Eligible Employees: all eligible associates excluding directors and above in active employment

Term Life and Accidental Death & Dismemberment (AD&D) Insurance



How does it work?

You choose the amount of coverage that's right for you, and you keep coverage for a set period of time, or "term." If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more. AD&D Insurance is also available, which pays a benefit if you survive an accident but have certain serious injuries. It pays an additional amount if you die from a covered accident.

Why is this coverage so valuable?

If you purchase coverage when you are first eligible, you can increase your coverage 2 levels annually until you reach $250,000 without medical underwriting.

Your employer provides following Term Life and AD&D coverage for you:

You:	1 times your annual earnings up to a maximum benefit of $1,500,000 for Life and AD&D.

What else is included?

A 'Living' Benefit — If you are diagnosed with a terminal illness with less than 12 months to live, you can request 90% of your life insurance benefit (to a maximum of $500,000) while you are still living. This amount will be taken out of the death benefit, and maybe taxable. **These benefit payments may adversely affect the recipient's eligibility for Medicaid or other government benefits or entitlements, and may be taxable.** Recipients should consult their tax attorney or advisor before utilizing living benefit payments.

Waiver of premium — The cost of your voluntary life coverage may be waived if you are totally disabled for a period of time.

Portability — You may be able to keep coverage if you leave the company, retire or change the number of hours you work (applies to additional coverage only).

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.

Additional life coverage available to purchase:

If you are actively at work at least 20 hours per week, you may apply for coverage for:

You:	You can purchase additional coverage from $10,000 to the lesser of 8 times annual earnings or $1,500,000 in $10,000 increments. If you are newly eligible, you can qualify for $250,000 without medical underwriting. If you previously declined coverage or wish to increase existing coverage by more than 2 levels or over $250,000, you will need to answer health questions.
Your spouse:	You can purchase coverage from $10,000 to $500,000 in $10,000 increments for your spouse. Spouse coverage must not exceed 100% of the coverage amount you have for yourself. Your newly eligible spouse can get up to $30,000 with no medical underwriting, if eligible (see delayed effective date). If you previously declined coverage or wish to increase existing coverage by more than 1 level, you will need to answer health questions.
Your children:	You can purchase coverage of $5,000, $10,000, or $15,000 if eligible (see delayed effective date). One policy covers all of your children until their 26th birthday.

How much coverage can I get?

Calculate your costs

1. Enter the coverage amount you want.
2. Divide by the amount shown.
3. Multiply by the rate. Use the rate table (at right) to find the rate based on age.
   (Choose the age you will be when your coverage becomes effective. See your plan administrator for your plan effective date. To determine your spouse rate, choose the age the spouse will be when coverage becomes effective. See your plan administrator for your plan effective date.)
4. Enter your cost.

	1	2	3	4
Employee	$_____,000	÷ $10,000 = $_____	X $_____	= $_____
Spouse	$_____,000	÷ $10,000 = $_____	X $_____	= $_____
Child	$_____,000	÷ $5,000 = $_____	X $_____	= $_____
			Total cost	

Employee bi-weekly rate		Spouse bi-weekly rate	Child bi-weekly rate
Age	Per $10,000 of coverage	Per $10,000 of coverage	$0.462 per $5,000 of coverage
	Cost	Cost	
15-24	$0.263	$0.263	
25-29	$0.263	$0.263	
30-34	$0.351	$0.351	
35-39	$0.397	$0.397	
40-44	$0.438	$0.438	
45-49	$0.660	$0.660	
50-54	$1.011	$1.011	
55-59	$1.888	$1.888	
60-64	$2.894	$2.894	
65-69	$5.571	$5.571	
70-74	$9.909	$9.909	
75+	$17.497	$9.909	

Billed amount may vary slightly.
If you apply for coverage above the guaranteed issue amount, you may be subject to medical underwriting which may affect your ability to get the larger coverage amount. In order to purchase coverage for your dependents, you must buy coverage for yourself. Coverage amounts cannot exceed 100% of your coverage amounts.

Exclusions and limitations

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

An unmarried handicapped dependent child who becomes handicapped prior to the child's attainment age of 26 may be eligible for benefits. Please see your plan administrator for details on eligibility.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage. Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths caused by suicide occurring within 24 months after the effective date of coverage. This exclusion standardly applies to all medically written amounts and contributory amounts that are funded by the employee including shared funding plans.

AD&D specific exclusions and limitations:

Accidental death and dismemberment benefits will not be paid for losses caused by, contributed to by, or resulting from:

- Disease of the body; diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane or self-inflicted injury while insane
- War, declared or undeclared, or any act of war
- Active participation in a riot
- The voluntary use of any prescription or non-prescription drug, poison, fume or other chemical substance unless used according to the prescription or direction of your or your dependent's doctor. This exclusion does not apply to you or your dependent if the chemical substance is ethanol.
- Intoxication – 'Being intoxicated' means your or your dependent's blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.
- Operating any motorized vehicle while intoxicated
- An occupational injury. However, we will cover accidental losses due to Occupational Injuries for partners or sole proprietors who cannot be covered by a workers' compensation law
- Travel or flight in any aircraft or device for aerial navigation, including boarding or alighting from it, owned or leased by or on behalf of your Employer
- Travel or flight in any vehicle or device for aerial navigation, including boarding or alighting from it while: it is being used for test or experimental purposes; The Insured is operating, learning to operate or serving as a member of the crew; or it is being operated by or for or under the direction of any military authority
- Combat or training for combat while serving in the armed forces of any nation or authority (including the National Guard) or similar government organizations
- A Covered Loss that occurs while an Insured is legally incarcerated in a penal or correctional institution
- Experimental medical procedures or investigational medical procedures
- Bacterial infection. This exclusion does not apply to an Insured when the bacterial infection is due directly to an accidental cut or wound.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective. Delayed Effective Date: if your spouse or child has a serious injury, sickness, or disorder, or is confined, their coverage may not take effect. Payment of premium does not guarantee coverage. Please refer to your policy contract or see your plan administrator for an explanation of the delayed effective date provision that applies to your plan.

Base Coverage Age Reduction

Coverage amounts for base Life and AD&D Insurance for you will reduce to 65% of the original amount when you reach age 70. Coverage may not be increased after a reduction.

Termination of coverage

Your coverage and your dependents' coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

In addition, coverage for any one dependent will end on the earliest of:

- The date your coverage under a plan ends
- The date your dependent ceases to be an eligible dependent
- For a spouse, the date of a divorce or annulment
- For dependents, the date of your death

Unum will provide coverage for a payable claim that occurs while you and your dependents are covered under the policy or plan.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

Life Planning Financial & Legal Resources services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by:

Unum Life Insurance Company of America, Portland, Maine

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