

Voluntary Term Life Insurance/AD&D Coverage Highlights COLTON JOINT UNIFIED SCHOOL DISTRICT – DIVISION 003

High Desert & Inland Employee-Employer Trust Policy # 98931

Please read carefully the following description of your Unum Term Life/AD&D insurance plan.

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<u>Your Plan</u>					
Eligibility	All Full-Time Classified and Management employees working each week in active employment in the U.S. with the employee spouses and children (up to age 26).	F			
Coverage Amounts	Your Term Life/AD&D coverage options are:				
	Employee: Up to 5 times salary in increments of \$10,000. Not to exceed \$300,000.				
	Spouse: Up to 100% of employee amount in increments on <i>exceed \$150,000</i> . Benefits will be paid to the employee.	f \$5,000. Not to			
	Child: Flat \$5,000 Note: The maximum death benefit for a child betw birth and 6 months is \$1,000. Benefits will be pa				
	In order to purchase Life coverage for your spou must purchase Life coverage for yourself.	se and/or child, you			
	**NOTE: LIFE and AD&D coverage amounts must match an	nd be elected together.			
	 AD&D Benefit Schedule: The full benefit amount is paid for Life Both hands or both feet or sight of both eyes One hand and one foot One hand and the sight of one eye One foot and the sight of one eye Speech and hearing Other losses may be covered as well. Please see your Plan Additional processing of the set of				
	Coverage amount(s) will reduce according to the following schedule:				
	Age:Insurance Amount Re7065% of original amou7550% of original amou	int			
	Coverage may not be increased after a reduction.				
Guarantee Issue	Current Employees: If you and your eligible dependents en 07/01/2012, you may apply for any amount of Life insurance \$200,000 for yourself and any amount of coverage up to \$25, spouse. Any Life insurance coverage over the Guarantee Issu subject to evidence of insurability. If you and your eligible d enroll on or before 07/01/2012, you can apply for coverage or enrollment period and will be required to furnish evidence of entire amount of Life insurance coverage. AD&D coverage d	coverage up to 000 for your a amount(s) will be ependents do not nly during an annual insurability for the			

evidence of insurability.

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	If you and your eligible dependents enroll on or before 07/01/2012, and later wish to increase your Life insurance coverage, you may increase your coverage with evidence of insurability at anytime during the year. However, you may wait until the next annual enrollment and only coverage over the Guarantee Issue amount(s) will be subject to evidence of insurability.				
	Employees hired on or after 07/01/2012: If you and your eligible dependents enroll within 31 days of your eligibility date, you may apply for any amount of Life insurance coverage up to \$200,000 for yourself and any amount of coverage up to \$25,000 for your spouse. Any Life insurance coverage over the Guarantee Issue amount(s) will be subject to evidence of insurability. If you and your eligible dependents do not enroll within 31 days of your eligibility date, you can apply for coverage only during an annual enrollment period and will be required to furnish evidence of insurability for the entire amount of coverage. AD&D coverage does not require evidence of insurability.				
	If you and your eligible dependents enroll within 31 days of your eligibility date, and later, wish to increase your coverage, you may increase your Life insurance coverage, with evidence of insurability, at anytime during the year. However, you may wait until the next annual enrollment and only Life insurance coverage over the Guarantee Issue amount(s) will be subject to evidence of insurability.				
	Please see your Plan Administra	ator for your eligibilit	ty date.		
Term Life/AD&D Combined Coverage Rates	Rates shown are your Tenthly deduction:				
Age Band		Employee per \$1,000	Spouse per \$1,000	Child per \$1,000	
- 24 25-29		\$0.048 \$0.048	\$0.048 \$0.048	\$.06	
30-34		\$0.084	\$0.084	NOTE: The	
35-39		\$0.096	\$0.096	premium	
40-44		\$0.168	\$0.168	paid for child	
45-49 50-54		\$0.276 \$0.504	\$0.276 \$0.504	coverage is	
55-59		\$0.996	\$0.304 \$0.996	based on the cost of	
60-64		\$0.990 \$1.344	\$0.990 \$1.344	coverage for	
65-69		\$2.376	\$2.376	one child,	
70-74		\$3.816	\$3.816	regardless of	
75+		\$5.544	\$5.544	how many children you have.	
	NOTE: Your rate will increase a	as you age and move	to the next age	band.	
Insurance Age	Your rate is based on your insura your year of birth from the year	ance age. To calculate	e your insurance		

Spouse rate is based on employee's insurance age.

To calculate your cost, complete the following by selecting your coverage amount and rate (based on your insurance age).
Term Life/AD&D Calculation
Tenthly

