



Group Term Life Insurance

Enrollment at a Glance

Convenient, employer provided life insurance offering financial protection for your loved ones.

For the employees of:
Shelby County Government

What is Group Term Life Insurance?

Group Term Life Insurance is offered through your employer and pays a benefit to your beneficiary if you pass away during a specific period of time (known as a “term”). The term of this coverage is generally one year, renewing on an annual basis with your other employer-offered benefits. Your employer offers Basic Life Insurance and Accidental Death and Dismemberment Insurance (AD&D). You also have the option to elect additional coverage called Supplemental Life Insurance.

Why do I need life insurance?

Below are a few examples of how your life insurance benefit could be used (coverage amounts may vary):

- Pay off any remaining medical bills, funeral costs and debts
- Provide ongoing financial support to your family
- Keep your family in your home by paying off the mortgage
- Fund your children’s education

Who is eligible for life insurance?

- You—all active employees working 20+ hours per week.
- Your spouse*— If your spouse is covered under the policy as an employee, then your spouse is not eligible for coverage under the spouse rider/benefit. If you are covered for employee Basic Life Insurance, you may elect coverage even if you do not elect Supplemental Life Insurance coverage on yourself.
- Your unmarried child(ren) - at birth but less than age 19; age 19 but less than 25 if fulltime student dependent. Coverage is available only if Employee Supplemental Life Insurance is elected. If both you and your spouse are covered under the policy as employees, then only one, but not both, may cover the same children under the children’s rider/benefit. If the parent who is covering the children stops being insured as an employee, then the other parent may apply for children’s coverage.

What amount of coverage am I eligible for?

- For you—Your employer provides you with Basic Life Insurance of 2 times your annual salary to a maximum of \$350,000. Coverage amounts are rounded to the next higher \$1,000.
- Eligible employees may elect Supplemental Group Term Life Insurance of \$10,000, \$25,000, \$50,000, \$100,000, \$150,000, \$200,000, \$250,000, \$300,000, \$350,000 or \$400,000.
- For your spouse and child(ren)*—Eligible employees may elect one of the following options for Spouse and/or Child(ren) Supplemental Life Insurance:

| Option | Spouse Amount | Child(ren) Amount |
|--------|---------------|-------------------|
| 1 | \$20,000 | \$10,000 |
| 2 | \$15,000 | \$7,500 |
| 3 | \$10,000 | \$5,000 |
| 4 | \$5,000 | \$5,000 |
| 5 | \$25,000 | \$12,500 |
| 6 | \$30,000 | \$15,000 |
| 7 | \$50,000 | \$15,000 |
| 8 | \$75,000 | \$15,000 |
| 9 | \$100,000 | \$15,000 |

*The use of “spouse” in this document means a person insured as a spouse as described in the certificate of insurance or rider.

What does my life insurance include?

The benefits listed below are included with your life insurance coverage.

- Accelerated Death Benefit: If you are diagnosed with a terminal illness with a limited life expectancy, you may receive a portion of your death benefit while still living.
- Continuation: If on an approved absence from work, you may continue your life insurance coverage under the employer's group policy for a set amount of time. Premiums must be paid during this time.
- Conversion: You, your spouse and/or your children may convert life insurance coverage to an individual whole life insurance policy when you leave your employer or due to loss of eligibility under the employer's group policy.
- Portability: You may apply to continue your Basic and Supplemental coverage when you leave your current employer, and pay premiums to the insurance company directly.
- Convenient Payroll Deductions—Premium deductions for Supplemental coverages are taken directly from your paycheck, so you never have to worry about late payments or lapse notices.

How much does my life insurance cost?

Basic Life Insurance is provided by your employer. Your employer pays 70% of the cost and employees pay 30% of the cost.

The cost for Supplemental Life is calculated based on the age of the employee (or spouse – for spouse coverage) as of January 1 and the cost is 100% employee paid.

Do I need to provide evidence of insurability (answer health questions) to be covered?

New Hires

- For you—You may elect up to \$150,000 of Supplemental Life Insurance without providing evidence of insurability.
- For your spouse*—You may elect up to \$50,000 of Supplemental Life Insurance on your spouse without providing evidence of insurability.
- For your children— You may elect up to \$15,000 of Supplemental Life Insurance on your child(ren) without providing evidence of insurability.
- If you elect higher amount(s), you will need to submit evidence of insurability to the insurance company for approval before coverage becomes effective.

**The use of "spouse" in this document means a person insured as a spouse as described in the certificate of insurance or rider.*

January 1, 2016 Enrollment

- For you—If you currently have Supplemental Life Insurance, you may elect to increase your coverage amount by one benefit level to a total of \$150,000 during the current enrollment period without providing evidence of insurability. If you are a late entrant, you must provide evidence of insurability for any coverage amount elected.
- For your spouse*—If you currently have Spouse Supplemental Life Insurance, you may elect to increase your coverage amount by one benefit level to a total of \$50,000 during the current enrollment period without providing evidence of insurability on your spouse. If you are a late entrant, you must provide evidence of insurability on your spouse for any coverage amount elected.
- For your children—Evidence of Insurability is Not required at any time.
- When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.

**The use of "spouse" in this document means a person insured as a spouse as described in the certificate of insurance or rider.*

Will my benefits decrease as I get older?

- For you—Benefit amount(s) reduce to 65% of original coverage at age 65 and to 50% of original coverage at age and after.
- For your spouse*—Age reductions do not apply.

**The use of "spouse" in this document means a person insured as a spouse as described in the certificate of insurance or rider.*

Exclusions

What is not covered?

Supplemental Life Insurance coverages have a two year suicide exclusion from the effective date of coverage or an increase in coverage.

Are there additional non-insurance services available?

- **Funeral Planning and Concierge Services:** You have the support of a team of independent professionals ready to assist with funeral planning for you and eligible family members.

Funeral Planning and Concierge Services are provided by Everest Funeral Package, LLC, Houston, TX.

- **Travel Assistance:** When traveling more than 100 miles from home, Voya Travel Assistance offers enhanced security for your leisure and business trips. You and your dependents can take advantage of four types of services: pre-trip information, emergency personal services, medical assistance services and emergency transportation services.

Voya Travel Assistance services are provided by Europ Assistance USA, Bethesda, MD.

Who do I contact with questions?

For more information, please call the Voya Employee Benefits Customer Service Team at (800) 955-7736.

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 insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Group Term Life Insurance is underwritten by ReliaStar Life Insurance Company, a member of the Voya® family of companies. Policy form ICC LP14GP or LP00GP (may vary by state).

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