Optional Life and Accidental Death and Dismemberment (AD&D) insurance

Goose Creek Consolidated Independent School District | All Eligible Employees | 26392

Protect your family

The people you love and support could face financial challenges if you were no longer around. Life insurance provides your loved ones with money they can use for household expenses, tuition, mortgage payments and more.

How it works

Your employer is offering you and your coworkers this coverage as a group, at a group rate. You are responsible for paying all or a portion of the cost. Choose the benefit that best meets your needs and your budget.

Benefits

For you

You can choose from **\$10,000 to \$500,000**—in increments of \$10,000, **not to exceed 5 times** your basic annual earnings—with no medical questions asked **up to the Guaranteed Issue amount of \$300,000** if you are under age 60, \$40,000 if you are age 60-69, \$20,000 if you are age 70-79, and \$1,000 if age 80 or over.

The benefit amount is reduced to 67% at age 70 and to 50% at age 75.

Your coverage ends at termination of employment or retirement.

For your spouse

If you elect coverage for yourself, you can choose from \$5,000 to \$250,000—in increments of \$5,000—with no medical questions asked up to the Guaranteed Issue amount of \$50,000 if your spouse is under age 60 and \$10,000 if age 60 or over .

(The amount you select for your spouse cannot exceed 50% of your coverage amount.)

Spouse rates are based on spouse age.

Coverage ends when your spouse turns age 70.

The benefit amount may be reduced when the employee benefit amount is reduced.

For your child(ren)

If you elect coverage for yourself, you can choose **\$2,500 to \$10,000**—in \$2,500 increments—with no medical questions asked.

(The amount you select for your child(ren) cannot exceed 50% of your coverage amount.)





What does life insurance mean for the Jones family?

Jason and Charlotte just bought their first house and are expecting their first child. They didn't think they could afford life insurance—and they didn't think they needed it because they're young and healthy.

However, Jason's best friend from high school was recently killed in a car accident. Sadly, his wife is selling their home because she can't afford the mortgage on her own.

Jason and Charlotte started to rethink life insurance, and were surprised to find options at work that meet their budget.

Since most people would have trouble paying living expenses after several months if their primary wage earner died, * it may be worth asking, who depends on you? The benefit amount may be reduced when the employee benefit amount is reduced.

A full benefit is payable for a dependent child who is 1 year to 26 years old. A reduced benefit is payable for a child from 14 days to 1 year.



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 impact your eligibility for public assistance programs.
If I leave my employer	Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.
If I've had a life change	You may be able to adjust your coverage as your needs change (e.g., you get married or have a baby). Certain changes require you to answer health questions. Ask your employer for details.

Life and AD&D FAQ

Do I have to answer health questions to enroll?

You will be required to answer health questions if (1) you do not elect coverage when it's first available to you and you want to elect at a later date; (2) you request an amount higher than the Guaranteed Issue amount noted in the table, if offered; or (3) you want to increase coverage at a later date. You will need to fill out and submit our Evidence of Insurability application which must be approved by Sun Life before the coverage takes effect.

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.

these to Sun Life. Our claims examiners review the

How is my benefit claim filed and paid?

You or your beneficiary(ies) and your employer will complete the appropriate claims forms and submit

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

* Facts About Life 2016, LIMRA.com, September 2016, accessed June 2018.

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, 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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Rate Sheet

Employee - Coverage and **bi-weekly** cost for Employee Optional Life and AD&D.

Rates are effective as of October 01, 2019.

The chart below shows possible coverage amounts and corresponding costs per pay-period.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

