

Plan Highlights



Group Supplemental and Dependent Life Insurance

City of Lewiston

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
- ▶ 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

Supplemental Life

Employee

Choose from a minimum of \$10,000 to a maximum of \$500,000 in \$10,000 increments

Dependent Life

Spouse

Choose from a minimum of \$5,000 to a maximum of \$250,000 in \$5,000 increments (spouse amount may not exceed 50% of employee amount)

Dependent Child(ren)

6 months to age 20 (26 if full time student): Choice of: \$2,500, \$5,000, \$7,500, or \$10,000

GUARANTEED ISSUE (INITIAL ELIGIBILITY PERIOD ONLY)

Employee:
Under age 70: \$100,000
Age 70 and over: \$50,000

Spouse: \$30,000

Child: all child amounts are guaranteed issue

CONTRIBUTION REQUIREMENTS

Supplemental Life:

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)

Age	Original Benefit
	Reduced To
65	65%
70	45%
75	30%
80	20%
85	15%
90	10%

RATE

See attached Rate Sheet.

FEATURES

- ▶ Living Benefit Rider (expressed as Accelerated Death Benefit in some states and Imminent Death Benefit in PA)
- ▶ 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.

This 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.