

Voluntary Group Accidental Death & Dismemberment Insurance

Virginia Commonwealth University Health System Authority



Eligibility

All Active Regular Full-Time and Part-Time Physicians and Certified Registered Nurse Anesthetists within Virginia Commonwealth University Health System Authority, working at least 20 hours or more per week, except for any person working on a temporary, Pro Re Nata (PRN), Temporary Twelve Week Worker, seasonal or team member included in another class.

- ▶ **Dependents:** You must be insured for your Dependents to be covered.

Dependents are:

- Your legal spouse who is not legally separated or divorced from you;
- Your legally-recognized domestic or civil union partner;
- Your unmarried financially dependent children birth to 26 years;
- A person may not have coverage as both an Team Member and Dependent;
- Only one insured spouse may cover dependent children.

Benefit Amount

- ▶ **Team Member:** Choose from a minimum of \$50,000 to a maximum of \$700,000 in \$50,000 increments. Or lesser of 5x BAE.
- ▶ **Spouse:** Choose from a minimum of \$1,000, a maximum of \$100,000 in \$1,000 increments, not to exceed 50% of team member amount.
- ▶ **Child(ren):** Birth but less than 6 months: \$1,000
6 months through age 26: A choice of \$10,000 or \$15,000.

Contribution Requirements

Coverage is 100% Team Member Paid.

Rates

See attached Rate Sheet.

Features

- Common Carrier Benefit
- COMA Benefit
- Day Care Benefit
- Education Benefit
- Exposure and Disappearance

AD&D Schedule

For Accidental Loss of	Amount Payable
Life	100%
Two or More Members*	100%
Speech and Hearing	100%
One Member*	50%
Speech or Hearing	50%
Thumb and Index Finger of Same Hand	25%

*"Member" refers to a hand, foot or eye

Benefit Reduction Due to Age

(Applicable to team member / spouse coverage)

Age	Original Benefit Reduced to
70	65%
75	50%

This Plan Highlight is not a complete description of the insurance coverage. Insurance is provided under group policy form LRS-8604, et al, et al. This is not a binding contract. Should there be a difference between this Plan Highlight and the contract, the contract will govern. The Certificate of Coverage will be made available to you that describes the benefits in greater detail; however a benefit will not be paid if caused or contributed by an exclusion listed in the Certificate. Product features and availability may vary by state.

Coverage is underwritten by Reliance Standard Life Insurance Company, which is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. In New York, insurance products and services are offered by First Reliance Standard Life Insurance Company, Home Office, New York, NY. Where applicable, absence services are provided by Matrix Absence Management, Inc.

Reliance Standard Plans Voluntary AD&D Insurance Premium Table

Team Member Monthly

Benefit Amount	Team Member	Benefit Amount	Team Member
\$50,000	\$0.85	\$400,000	\$6.80
\$100,000	\$1.70	\$450,000	\$7.65
\$150,000	\$2.55	\$500,000	\$8.50
\$200,000	\$3.40	\$550,000	\$9.35
\$250,000	\$4.25	\$600,000	\$10.20
\$300,000	\$5.10	\$650,000	\$11.05
\$350,000	\$5.95	\$700,000	\$11.90

Child(ren) Monthly Premiums

Benefit Amount	Premium
\$10,000	\$0.17
\$15,000	\$0.26
(One rate and benefit amount for all eligible children in family, regardless of number.)	

Spouse Monthly Premiums

Benefit Amount	Spouse	Benefit Amount	Spouse	Benefit Amount	Spouse	Benefit Amount	Spouse	Benefit Amount	Spouse
\$1,000	\$0.02	\$21,000	\$0.36	\$41,000	\$0.70	\$61,000	\$1.04	\$81,000	\$1.38
\$2,000	\$0.03	\$22,000	\$0.37	\$42,000	\$0.71	\$62,000	\$1.05	\$82,000	\$1.39
\$3,000	\$0.05	\$23,000	\$0.39	\$43,000	\$0.73	\$63,000	\$1.07	\$83,000	\$1.41
\$4,000	\$0.07	\$24,000	\$0.41	\$44,000	\$0.75	\$64,000	\$1.09	\$84,000	\$1.43
\$5,000	\$0.09	\$25,000	\$0.43	\$45,000	\$0.77	\$65,000	\$1.11	\$85,000	\$1.45
\$6,000	\$0.10	\$26,000	\$0.44	\$46,000	\$0.78	\$66,000	\$1.12	\$86,000	\$1.46
\$7,000	\$0.12	\$27,000	\$0.46	\$47,000	\$0.80	\$67,000	\$1.14	\$87,000	\$1.48
\$8,000	\$0.14	\$28,000	\$0.48	\$48,000	\$0.82	\$68,000	\$1.16	\$88,000	\$1.50
\$9,000	\$0.15	\$29,000	\$0.49	\$49,000	\$0.83	\$69,000	\$1.17	\$89,000	\$1.51
\$10,000	\$0.17	\$30,000	\$0.51	\$50,000	\$0.85	\$70,000	\$1.19	\$90,000	\$1.53
\$11,000	\$0.19	\$31,000	\$0.53	\$51,000	\$0.87	\$71,000	\$1.21	\$91,000	\$1.55
\$12,000	\$0.20	\$32,000	\$0.54	\$52,000	\$0.88	\$72,000	\$1.22	\$92,000	\$1.56
\$13,000	\$0.22	\$33,000	\$0.56	\$53,000	\$0.90	\$73,000	\$1.24	\$93,000	\$1.58
\$14,000	\$0.24	\$34,000	\$0.58	\$54,000	\$0.92	\$74,000	\$1.26	\$94,000	\$1.60
\$15,000	\$0.26	\$35,000	\$0.60	\$55,000	\$0.94	\$75,000	\$1.28	\$95,000	\$1.62
\$16,000	\$0.27	\$36,000	\$0.61	\$56,000	\$0.95	\$76,000	\$1.29	\$96,000	\$1.63
\$17,000	\$0.29	\$37,000	\$0.63	\$57,000	\$0.97	\$77,000	\$1.31	\$97,000	\$1.65
\$18,000	\$0.31	\$38,000	\$0.65	\$58,000	\$0.99	\$78,000	\$1.33	\$98,000	\$1.67
\$19,000	\$0.32	\$39,000	\$0.66	\$59,000	\$1.00	\$79,000	\$1.34	\$99,000	\$1.68
\$20,000	\$0.34	\$40,000	\$0.68	\$60,000	\$1.02	\$80,000	\$1.36	\$100,000	\$1.70

Rates are subject to change.