	Age and Cost										
Coverage											
Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$10,000	0.27	0.33	0.44	0.49	0.55	0.82	1.26	2.36	3.62	6.96	11.29
\$20,000	0.54	0.66	0.88	0.99	1.10	1.64	2.52	4.72	7.24	13.93	22.59
\$30,000	0.82	0.98	1.32	1.48	1.65	2.46	3.78	7.08	10.86	20.89	33.88
\$40,000	1.09	1.31	1.75	1.98	2.20	3.29	5.04	9.43	14.47	27.86	45.18
\$50,000	1.36	1.64	2.19	2.47	2.75	4.11	6.30	11.79	18.09	34.82	56.47
\$60,000	1.63	1.97	2.63	2.96	3.30	4.93	7.56	14.15	21.71	41.79	67.76
\$70,000	1.91	2.29	3.07	3.46	3.84	5.75	8.82	16.51	25.33	48.75	79.06
\$80,000	2.18	2.62	3.51	3.95	4.39	6.57	10.08	18.87	28.95	55.72	90.35
\$90,000	2.45	2.95	3.95	4.44	4.94	7.39	11.34	21.23	32.57	62.68	101.64
\$100,000	2.72	3.28	4.38	4.94	5.49	8.22	12.60	23.58	36.18	69.65	112.94
\$110,000	3.00	3.60	4.82	5.43	6.04	9.04	13.86	25.94	39.80	76.61	124.23
\$120,000	3.27	3.93	5.26	5.93	6.59	9.86	15.12	28.30	43.42	83.58	135.53
\$130,000	3.54	4.26	5.70	6.42	7.14	10.68	16.38	30.66	47.04	90.54	146.82
\$140,000	3.81	4.59	6.14	6.91	7.69	11.50	17.64	33.02	50.66	97.50	158.11
\$150,000	4.08	4.92	6.58	7.41	8.24	12.32	18.90	35.38	54.28	104.47	169.41
\$160,000	4.36	5.24	7.02	7.90	8.79	13.14	20.16	37.74	57.90	111.43	180.70
\$170,000 \$180,000	4.63 4.90	5.57 5.90	7.45 7.89	8.40 8.89	9.34 9.89	13.97 14.79	21.42 22.68	40.09 42.45	61.51 65.13	118.40 125.36	192.00 203.29
\$180,000	5.17	6.23	8.33	9.38	10.44	15.61	23.94	44.81	68.75	132.33	214.58
\$200,000	5.45	6.55	8.77	9.88	10.44	16.43	25.20	47.17	72.37	139.29	225.88
\$210,000	5.72	6.88	9.21	10.37	11.53	17.25	26.46	49.53	75.99	146.26	237.17
\$220,000	5.99	7.21	9.65	10.86	12.08	18.07	27.72	51.89	79.61	153.22	248.46
\$230,000	6.26	7.54	10.08	11.36	12.63	18.90	28.98	54.24	83.22	160.19	259.76
\$240,000	6.54	7.86	10.52	11.85	13.18	19.72	30.24	56.60	86.84	167.15	271.05
\$250,000	6.81	8.19	10.96	12.35	13.73	20.54	31.50	58.96	90.46	174.12	282.35
\$260,000	7.08	8.52	11.40	12.84	14.28	21.36	32.76	61.32	94.08	181.08	293.64
