

Plan Highlights

Group Supplemental and Dependent Life Insurance



Archdiocese of Louisville

ELIGIBILITY

All eligible full time employees

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- ▶ your legal spouse not legally separated or divorced from you.
- ▶ All dependent children are covered until age 26 regardless of student status, marital status or financial dependency.

* natural and adopted children; stepchildren and foster children in your custody.

Age limit does not apply to handicapped children.

- ▶ 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 \$200,000 in \$10,000 increments

Subject to a maximum five(5) times employee annual salary.

Dependent Life

Spouse

Choose from a minimum of \$5,000 to a maximum of \$50,000 in \$5,000 increments (not to exceed 100% of employee amount)

Dependent Child(ren)

14 days to 6 Months: \$500

Age 6 Months to 26 years of age: \$10,000

GUARANTEED ISSUE (INITIAL ELIGIBILITY PERIOD ONLY)

Employee:

Under age 60: \$200,000

Age 60 but less than age 70: \$200,000

Age 70 and over: \$10,000

Spouse:

All ages: \$50,000

Child: all child amounts are guaranteed issue

BENEFIT REDUCTION DUE TO AGE

(applicable to employee/spouse coverage)

Age	Original Benefit
	Reduced To
75-79	60.0% of the amount in force at age 74
80-84	35.0% of the amount in force at age 74
85-89	27.5% of the amount in force at age 74
90-94	20% of the amount in force at age 74
95-99	7.5% of the amount in force at age 74
100 and over	5.0% of the amount in force at age 74

CONTRIBUTION REQUIREMENTS

Supplemental Life:

Coverage is 100% employee paid.

Spouse: Coverage is 100% employee paid.

Dependent Child(ren): Coverage is 100% employee paid.

FEATURES

- ▶ Portability
- ▶ Waiver of Premium
- ▶ Living Benefit Rider (expressed as Accelerated Death Benefit in some states)
- ▶ 24-hour Travel Assistance Services

EXCLUSIONS

For a comprehensive list of exclusions and 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.