Rate (Per \$1000 of Total Coverage)	
January 1)	Smoker	Non-Smoker
<30	\$0.062	\$0.060
30-34	\$0.083	\$0.080
35-39	\$0.093	\$0.090
40-44	\$0.137	\$0.131
45-49	\$0.220	\$0.210
50-54	\$0.369	\$0.350
55-59	\$0.548	\$0.521
60-64	\$0.931	\$0.891
65-69	\$1.340	\$1.270
70+	\$3.020	\$2.520

To calculate your premium:

1.	Amount Elected: Write this amount on the Additional/Optional Life Requested Amount line on your Enrollment and Change Form.	Line 1:
2.	Line 1 divided by $$1,000 = \text{Line } 2$ .	Line 2:
3.	Select your rate from the rate table and enter on Line 3.	Line 3:
4.	Line 2 multiplied by Line 3 = Your monthly cost.	Line 4:

## **Employee AD&D Rates**

If you elect to add AD&D insurance to your Additional Life insurance, your monthly premium rate is \$0.06 per \$1,000 of AD&D benefit added to the above rates. Premiums for this coverage will be deducted directly from your paycheck. **NOTE: The amount of Additional Life coverage you elect is equal to the amount of Additional AD&D coverage.** 

## Spouse Life Rates

If you elect Dependents Life insurance for your *spouse*, your monthly premium rate for this coverage is indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Spouse's	Rate	
Age	(Per \$1000	
(as of last	of Total Coverage)	
January 1)	Smoker	Non-Smoker
<30	\$0.062	\$0.060
30-34	\$0.083	\$0.080
35-39	\$0.093	\$0.090
40-44	\$0.126	\$0.120
45-49	\$0.199	\$0.189
50-54	\$0.334	\$0.317
55-59	\$0.478	\$0.454
60-64	\$0.779	\$0.740
65-69	\$1.340	\$1.270
70+	\$2.710	\$2.350

To calculate your premium for your *spouse*:

Amount Elected: Write this amount on the Dependents Life Spouse Requested Amount line on your Enrollment and Change Form. Line 1:
Line 1 divided by \$1,000 = Line 2. Line 2:
Select your rate from the rate table and enter on Line 3. Line 3:
Line 2 multiplied by Line 3 = Your monthly cost. Line 4:

#### Spouse AD&D Rates

If you elect to add AD&D insurance to Dependents Life insurance for your *spouse*, your monthly premium rate is \$0.06 per \$1,000 of AD&D benefit added to the above rates. Premiums for this coverage will be deducted directly from your paycheck. **NOTE: The amount of Dependents Life coverage you elect for your** *spouse* **is equal to the amount of Dependents AD&D coverage.** 

## Child(ren) Rates

If you elect Dependents Life insurance for your eligible *child(ren)*, your monthly premium rate for this coverage is \$0.75 for \$2,000, \$1.50 for \$5,000, or \$3.00 for \$10,000; regardless of the number of eligible *children* covered. Premiums for this coverage will be deducted directly from your paycheck.

## **Employee Coverage Effective Date**

Please contact your human resources representative for more information regarding the following requirements that must be satisfied for your insurance to become effective. You must satisfy:

- Eligibility requirements
- An eligibility waiting period
- An evidence of insurability requirement
- An active work requirement. This means that if you are not actively at work on the day before the scheduled effective date of insurance, including Dependents Life insurance, your insurance will not become effective until the day after you complete 1 day of *active work* as an eligible employee.

# Age Reductions

Under this plan, coverage reduces to 65 percent at age 70, to 50 percent at age 75, and to 35 percent at age 80. If you, or your *spouse*, are age 70 or over, ask your human resources representative for the amount of coverage available.

#### Waiver of Premium Provision

The Standard may continue your Life insurance without premium payments if you:

- Become totally disabled while insured under the group policy
- Are under the age of 60
- Complete the waiting period of 180 days
- Give us satisfactory proof of loss

Waiver of Premium does not apply to AD&D insurance.

## **Portability**

If your insurance ends because your employment terminates, you may be eligible to buy portable group insurance coverage. Please see your human resources representative for additional information. This is subject to state variations.

# When Spouse and Child Coverage Ends

Your brochure includes information about when your insurance ends. Any *spouse* and *child* coverage will automatically end on the earliest of the following:

- Five months after the date you die
- The date your Life Insurance ends
- The date Dependents Life Insurance terminates under the *group policy*
- The date the City of Bellevue's coverage under the group policy for Dependents Life Insurance terminates
- The date the last period ends for which a premium was paid for your Dependents Life Insurance
- When the *dependent* ceases to be an eligible *dependent*
- For your *spouse* the date of your divorce or legal separation
- For a child who is disabled, 90 days after we mail you a proof of disability request, if proof is not given

## Accidental Death & Dismemberment (AD&D) Insurance

With Additional Life and AD&D insurance from Standard Insurance Company, you or your beneficiaries may be eligible to receive an additional amount in the event of death or dismemberment as a result of an accident.

# AD&D Insurance Coverage Amount

If you elect AD&D, the amount of this *AD&D Insurance Benefit* for *loss* of life is equal to the amount payable for Additional Life insurance coverage on the date of the accident.

The amount of this *AD&D Insurance Benefit* for other covered *losses* is a percentage of the amount payable for Additional AD&D insurance coverage on the date of the accident, as shown in the following table:

<u>Loss:</u> <u>Percentage Payable:</u>

One hand or one foot 50% Sight in one eye 50% Two or more of the *losses* listed above 100%

#### Additional Features

Following are brief descriptions of features included in this plan. These features offer additional benefits when an *AD&D Insurance Benefit* is payable.

Seat Belt Benefit This provision provides an additional benefit in the event of a covered *automobile* 

accident.

Family Benefits Package Through this provision, your eligible family members may be entitled to receive

additional financial help for child care, college or career training. Included are the *Child Care Benefit*, *Higher Education Benefit* and *Career Adjustment Benefit*.

#### Limitations

The *loss* must occur solely by an accident and independently of all other causes, within 365 days after the accident. *Loss* of life must be evidenced by a certified copy of the death certificate. All other *losses* must be certified by a *physician* in the appropriate specialty as determined by us.

#### **Exclusions**

AD&D Insurance Benefits are not payable for death or dismemberment caused or contributed to by:

- War or act of war, declared or undeclared, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Suicide or other intentionally self-inflicted *injury*, subject to state variations
- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a *physician*
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

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## When Coverage Ends

AD&D insurance for you and your *spouse* will automatically end on the earliest of the following:

- The date your Life insurance ends
- The date your Waiver of Premium begins
- The date AD&D insurance terminates under the *group policy*
- The date the last period ends for which a premium was paid for your AD&D insurance
- The date the City of Bellevue's coverage under the *group policy* for AD&D insurance terminates
- For your *spouse*, the date your Dependents Life insurance ends
- The date your employment terminates

## **Group Insurance Certificate**

If you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage. The information presented above is controlled by the *group policy* and does not modify it in any way. The controlling provisions are in the *group policy* issued by Standard Insurance Company.

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