



# Standard Insurance Company Additional Life and AD&D Coverage Highlights Active Employees Fairfax County Government

# Additional Life and Accidental Death and Dismemberment (AD&D) Insurance

Life insurance coverage can help your family meet daily expenses, maintain their standard of living, pay off debt, secure your children's education, and more in the event of your passing. AD&D insurance can provide you and your family with extra protection in the event of death or dismemberment as a result of a covered accident. Standard Insurance Company (The Standard) has developed this document to provide you with information about the elective coverage you may select through Fairfax County Government.

# **Eligibility Requirements**

# **Employee**

- You must be insured for Basic Life through The Standard
- You must be an active full-time or part-time Day Care Center Supervisor, Day Care Center Teacher I or II, School Health Aide, School Crossing Guard, or merit system employee of Fairfax County Government working at least 20 hours each week
- Status B employees, temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible

#### Dependent

- You must be insured for Basic Life insurance for yourself in order to elect Dependents Life insurance
- Spouse means a person to whom you are legally married
- Child means your child from live birth to age 26
- Your child cannot be insured by more than one employee]
- Your spouse or children must not be full-time member(s) of the armed forces

#### **Premium**

• You pay 100 percent of the premium for this coverage through easy payroll deduction

# **Coverage Amount Guidelines**

Within the coverage amount guidelines shown below, select the amount of Additional Life and Dependents Life insurance for which you are interested in applying.

	Incremental Unit	Guarantee Issue Amount	Maximum	Minimum
Employee	Your choice of: 1x, 2x, 3x or 4x your Annual Earnings*	2 x your Annual Earnings*	\$1,000,000	1x your Annual Earnings*

<sup>\*</sup> Rounded to the next higher multiple of \$1,000, if not already a multiple of \$1,000

	Your choice of one of the following plans:		
Dependents	Option 1	Spouse \$10,000 / Child \$5,000	
Dependents	Option 2	Spouse \$15,000 / Child \$10,000	
	Option 3	Spouse \$25,000 / Child \$15,000	

## Note

- Amounts of coverage elected above the Guarantee Issue Amount are subject to medical underwriting approval.
   To submit a medical history statement online, visit: <a href="myeoi.standard.com/649317">myeoi.standard.com/649317</a>.
- All late applications (applying 30 days after becoming eligible), requests for coverage increases and
  reinstatements for you and your spouse are subject to medical underwriting approval. Employees and spouses
  eligible but not insured under the prior life insurance plan are also subject to medical underwriting approval.
- The coverage amount for your spouse cannot exceed 100 percent of your combined Basic and Additional Life coverage.
- The coverage amount for your child(ren) cannot exceed 100 percent of your combined Basic and Additional Life coverage.

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## **Coverage Amount Needed**

Your family has a unique set of circumstances and financial demands. To help you figure out the amount of Additional Life insurance you may need to protect your loved ones, The Standard has created a Life Insurance Needs Calculator found at: <a href="mailto:standard.com/lifeneeds">standard.com/lifeneeds</a>.

# **Employee Coverage Effective Date**

To become insured, you must satisfy the eligibility requirements listed above, serve an eligibility waiting period, receive medical underwriting approval (if applicable), agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance including Dependents Life insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative for more information regarding these requirements that must be satisfied for your insurance to become effective.

## Life and AD&D Age Reductions

Under this plan, your coverage amount reduces by your age as follows: by 35 percent at age 65, and by 50 percent at age 70.

Please note: If you reach an age shown above, your annual earnings prior to rounding will be multiplied by the appropriate percentage above. Following reduction, your life insurance benefit will be rounded to the next higher multiple of \$1,000, if not already a multiple of \$1,000.

If you are age 65 or over, ask your human resources representative for the amount of coverage available.

#### **Life Insurance Exclusions**

This plan contains an exclusion for death resulting from suicide or other intentionally self-inflicted injury. The amount payable will exclude amounts that have not been continuously in effect for at least two years on the date of death. This is subject to state variations.

#### **Life Insurance Features and Benefits**

Please see your human resources representative for additional information about the features and benefits below.

Waiver of Premium If you become totally disabled while insured under this plan and under age 60, and

complete a waiting period of 180 days, your Basic and Additional Life insurance may continue without premium payment until age 65 provided you give us satisfactory proof

that you remain totally disabled. Waiver of Premium does not apply to AD&D

insurance.

Accelerated Benefit If you become terminally ill, you may be eligible to receive up to 75 percent of your

combined Basic and Additional Life benefit to a maximum of \$500,000.