Term Life/AD&D Calculation		by selecting yo	ur coverage amount a	and fate (base	u on .	Tenthly
Worksheet	Coverage A	Mount	Increment	Rate		Cost
	Employee	\$	- ÷\$ 1,000 x	\$	=	\$
	Spouse	\$	÷ \$ 1,000 x	\$	=	\$
	Children	\$	÷ \$ 1,000 x	\$	=	\$
		То	tal Monthly Cost	=		\$
Additional Benefits						
Life Planning Financial & Legal Resources	This personalized financial counseling service provides expert, objective financial counseling to survivors and terminally ill employees at no cost to you. This service is also extended to you upon the death or terminal illness of your covered spouse. The financial consultants are master level consultants. They will help develop strategies needed to protect resources, preserve current lifestyles, and build future security. At no time will the consultants offer or sell any product or service.					
Portability/Conversion	If you retire, reduce your hours or leave your employer, you can take this coverage with you according to the terms outlined in the contract. However, if you have a medical condition which has a material effect on life expectancy, you will be ineligible to port your coverage. You may also have the option to convert your Term life coverage to an individual life insurance policy.					
Accelerated Benefit	If you become terminally ill and are not expected to live beyond a certain time period as stated in your certificate booklet, you may request up to 80% of your life insurance amount up to \$500,000, without fees or present value adjustments. A doctor must certify your condition in order to qualify for this benefit. Upon your death, the remaining benefit will be paid to your designated beneficiary(ies). This feature also applies to your covered dependents.					
Retained Asset Account	This interes	t bearing acco		shed in the b	enefi	ined Asset Account. ciary's name. He or more, as needed.
Additional AD&D Benefits	accident, an must be a fu York.) Seat Belt/A accident and	additional be ill-time stude ir Bag Benef d are wearing	nt beyond grade 12 it: If you or your in	r dependent . (Not availansured depen l seat belt ar	child ible in ndent nd/or	l(ren). Your child(ren) n Illinois or New (s) die in a car are in a seat with an
<u>Limitations/Exclusions/</u> <u>Termination of Coverage</u>						
Suicide Exclusion			paid for deaths caus ve date of coverage		le in 1	the first twenty-four
			al benefits will be p ths after the day suc			caused by suicide Iditional insurance is

occurring within 24 months after the day such increased or additional insurance is
effective.AD&D Benefit ExclusionsAD&D benefits will not be paid for losses caused by, contributed to by, or resulting

from:

- Disease of the body or diagnostic, medical or surgical treatment or mental disorder as set forth in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders;
- Suicide, self-destruction while sane, intentionally self-inflicted injury while sane, or self-inflicted injury while insane;
- War, declared or undeclared, or any act of war;
- Active participation in a riot;
- Attempt to commit or commission of a crime;
- The voluntary use of any prescription or non-prescription drug, poison, fume, or other chemical substance unless used according to the prescription or direction of your or your dependent's doctor. This exclusion does not apply to you or your dependent if the chemical substance is ethanol;
- Intoxication. ("Intoxicated" means that the individual's blood alcohol level equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the accident occurred.)

Termination of Coverage Your coverage and your dependents' coverage under the Summary of Benefits ends on the earliest of:

- The date the policy or plan is cancelled;
- The date you no longer are in an eligible group;
- The date your eligible group is no longer covered;
- The last day of the period for which you made any required contributions;
- The last day you are in active employment unless continued due to a covered layoff or leave of absence or due to an injury or sickness, as described in the certificate of coverage;
- For dependent's coverage, the date of your death.

In addition, coverage for any one dependent will end on the earliest of:

- The date your coverage under a plan ends;
- The date your dependent ceases to be an eligible dependent;
- For a spouse, the date of divorce or annulment.

Unum will provide coverage for a payable claim which occurs while you and your dependents are covered under the policy or plan.

Next Steps

How to Apply

Current employees: To apply for coverage, complete your enrollment form by 07/01/2012.

For employees hired on or after 07/01/2012: To apply for coverage, complete your enrollment form within 31 days of your eligibility date.

All employees: If you apply for coverage after your effective date, or if you choose coverage over the guarantee issue amount, you will need to complete a medical questionnaire which you can get from your Plan Administrator. You may

	also be required to take certain medical tests at Unum's expense.	
Effective Date of Coverage	Your coverage will become effective on 07/01/2012. For employees who become eligible after this date, please see your Plan Administrator for your effective date.	
Delayed Effective Date of Coverage	<u>bloyee</u> : Insurance coverage will be delayed if you are not in active employment use of an injury, sickness, temporary layoff, or leave of absence on the date insurance would otherwise become effective.	
	<u>Dependent</u> : Insurance coverage will be delayed if that dependent is totally disabled on the date that insurance would otherwise be effective. Exception: infants are insured from live birth.	
	"Totally disabled" means that, as a result of an injury, a sickness or a disorder, your dependent is confined in a hospital or similar institution; is unable to perform two or more activities of daily living (ADLs) because of a physical or mental incapacity resulting from an injury or a sickness; is cognitively impaired; or has a life threatening condition.	
Changes to Coverage	Each year you and your spouse will be given the opportunity to change your Life/AD&D coverage. You and your spouse may purchase additional Life coverage up to the Guarantee Issue amounts without evidence of insurability if you are already enrolled in the plan. Life coverage over the Guarantee Issue amounts will be medically underwritten and will require evidence of insurability and approval by Unum's Medical Underwriters. The suicide exclusion will apply to any increase in coverage. AD&D coverage does not require evidence of insurability for increase amounts.	
Questions	If you should have any questions about your coverage or how to enroll, please contact your Plan Administrator.	

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Some provisions may vary or not be available in all states. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern. For complete details of coverage, please refer to policy form number C.FP-1, et al.

Life Planning is provided by Ceridian Incorporated. The services are subject to availability and may be withdrawn by Unum without prior notice.

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