# **Plan Highlights**

# **Group Voluntary and Dependent Life Insurance**



#### **Eligibility**

**Employees**: Each Active, Full-time employee working 20 or more hours per week, except any person working on a temporary or seasonal basis.

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

Dependents are:

- \* Your legal spouse not legally separated or divorced from you or your domestic partner.
- \* Unmarried financially dependent child(ren)\* from birth to age 20, to age 26 if full time student, unmarried financially dependent child(ren)\* from age 20 if handicapped.
- \* Natural and adopted children; stepchildren and foster children in your custody.
- \* A person may not have coverage as both an Employee and Dependent.
- \* Only one insured spouse may cover Dependent children.

#### **Benefit Amount**

**Voluntary Life:** Choose from a minimum of \$10,000 to a maximum of \$100,000 in \$5,000 increments.

#### **Dependent Life**

**Spouse:** Choose from a minimum of \$5,000 to a maximum of \$100,000 in \$5,000 increments. (Spouse may not exceed 50% of employee amount)

**Dependent Child(ren):** 14 days to age 20 (up to age 26 if full-time student): Choose from a minimum of \$1,000 to a maximum of \$10,000 in \$1,000 increments.

# **Guaranteed Issue (Initial Eligibility Period Only)**

Employee - under age 60: \$100,000 / Age 60 and over: none

**Spouse -** Under age 60: 25,000 / Over age 60: none **Child -** all child amounts are guaranteed issue

### **Contribution Requirements**

**Employee:** Coverage is 100% employee paid. **Spouse:** Coverage is 100% employee paid.

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

## Benefit Reduction Due to Age (applicable to employee/spouse coverage)

**Original Benefits** 

 Age
 Reduced to

 70
 65%

 75
 45%

#### **Features**

- \* Conversion Privilege
- \* FMLA/MSLA Continuation
- \* Portability
- \* Waiver of Premium

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

