

Coverage and Eligibility

Employee Eligibility

To be eligible for insurance, an employee must satisfy all of the following requirements:

- be age 16 through 80.
- be on active service, performing in the usual manner all of the regular duties of his or her occupation at one of the places of business where he or she normally works or at some location directed by the employer.
- be continuously employed for the amount of time and working the minimum number of hours per week as you require to be eligible for benefits.

\$50,000 - \$150,000 Guaranteed Issue benefit. \$250,000 & \$500,000 Simplified Issue – requires Evidence of Insurability. Maximum benefit not to exceed 5x base salary. Minimum benefit dependent upon minimum premium requirements as filed with the state insurance departments.

Spouse/Partner Eligibility

To be eligible for insurance, a spouse (or equivalent as defined by state law) must satisfy all of the following requirements:

- must be age 16 through 65.
- must be legally married to the employee as determined by the laws of the state in which the employee resides or meet the eligibility requirements required by the group to be benefit eligible.
- must not be disabled.
- must not be eligible as an employee under the group policy.

\$10,000 – \$50,000 benefit Guaranteed Issue benefit. Minimum benefit dependent upon minimum premium requirements as filed with the state insurance departments. The employee must participate to receive Guaranteed Issue underwriting on spouses/partners.

Additional health questions and underwriting for Simplified Issue may include, but not limited to the following: In the past 6 months, has any proposed insured been hospitalized (inpatient or outpatient) or missed more than 5 consecutive days of work due to any accident or sickness, except for normal pregnancy? In the past 5 years, has any proposed insured had an actual diagnosis or treatment by a member of the medical profession for Acquired Immune Deficiency Syndrome or AIDS Related Complex? Indicate Height and Weight. In the past 5 years, has any proposed insured been diagnosed or treated by a member of the medical profession for any heart (including heart attack), circulatory, vascular (including stroke), blood, brain, digestive, kidney, liver, lung, musculoskeletal, respiratory, rheumatoid, neurological, pancreas, reproductive, or other major organ disorders, cancer, or malignancy in any form (except non-melanoma skin cancer), diabetes, Optic Neuritis, blood transfusion, chronic fatigue syndrome, fibromyalgia, high blood pressure requiring more than 2 medications to control, or been treated or counseled in the past 2 years for alcohol or drug abuse?

POLICY EFFECTIVE DATES

- Age will be determined based on the certificate 6/1/2020 effective date.
- The application date must be prior to the coverage effective date.
- A full month's deduction must be taken during the prior month for a policy effective date to begin on the first of the next month (i.e., bi-weekly must have two deductions; weekly must have four deductions).

Refer to the certificate of insurance for full disclosures, limitations and exclusions.