\$270,000	7.35	8.85	11.84	13.33	14.83	22.18	34.02	63.68	97.70	188.04	304.93
\$280,000	7.62	9.18	12.28	13.83	15.38	23.00	35.28	66.04	101.32	195.01	316.23
\$290,000	7.90	9.50	12.72	14.32	15.93	23.82	36.54	68.40	104.94	201.97	327.52
\$300,000	8.17	9.83	13.15	14.82	16.48	24.65	37.80	70.75	108.55	208.94	338.82
\$310,000	8.44	10.16	13.59	15.31	17.03	25.47	39.06	73.11	112.17	215.90	350.11
\$320,000	8.71	10.49	14.03	15.80	17.58	26.29	40.32	75.47	115.79	222.87	361.40
\$330,000	8.99	10.81	14.47	16.30	18.12	27.11	41.58	77.83	119.41	229.83	372.70
\$340,000	9.26	11.14	14.91	16.79	18.67	27.93	42.84	80.19	123.03	236.80	383.99
\$350,000	9.53	11.47	15.35	17.28	19.22	28.75	44.10	82.55	126.65	243.76	395.28
\$360,000	9.80	11.80	15.78	17.78	19.77	29.58	45.36	84.90	130.26	250.73	406.58
\$370,000	10.08	12.12	16.22	18.27	20.32	30.40	46.62	87.26	133.88	257.69	417.87
\$380,000	10.35	12.45	16.66	18.77	20.87	31.22	47.88	89.62	137.50	264.66	429.17
\$390,000	10.62	12.78	17.10	19.26	21.42	32.04	49.14	91.98	141.12	271.62	440.46
\$400,000	10.89	13.11	17.54	19.75	21.97	32.86	50.40	94.34	144.74	278.58	451.75
\$410,000	11.16	13.44	17.98	20.25	22.52	33.68	51.66	96.70	148.36	285.55	463.05
\$420,000	11.44	13.76	18.42	20.74	23.07	34.50	52.92	99.06	151.98	292.51	474.34
\$430,000	11.71	14.09	18.85	21.24	23.62	35.33	54.18	101.41	155.59	299.48	485.64
\$440,000	11.98	14.42	19.29	21.73	24.17	36.15	55.44	103.77	159.21	306.44	496.93
\$450,000	12.25	14.75	19.73	22.22	24.72	36.97	56.70	106.13	162.83	313.41	508.22
\$460,000	12.53	15.07	20.17	22.72	25.26	37.79	57.96	108.49	166.45	320.37	519.52
\$470,000	12.80 13.07	15.40 15.73	20.61	23.21	25.81	38.61 39.43	59.22	110.85 113.21	170.07	327.34	530.81
\$480,000 \$490,000	13.07	16.06	21.05 21.48	23.70 24.20	26.36 26.91	40.26	60.48 61.74	115.56	173.69 177.30	334.30 341.27	542.10 553.40
\$500,000	13.62	16.38	21.46	24.20	27.46	41.08	63.00	117.92	180.92	348.23	564.69
\$300,000	13.62	10.36	21.72	24.09	27.40	41.08	63.00	117.92	100.92	340.23	304.09

