

Life and Accidental Death and Dismemberment (AD&D)

BROWNWOOD INDEPENDENT SCHOOL DISTRICT | All Other Eligible Employees | 49863

Protect your family

Life insurance provides the people you love with financial support when you can't be there—and when they need it most.

How it works

You are responsible for sharing the cost of this insurance.

Benefits

For you	<p>\$10,000, with no medical questions asked.</p> <p>Benefits are reduced to 67% at age 70 and to 50% at age 75.</p> <p>Your coverage ends at termination of employment or retirement.</p>
For your spouse	<p>\$2,000, with no medical questions asked.</p> <p>Benefit may be reduced when the employee benefit amount is reduced.</p>
For your child(ren)	<p>\$1,000 benefit amount.</p> <p>A full benefit is payable for a dependent child who is 1 year to 26 years old.</p> <p>Benefit may be reduced when the employee benefit amount is reduced.</p>



Reasons why you may need life insurance



Provide financial support for others



Pay household expenses



Pay tuition



Leave an inheritance or philanthropic gift



Pay funeral or medical expenses

Accidental Death and Dismemberment (AD&D)

This coverage includes an equal amount of AD&D insurance that provides a benefit if you suffer a covered accidental injury or die from a covered accident.	Benefits – This is a partial list. Refer to the certificate for the full list of covered accidental injuries.			
	Accidental injury	The plan pays	Accidental injury	The plan pays
	Accidental death	100%	Loss of speech only or hearing only	50%
	Quadriplegia	100%	Loss of limb (arm or leg)	50%
	Loss of sight of one eye	50%	Loss of thumb and index finger on same hand	25%

Additional considerations

If I become terminally ill	You may apply to receive a portion of your life insurance to help cover medical and living expenses. This is not long-term-care insurance. It will reduce the total amount of the life insurance payment we pay to your beneficiary(ies). Receipt of the Accelerated Benefit may be taxable and may affect your eligibility for public assistance programs.
If I become Totally Disabled	If we determine that you are Totally Disabled and cannot work, your life insurance coverage may continue at no cost. You must meet certain requirements, as detailed in the Certificate.

Life and AD&D FAQ

How is my benefit claim filed and paid?

You or your beneficiary(ies) and your employer will complete the appropriate claims forms and submit these to Sun Life. Our claims examiners review the claim and gather additional information if necessary. We will notify you or your beneficiaries when the decision is made. If your death claim is approved, beneficiaries may

elect to receive a lump sum payment or to have the benefit paid into an account where the funds accumulate interest and can be withdrawn at any time. (State restrictions apply and options may vary by state.) If your AD&D claim for an accidental injury is approved, the benefit amount will be paid directly to you.

Read the important plan provisions section for more information including limitations and exclusions.

Important information

The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”). They do NOT provide basic hospital, basic medical, or major medical insurance.

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Similarly, dependent coverage, if offered, may be delayed if your dependents are in the hospital (except for newborns) on the date coverage would otherwise become effective. Refer to the Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Life

In some states, your employer’s group policy may exclude payment for suicide that occurs within a specific time period after the insurance or increase in insurance becomes effective. Please see your Certificate for details.

Accidental Death and Dismemberment

We will not pay a benefit that is due to or results from: suicide while sane or insane; injuring oneself intentionally; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; voluntary use of any controlled substance/illegal drugs; operation of a motorized vehicle while intoxicated; bodily or mental infirmity or disease or infection unless due to an accidental injury; riding in or driving any motor-driven vehicle in a race, stunt show, or speed test.

This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern. Product offerings may not be available in all states and may vary depending on state laws and regulations.

Sun Life companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, “Sun Life”).

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 98P-ADD, 12-GP-01, 15-GP-01, 15-LF-C-01, 15-ADD-C-01, 16-DEN-C-01, 16-VIS-C-01, 12-DI-C-01, 16-DI-C-01, 12-AC-C-01, 16-AC-C-01, 13-SD-C-01, 16-SD-C-01, 16-CAN-C-01, TDBPOLICY-2006, and TDI-POLICY.

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Employee - Coverage and **monthly** rate Basic Life (and AD&D) Insurance.

Rates are effective as of September 01, 2025.

Basic Life (and AD&D) coverage is contributory. You are responsible for paying for all or a part of the cost through payroll deduction.

Follow the example below to figure out your monthly and pay period costs

See the total monthly cost of dependent coverage below and follow the example to figure out your per pay period cost.

Rate
\$0.194

	Rate
Dependent	\$1.067

Example amount of insurance		Divided by 1000		Multiplied by rate	Example cost*	
\$20,000	/	1000 = 20	x	\$0.194	\$3.88	
Your volume of insurance		Divided by 1000		Multiplied by rate	Your monthly cost*	
\$ _____	/	1000 = _____	x	\$ _____	\$ _____	
Your Monthly Cost		# of Months		Annual cost	# of pay periods per year (12,24,26,52, etc.)	Your estimated cost per pay period*
\$ _____	x	12	=	\$ _____	/ _____ =	\$ _____

*Contact your employer to confirm the portion of the cost for which you will be responsible.