

Enrollment at a Glance

A Guide to Your Plan Basics

Gerber Auto Collision & Glass

**Taking advantage of insurance offered at the workplace just makes sense.
It's easy, affordable and guaranteed!**

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

Your employer provides you with Basic Life Insurance coverage and Accidental Death and Dismemberment Insurance in the amount of \$25,000.

Supplemental Term Life Insurance Coverage Options	
For You	\$20,000 to \$500,000 in \$10,000 increments.
For Your Dependent Spouse	\$10,000 to \$250,000 in \$10,000 increments. Spouse coverage is limited to 50% of the employee's supplemental life coverage amount.
For Your Dependent Children	\$5,000 or \$10,000 on your children age 6 months but less than 26 years. Children age 14 days to 6 months are covered for 10 percent of the elected amount.

Supplemental Accidental Death & Dismemberment (AD&D) Coverage Options	
For You	\$20,000 to \$500,000 in \$10,000 increments. Your AD&D coverage is equal to the amount of Employee Supplemental Life Insurance elected.
For Your Dependent Spouse	\$10,000 to \$250,000 in \$10,000 increments. Your AD&D coverage is equal to the amount of Spouse Supplemental Life Insurance elected.
AD&D coverage has exclusions that are described in the certificate of coverage. AD&D coverage is not available for Dependent Children.	



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Employee Supplemental Life Insurance	
Eligibility	All active employees working 32+ hours per week.
Coverage Available without Health Questions	<p>If you have current Supplemental Life coverage: You can increase your current election up to \$125,000 of coverage without having to answer questions relating to your health if you elect it during this open enrollment period.</p> <p>If you are a New Hire: When you are initially eligible for coverage, you are guaranteed up to \$125,000 of Supplemental Life coverage.</p>
Proof of Good Health	<p>If you are electing Supplemental Life coverage for the first time: Proof of good health is required if you are applying for Supplemental Life coverage during this open enrollment period.</p> <p>If you have current Supplemental Life coverage: Proof of good health is required if you are applying for more than the guarantee issue limit of \$125,000 or if you elect Supplemental Life coverage outside of this open enrollment period.</p> <p>If you are a New Hire: Proof of good health is required if you are applying for more than the guarantee issue limit of \$125,000 or if your application is submitted more than 31 days after you become eligible.</p>
Age Reductions	Benefit amounts reduce to 65% of original coverage at age 65, and to 50% of original coverage at age 70, and to 30% of original coverage at age 75.



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Dependent Spouse Supplemental Life Insurance

If you are covered for Supplemental Life, you may apply for Dependent Spouse Life coverage.

Coverage Available without Health Questions	<p>If you have current Dependent Spouse Supplemental Life coverage: You can increase your current election up to \$30,000 of coverage without having to answer questions relating to your Dependent Spouse's health if elected during this open enrollment period.</p> <p>If you are a New Hire: When you are initially eligible for Dependent Spouse coverage, you are guaranteed up to \$30,000 of coverage without having to answer questions relating to your Dependent Spouse's health.</p>
Proof of Good Health	<p>If you are electing Dependent Spouse Supplemental Life coverage for the first time: Proof of good health is required if you are applying for coverage during this open enrollment period.</p> <p>If you have current Dependent Spouse Supplemental Life coverage: Proof of good health is required if you are applying for more than the \$30,000 guarantee issue limit or if you elect coverage outside of this open enrollment period for Dependent Spouse Supplemental Life Insurance.</p> <p>If you are a New Hire: Proof of good health is required if you are applying for more than the guarantee issue limit of \$30,000 or if your application is submitted more than 31 days after you become eligible for Dependent Spouse Supplemental Life Insurance.</p>
Age Reductions	Benefit amounts reduce to 65% of original coverage at spouse age 65, and to 50% of original coverage at spouse age 70, and to 30% of original coverage at spouse age 75.

Dependent Children Supplemental Life Insurance

If you are covered for Supplemental Life, you may apply for Dependent Children Life coverage.

Coverage Available without Health Questions	When you are initially eligible for Dependent Children coverage, you can elect it without proof of good health.
Proof of Good Health	Proof of good health is required if you are increasing current coverage or if your application is submitted more than 31 days after you become eligible for Dependent Children Supplemental Life Insurance.

Contact your employer if you have questions about the definition of "child" for your plan.



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Employee and Spouse Supplemental Life Insurance Rates	
Your Age	Monthly Cost Per \$1,000 of Coverage
Under 25	\$0.06
25-29	\$0.07
30-34	\$0.09
35-39	\$0.11
40-44	\$0.17
45-49	\$0.28
50-54	\$0.43
55-59	\$0.74
60-64	\$0.98
65-69	\$1.59
70 +	\$3.76

Supplemental Accidental Death and Dismemberment (AD&D)	
Monthly Cost per \$1,000 of Coverage	
Employee	\$0.04
Spouse	\$0.04

Dependent Children Supplemental Life Insurance	
The amount of coverage elected is for all eligible children for one low payroll deduction.	
Coverage Levels	Your Monthly Cost
\$5,000 each child	\$0.90
\$10,000 each child	\$1.80



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Life Insurance Premium Calculator

Use the table below to calculate you, your spouse, and/or your dependent children's premium based on the amount of life and AD&D insurance you plan to elect. The cost is calculated based on the age of employee or spouse at the start of the.

Employee Supplemental Life Coverage Table

Select the total amount of Employee Supplemental Life coverage you want and divide by 1,000 <i>Example: For \$100,000 of coverage enter \$100</i>	\$ _____ (a)
Enter the rate from the Life table (found on page 4) based on employee's age	\$ _____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$ _____

Employee Accidental Death and Dismemberment (AD&D) Coverage Table

Select the total amount of Employee Accidental Death and Dismemberment (AD&D) coverage you want and divide by 1,000 <i>Example: For \$100,000 of coverage enter \$100</i>	\$ _____ (a)
Enter the rate from the AD&D table (found on page 4)	\$ _____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$ _____

Spouse Supplemental Life Coverage Table

Select the total amount of Spouse Supplemental Life coverage you want and divide by 1,000 <i>Example: For \$50,000 of coverage enter \$50</i>	\$ _____ (a)
Enter the rate from the Life table (found on page 4) based on your spouse's age	\$ _____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$ _____

Spouse Accidental Death and Dismemberment (AD&D) Coverage Table

Select the total amount of Spouse Accidental Death and Dismemberment (AD&D) coverage you want and divide by 1,000 <i>Example: For \$50,000 of coverage enter \$50</i>	\$ _____ (a)
Enter the rate from the AD&D table (found on page 4)	\$ _____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$ _____



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Children Supplemental Life Coverage Table	
Select the total amount of Children Supplemental Life coverage. <i>Example: Enter \$5,000</i>	\$ _____ (a)
Enter the rate from the Life table (found on page 4)	Monthly Premium: \$ _____

Total Premium	
Total Monthly Premium (12 per year)	\$ _____

The rates shown are guaranteed through 03/31/12.

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 coverage. All coverage is subject to the terms and conditions of the group policy. To keep coverage in force, premiums are payable up to the date of coverage termination. Insurance products and services are provided by ReliaStar Life Insurance Company, a member of the ING family of companies. Policy form LP00GP.

(v. 12/03/10)

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