



**Group Life
and Accidental Death and
Dismemberment
Benefits Summary**



Effective January 1, 2007

Group Life Benefit Summary

Employee Basic Life, effective 1/1/2007

Eligibility	Class 1: All Active Full Time Permanent Faculty or Staff members Class 2: Retirees participating in the University Retirement Rehiring Program
Minimum Hourly Requirement	Class 1: 32 hours per week and at least 9 months of the year Class 2: 32 hours per week and one semester per year
Waiting Period	Class 1: New Employees: First of the month following date of hire, or, immediately if hired on the first day of the month. Current Employees: Same as for new employees (Note: Service credit given for service completed under prior carrier)
Basic Annual Earnings Definition	Salary Only, excluding commissions, bonuses, overtime
Schedule of Benefits	Lesser of: 2 x Annual Earnings or \$700,000, rounded to the next higher \$1,000. Minimum benefit of \$5,000
Reduction Schedule	The amount of Life Insurance Benefit will be reduced by the following percentages at the following ages: Age 65 - 69: 67% Age 70 - 74: 45% Age 75 - 79: 30% Age 80+: 20% *Minimum of \$5,000 for Full-Time Employees
Non-Medical Maximum	\$700,000 (Basic only)
Evidence of Insurability	None for Basic Life
Conversion	Yes
Waiver of Premium	Yes Disabled Prior to Age: 60 Elimination Period: 9 months Waiver Termination Age: 65
Accelerated Death Benefit	50% of Basic to \$350,000 Max
Continuation of Coverage	Layoff: 12 months Paid Leave of Absence: Yes Family Medical Leave: Union - 12 weeks plus optional additional 6 months Family Medical Leave: Non-Union - 12 weeks plus accumulated sick bank
Basic Policy Maximum	\$700,000
Employee Contributions	100% Employer Paid

NOTE: The above information provides highlights of your plan. The master contract provides additional details about this information as well as other plan features. If the terms of this plan highlight summary and the master document differ, the master document will govern.

Employee Basic Accidental Death & Dismemberment, effective 1/1/2007

Eligibility	Class 1: All Active Full Time Permanent Faculty or Staff members																														
Waiting Period	Date of Eligibility																														
Basic Annual Earnings Definition	Salary Only, excluding commissions, bonuses, overtime																														
Schedule of Benefits	Class 1: 2 x Basic Annual Earnings, adjusted to the next higher \$1,000. Maximum Benefit of \$1,200,000. Minimum Benefit is \$10,000.																														
Basic AD&D Policy Maximum	Class 1: \$1,200,000																														
Reduction Schedule	Same as Basic Life*																														
Seat Belt Benefit	Additional 10% of AD&D to maximum of \$10,000																														
Air Bag Benefit	Additional 10% of AD&D to maximum of \$10,000																														
Child Education Benefit	Annual Benefit /Child: \$2,500 Lifetime Family Benefit: \$20,000																														
Spouse Training	\$2,500 Maximum																														
Repatriation	\$2,000 Maximum																														
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Dismemberment Schedule	<table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Loss</u></th> <th style="text-align: left;"><u>Amount</u></th> </tr> </thead> <tbody> <tr><td>Life</td><td>Full Amount</td></tr> <tr><td>Both Hands or Both Feet</td><td>Full Amount</td></tr> <tr><td>Sight of Both Eyes</td><td>Full Amount</td></tr> <tr><td>One Hand & One Foot</td><td>Full Amount</td></tr> <tr><td>One Hand & Sight of One Eye</td><td>Full Amount</td></tr> <tr><td>One Foot & Sight of One Eye</td><td>Full Amount</td></tr> <tr><td>Speech & Hearing in Both Ears</td><td>Full Amount</td></tr> <tr><td>Quadriplegia</td><td>Full Amount</td></tr> <tr><td>Paraplegia</td><td>One Half Full Amount</td></tr> <tr><td>Hemiplegia</td><td>One Half Full Amount</td></tr> <tr><td>One Hand or One Foot</td><td>One Half Full Amount</td></tr> <tr><td>Sight of One Eye</td><td>One Half Full Amount</td></tr> <tr><td>Speech or Hearing in Both Ears</td><td>One Half Full Amount</td></tr> <tr><td>Thumb & Index Finger Same Hand</td><td>One Quarter Full Amount</td></tr> </tbody> </table>	<u>Loss</u>	<u>Amount</u>	Life	Full Amount	Both Hands or Both Feet	Full Amount	Sight of Both Eyes	Full Amount	One Hand & One Foot	Full Amount	One Hand & Sight of One Eye	Full Amount	One Foot & Sight of One Eye	Full Amount	Speech & Hearing in Both Ears	Full Amount	Quadriplegia	Full Amount	Paraplegia	One Half Full Amount	Hemiplegia	One Half Full Amount	One Hand or One Foot	One Half Full Amount	Sight of One Eye	One Half Full Amount	Speech or Hearing in Both Ears	One Half Full Amount	Thumb & Index Finger Same Hand	One Quarter Full Amount
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