Plan Highlights

Group Supplemental and Dependent Life Insurance



Western Governors University

ELIGIBILITY

Employees: You are eligible when actively-at-work on a full-time basis as defined by your employer, except if you are working on a temporary or seasonal basis.

Dependents: You must be insured for your Dependents to be covered.

Dependents are:

- Your legal spouse who is not legally separated or divorced from you
- Your legally-recognized domestic or civil union partner
- Your unmarried financially dependent children* birth to 26 years.
 - *Natural and adopted children; stepchildren and foster children in your custody.

Also included are your children beyond the limiting age incapable of self-sustaining employment by reason of intellectual disability or physical handicap and chiefly dependent on you for support and maintenance (may vary by state).

For dependents who are confined in a hospital or at home on the date on which they would otherwise become insured, insurance will be effective as of the date the confinement ends.

- A person may not have coverage as both an Employee and Dependent.
- ▶ Only one insured spouse may cover Dependent children.

BENEFIT AMOUNT

Supplemental Life:

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, a maximum of \$250,000 in \$5,000 increments

(spouse amount may not exceed 100% of employee amount)

Dependent Child(ren):

Birth to 6 months: \$1,000

6 months and over: \$1,000 to \$10,000 in increments of \$1,000

GUARANTEED ISSUE

Initial eligibility period only

Employee:

Under age 60: \$400,000

Age 60 but less than age 70: \$400,000

Age 70 and over: \$400,000

Spouse:

Under age 60: \$50,000

Age 60 but less than age 70: \$50,000

Age 70 and over: \$50,000

Child: all child amounts are guaranteed issue

CONTRIBUTION REQUIREMENTS

Supplemental Life:

Coverage is 100% employee paid.

Dependent Life:

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 Benefit Reduced to
65%
50%

FEATURES

- Accelerated Death Benefit
- Conversion Privilege
- FMLA/MSLA Extension
- Portability
- Waiver of Premium

EXCLUSIONS

LIMITATIONS:

If you or your insured dependent die by suicide, while sane or insane, within two (2) years of your effective date for Supplemental Life and/orDependent Life insurance coverage, our payment will be limited to a refund of all life insurance premiums paid prior to the date of death.

For a comprehensive list of exclusions and specific 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.

