

Life insurance

For all eligible employees of Hoosier School Benefit Trust – MSD of Decatur policy # 100-3733-02

Protect the life you love by securing it for the people most important to you.

Available coverage amounts

- Choose the benefit amounts that best meet your needs and your budget:

For you	For your spouse	For your child(ren)
You can elect \$10,000 to \$500,000—in \$1,000 increments not to exceed 5 times your basic annual earnings—with no medical questions asked up to \$200,000. ¹	If you elect coverage for yourself, you can sign up for a \$5,000, \$10,000, or \$20,000 benefit amount or an amount equal to 50% of the Employee Life Insurance—with no medical questions asked up to \$30,000. ¹	If you elect coverage for yourself, you can sign up for a \$2,500, \$5,000 or \$10,000 benefit amount or an amount equal to 10% of the Employee Life Insurance.
Benefits are reduced by 45% at age 70, by 30% at age 75, by 20% at age 80, by 15% at age 85, by 10% at age 90. Coverage is discontinued at termination of employment or retirement.		A full benefit is payable for a dependent child who is 6 months to 19 years old or to 25 years old if a full-time student. A reduced benefit is payable for a child from birth to 6 months.

- The cost for Sun Life's Life insurance depends on the benefit amount you choose and your age.

More about Sun Life's Life insurance

Take comfort in knowing that Life insurance can provide the people you love with financial support when you can't be there—and they need it most.

- Consider Life insurance if your income is needed to cover household or day-to-day expenses, or if you share responsibility for a significant debt with someone else.
- Enroll when you are first eligible, and you do not have to provide proof of good health.¹
- Adjust your coverage as your needs change (e.g., you get married or have a baby), since you are covered for a year at a time.¹
- Apply to take your coverage with you if you retire or change employers.²
- Apply to receive a portion of your death benefit to help cover medical and living expenses if you become terminally ill.
- Get medical, dental, or legal assistance if an emergency occurs when you or a family member are traveling 100 or more miles from home, with Emergency Travel Assistance.³
- Access 24-hour surveillance of up to 10 credit or debit cards and get help from anti-fraud experts if your personal data is compromised, with Identity Theft Protection.³

How Sun Life's Life insurance can help

Life insurance may provide additional financial support by:

- covering household expenses,
- relieving debt (e.g., mortgage or student loans) you might leave behind,
- allowing your family members to hire someone if they need help when you are gone,
- leaving an inheritance for your loved ones or even for an organization you are passionate about, and
- assisting your family with the cost of your funeral or medical bills.

Limitations and exclusions

If the employee's cause of death is suicide:*

- No amount of Life or Dependent Life insurance is payable if the suicide occurs within 24 months after the employee's insurance is effective.
- No increased or additional amount of Life insurance is payable if the suicide occurs within 24 months after the increased or additional amount of Life insurance is effective.

*Subject to state law variations.

1. If the amount you apply for exceeds the Guaranteed Issue amount or if you decline coverage during your initial eligibility period and want to elect coverage or increase coverage at a later date, you are required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life prior to coverage taking effect.
2. Subject to policy terms, conversion is available when coverage terminates or reduces or when an employee retires, and portability is available when employment terminates. Coverage is subject to state variations. If portability is not available in your state, continuation may be available. Refer to your Certificate for specific conditions.
3. Value-added services are offered only on specific lines of coverage and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. Emergency Travel Assistance is provided by Assist America[®]. Identity Theft Protection is provided by SecurAssist[®], an Assist America program. Sun Life is not responsible or liable for care, services, or advice given by any provider or vendor of the Services. Sun Life reserves the right to discontinue any of the Services at any time.

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, 07P-LH-PT/07C-LH-PT, 01P-ADD-PT/01C-ADD-PT, 12-GP-01, 13-ADD-C-01, 12-GPPort-P-01, and 13-ADDPort-C-01. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Windsor, CT) under Policy Form Series 13-GP-LF-01, 13-LF-C-01, 13-GP-LH-01, 13-ADD-C-01, 13-LTD-C-01, 12-GPPort-01, 13-LFPort-C-01, and 13-ADDPort-C-01. Product offerings may not be available in all states and may vary depending on state laws and regulations.

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Rate Sheet for MSD of Decatur

Coverage and monthly rates for Voluntary Life Insurance.

Find your age bracket (as of the effective date of coverage) to determine the associated rate. Follow the example below to determine your pay period cost. *These are the rates in effect for January 1, 2017.

Employee	
Age	Monthly rate per \$1,000 of coverage
Under 25	\$0.04
25 – 29	\$0.04
30 – 34	\$0.05
35 – 39	\$0.07
40 – 44	\$0.10
45 – 49	\$0.15
50 – 54	\$0.23
55 – 59	\$0.43
60 – 64	\$0.66
65 – 69	\$1.27
70 +	\$2.06

Spouse	
Age	Monthly rate per \$1,000 of coverage
Under 25	\$0.04
25 – 29	\$0.04
30 – 34	\$0.05
35 – 39	\$0.06
40 – 44	\$0.09
45 – 49	\$0.14
50 – 54	\$0.26
55 – 59	\$0.50
60 – 64	\$0.60
65 – 69	\$0.98

Family	
Monthly rate per Unit of coverage	
Plan 1	\$1.99
Plan 2	\$3.98
Plan 3	\$7.97

Child(ren)
Monthly Cost per \$1,000 of coverage
\$0.01

Cost to You: You are responsible for paying the cost of Voluntary Life coverage through payroll deduction. Calculate your cost by dividing your amount of optional life insurance by 1,000 and multiplying the result by the appropriate rate above.

Example Amount of Insurance	Divided by 1,000	Multiplied by Rate	Example Cost*
\$20,000	/ 1,000 = 20	x \$0.05	\$1.00

Your Volume of Insurance	Divided by 1,000	Multiplied by Rate	Your Monthly Cost*
\$	/ 1,000 =	x \$	\$

Your Monthly Cost	# of Months	Annual Cost	# Pay Period Per Year	Your Estimated Cost Per Pay Period
\$	X 12	= \$	/	= \$

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