

**Huston-Tillotson University
Voluntary Term Life Proposal
Schedule of Benefits Summary**

Eligibility	All active, full-time U.S. Employees of the Employer regularly working a minimum of 30 hours per week.
Voluntary Life Benefit	Units of \$10,000 to \$500,000
Covered Earnings Definition	Employee's annual wages or salary, excluding extra compensation, bonus, commission, and overtime.
Eligibility Waiting Period	No waiting period
Guaranteed Issue Amount	\$100,000
Minimum Benefit	No minimum benefit

Benefit Reduction Schedule Benefits Reduce to:	65% @ age 70, 50% @ age 75
Waiver of Premium with Extended Death Benefit	Must be totally disabled before age 60 9 month waiting period Benefit provided to age 65 Eligibility for Waiver of Premium continues if the group policy is terminated Extended Death Benefit coverage during elimination period, no premiums required during this time
Continuation for Disability (Age 60+)	Life coverage continued for a disabled employee over the age of 60 on a continuing premium paying basis for up to 12 months
Continuation of Insurance	Family Medical Leave (12 weeks) Family Military Convalescence Support (12 weeks)
Portability	Employee and covered dependents Coverage ends at age 70 Inforce amounts do not require medical underwriting. Increases in coverage are allowed up to plan max with medical underwriting
Terminal Illness	The lesser of 50% up to 50,000 for Voluntary benefits Coverage available for employees and spouses
Participation Requirement	20% of eligible employees Voluntary coverage will not take effect if enrollment is less than 20% of eligible employees
Initial Enrollment Events	Initial Open Enrollment: Evidence of Insurability is required for amounts in excess of the Guaranteed Issue for all eligible employees as outlined below GI: \$100,000
Ongoing Enrollment Events	Re-Solicitation: Any new requested coverage amounts for all participating employees are subject to Evidence of Insurability
Suicide Exclusion	We do not pay death benefits if insured commits suicide during first two years of coverage This two year suicide exclusion also applies to all later increases in coverage
Employee Contribution	100%
Number of Eligible Employees	137
Beneficiary Services	- Comprehensive package of financial, bereavement and legal counseling - Available for benefit payments >= \$5,000
Enrollment Communications & Support	- Client-specific brochures & applications

Beneficiary Designation	Recognize Prior Beneficiary Designations or Pay According to Succession Schedule (if no beneficiary has been designated)
Spouse Eligibility	Employees must participate in voluntary plan for dependents to participate
Domestic Partners	Excluded
Spouse Life Benefit	Units of \$5,000 to \$250,000 Coverage ends at age 70
Infant/Child Life Benefit	birth to 6 months: \$500 6 months to 19 years: Units of \$5,000 to \$10,000 26 years (if full time student)
Dependent Guaranteed Issue Amount	Spouse: \$25,000 Child: All Guaranteed Issue