Spouse - Coverage and **bi-weekly** cost for Spouse Optional Life.

Rates are effective as of October 01, 2019.

The chart below shows possible coverage amounts and corresponding costs per pay-period.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

Age and Cost										
Coverage Amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
\$5,000	0.10	0.13	0.18	0.21	0.24	0.38	0.60	1.14	1.77	3.45
\$10,000	0.20	0.26	0.37	0.42	0.48	0.75	1.19	2.29	3.55	6.90
\$15,000	0.30	0.39	0.55	0.64	0.72	1.13	1.79	3.43	5.32	10.34
\$20,000	0.41	0.52	0.74	0.85	0.96	1.50	2.38	4.58	7.10	13.79
\$25,000	0.51	0.65	0.92	1.06	1.20	1.88	2.98	5.72	8.87	17.24
\$30,000	0.61	0.78	1.11	1.27	1.44	2.26	3.57	6.87	10.65	20.69
\$35,000	0.71	0.90	1.29	1.49	1.68	2.63	4.17	8.01	12.42	24.13
\$40,000	0.81	1.03	1.48	1.70	1.92	3.01	4.76	9.16	14.20	27.58
\$45,000	0.91	1.16	1.66	1.91	2.16	3.39	5.36	10.30	15.97	31.03
\$50,000	1.02	1.29	1.85	2.12	2.40	3.76	5.95	11.45	17.75	34.48
\$55,000	1.12	1.42	2.03	2.34	2.64	4.14	6.55	12.59	19.52	37.92
\$60,000	1.22	1.55	2.22	2.55	2.88	4.51	7.14	13.74	21.30	41.37
\$65,000	1.32	1.68	2.40	2.76	3.12	4.89	7.74	14.88	23.07	44.82
\$70,000	1.42	1.81	2.58	2.97	3.36	5.27	8.34	16.02	24.84	48.27
\$75,000	1.52	1.94	2.77	3.18	3.60	5.64	8.93	17.17	26.62	51.72
\$80,000	1.62	2.07	2.95	3.40	3.84	6.02	9.53	18.31	28.39	55.16
\$85,000	1.73	2.20	3.14	3.61	4.08	6.39	10.12	19.46	30.17	58.61
\$90,000	1.83	2.33	3.32	3.82	4.32	6.77	10.72	20.60	31.94	62.06
\$95,000	1.93	2.46	3.51	4.03	4.56	7.15	11.31	21.75	33.72	65.51
\$100,000	2.03	2.58	3.69	4.25	4.80	7.52	11.91	22.89	35.49	68.95
\$105,000	2.13	2.71	3.88	4.46	5.04	7.90	12.50	24.04	37.27	72.40
\$110,000	2.23	2.84 2.97	4.06 4.25	4.67 4.88	5.28 5.52	8.28 8.65	13.10 13.69	25.18 26.33	39.04 40.82	75.85 79.30
\$115,000	2.34	3.10	4.23	5.10	5.76	9.03	14.29	27.47	42.59	82.74
\$120,000 \$125,000	2.54	3.10	4.43	5.10	6.00	9.03	14.29	28.62	44.37	86.19
\$130,000	2.64	3.36	4.80	5.52	6.24	9.40	15.48	29.76	46.14	89.64
\$135,000	2.74	3.49	4.98	5.73	6.48	10.16	16.08	30.90	47.91	93.09
\$140,000	2.84	3.62	5.17	5.94	6.72	10.53	16.67	32.05	49.69	96.54
\$145,000	2.94	3.75	5.35	6.16	6.96	10.91	17.27	33.19	51.46	99.98
\$150,000	3.05	3.88	5.54	6.37	7.20	11.28	17.86	34.34	53.24	103.43
\$155,000	3.15	4.01	5.72	6.58	7.44	11.66	18.46	35.48	55.01	106.88
\$160,000	3.25	4.14	5.91	6.79	7.68	12.04	19.05	36.63	56.79	110.33
\$165,000	3.35	4.26	6.09	7.01	7.92	12.41	19.65	37.77	58.56	113.77
\$170,000	3.45	4.39	6.28	7.22	8.16	12.79	20.24	38.92	60.34	117.22
\$175,000	3.55	4.52	6.46	7.43	8.40	13.17	20.84	40.06	62.11	120.67
\$180,000	3.66	4.65	6.65	7.64	8.64	13.54	21.43	41.21	63.89	124.12
\$185,000	3.76	4.78	6.83	7.86	8.88	13.92	22.03	42.35	65.66	127.56
\$190,000	3.86	4.91	7.02	8.07	9.12	14.29	22.62	43.50	67.44	131.01
\$195,000	3.96	5.04	7.20	8.28	9.36	14.67	23.22	44.64	69.21	134.46
\$200,000	4.06	5.17	7.38	8.49	9.60	15.05	23.82	45.78	70.98	137.91
\$205,000	4.16	5.30	7.57	8.70	9.84	15.42	24.41	46.93	72.76	141.36
\$210,000	4.26	5.43	7.75	8.92	10.08	15.80	25.01	48.07	74.53	144.80
\$215,000	4.37	5.56	7.94	9.13	10.32	16.17	25.60	49.22	76.31	148.25
\$220,000	4.47	5.69	8.12	9.34	10.56	16.55	26.20	50.36	78.08	151.70
\$225,000	4.57	5.82	8.31	9.55	10.80	16.93	26.79	51.51	79.86	155.15
\$230,000	4.67	5.94	8.49	9.77	11.04	17.30	27.39	52.65	81.63	158.59
\$235,000	4.77	6.07	8.68	9.98	11.28	17.68	27.98	53.80	83.41	162.04
\$240,000	4.87	6.20	8.86	10.19	11.52	18.06	28.58	54.94	85.18	165.49
\$245,000	4.98	6.33	9.05	10.40	11.76	18.43	29.17	56.09	86.96	168.94
\$250,000	5.08	6.46	9.23	10.62	12.00	18.81	29.77	57.23	88.73	172.38

Child - Coverage and **bi-weekly** cost for Child Optional Life.

Rates are effective as of October 01, 2019.

The chart below shows possible coverage amounts and corresponding costs per pay-period.

Coverage Amounts	Cost per pay period			
\$2,500	0.14			
\$5,000	0.28			
\$7,500	0.43			
\$10,000	0.57			