**Portability** If your insurance ends because your employment terminates, you may be eligible to

buy portable group insurance coverage.

**Conversion** If your insurance ends or reduces, you may be eligible to convert your life insurance to

an individual life insurance policy without submitting proof of good health.

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#### Additional AD&D Insurance Benefit Schedule

The amount of the Additional AD&D benefit for loss of your life is equal to the amount payable for your Additional Life benefit on the date of the accident. The amount of the Additional AD&D benefit for other covered losses is a percentage of the amount payable for the Additional AD&D benefit on the date of the accident as shown below.

Loss: Percentage Payable:

Loss of Life 100%
One hand or one foot 50%
Sight in one eye, speech, or hearing in both ears 50%
Two or more of the losses listed above 100%
Thumb and index finger of the same hand 25%

The loss must be caused solely and directly by an accident and occurs independently of all other causes, within 365 days after the accident. Loss of life must be evidenced by a certified copy of the death certificate. All other losses must be certified by a physician in the appropriate specialty as determined by The Standard. No more than 100 percent of the AD&D benefit will be paid for all losses resulting from one accident.

#### Additional AD&D Insurance Exclusions

Subject to state variations, AD&D benefits are not payable for death or dismemberment caused or contributed to by:

- War or act of war, declared or undeclared, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a physician
- · Sickness or pregnancy existing at the time of the accident
- · Heart attack or stroke
- · Medical or surgical treatment for any of the above

#### When Insurance Ends

Coverage ends automatically on the earliest of the following:

- · The last date the last period ends for which a premium was paid
- The last day of the calendar month in which your employment terminates, unless you are eligible for benefits as a retired member
- The last day of the calendar month in which you cease to meet the eligibility requirements (coverage may continue for limited periods under certain circumstances)
- The date the group policy, or your employer's coverage under the group policy, terminates
- For each elective insurance coverage, the date that coverage terminates under the group policy
- For Additional AD&D insurance for you, the date your Additional life insurance ends

In addition to the above requirements, your Dependents Life coverage ends automatically on the date your dependent ceases to meet the eligibility requirements for a dependent.

For more details on when insurance ends, contact your human resources representative.

# **Group Insurance Certificate**

If coverage becomes effective, and you become insured, a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events will be made available on FairfaxNet. The controlling provisions will be in the group policy. Neither the information presented in this summary nor the certificate modifies the group policy or the insurance coverage in any way.

<sup>&</sup>lt;sup>1</sup> This benefit is not payable if an Additional AD&D benefit is payable for the loss of the entire hand.

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Line 1:

Line 3:

# **Employee Rates**

If you elect Additional Life with AD&D insurance, your monthly rate for this plan is indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Employee's Age (as of your birthday)	Rate* (Per \$1,000 of Total Coverage)
<30	\$0.10
30-49	\$0.23
50-59	\$0.43
60-79	\$0.87
80-84	\$5.67
85-89	\$9.59
90-94	\$28.10
95+	\$54.43

To calculate your monthly premium:

- 1. Amount Elected: Write this amount on the Additional Life with AD&D requested amount line on your Enrollment and Change Form.
- 2. Line 1 divided by \$1,000 = Line 2.
- 3. Select your rate from the rate table and enter on Line 3.
- 4. Line 2 multiplied by Line 3 = Your monthly cost. Line 4:

#### **Dependent Rates**

If you elect Dependents Life insurance, your monthly rate for this coverage is indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Plan	Benefit Amount	Monthly Rate Per Member, Regardless of the number of dependents covered
Option 1	Spouse \$10,000 / Child \$5,000	\$2.41
Option 2	Spouse \$15,000 / Child \$10,000	\$4.82
Option 3	Spouse \$25,000 / Child \$15,000	\$9.67

<sup>\*</sup> Monthly AD&D rate of \$.02 per \$1,000 of AD&D benefit has been included in each of the above rates.

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#### **Standard Insurance Company**

For more than 100 years we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers.

Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group Disability, Life, Dental and Vision insurance and Individual Disability insurance. We provide insurance to more than 24,800 groups, covering over 8 million employees nationwide.\* Our first group policy, written in 1951 and still in force today, stands as a testament to our commitment to building long-term relationships.

To learn more about products from The Standard, Contact your human resources department or visit us at www.standard.com.

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

GP190-LIFE/S399, GP399-LIFE/TRUST, GP899-LIFE, GP190-LIFE/A997/S399

SI **12506** 

<sup>\*</sup> As of June 30, 2013, based on internal data developed by Standard Insurance Company.