

Nebraska State College System

Basic Life and AD&D, Supplemental Life and AD&D and Dependent Life Insurance FAQs

All Full-Time Employees



Nebraska State
College System

CHADRON | PERU | WAYNE

<p>How much coverage is available?</p>	<p>Basic Life and AD&D Insurance (Employer-provided): Your employer is providing you with Life and Accidental Death & Dismemberment (AD&D) coverage in the amount of \$30,000. The Life insurance benefit is the amount payable to your beneficiary in the event of your death. The AD&D benefit pays a benefit to you or your beneficiary in the event of the loss of your life, hands, feet or eyesight as a result of an accident.</p> <p>Supplemental Employee Life and AD&D Insurance: Your employer provides you with the option to purchase additional Supplemental Life and AD&D coverage in the amount of \$10,000, \$20,000, \$50,000, \$100,000, or \$180,000.</p> <p>Dependent Life Insurance: You may elect Dependent Life Insurance. There are two Dependent Life options:</p> <ul style="list-style-type: none"> • \$2,000 Spouse, \$2,000 Child(ren) age 6 months to age 26, \$400 Child(ren) age 14 days to 6 months. • \$10,000 Spouse, \$5,000 Child(ren) age 6 months to age 26, \$400 Child(ren) age 14 days to 6 months.
<p>Am I eligible for this coverage?</p>	<p>You are eligible to enroll in this plan if you are an active employee working at least 30 hours per week.</p>
<p>Are there any medical questions or tests needed to qualify for the plan?</p>	<p>Employee Supplemental Life and AD&D: You can choose up to \$180,000 without medical questions.</p> <p>Dependent Life: You can elect either option without medical questions.</p> <p>Late enrollees and increases: Enrollees electing coverage after 31 days beyond their eligibility date and those requesting an increase in coverage will require medical questions and approval by the insurance carrier.</p>
<p>What if I become disabled?</p>	<p>If you become Disabled prior to the age of 60 and remain Disabled for 9 months, your Employee Life insurance will remain in force without payment of premium until you reach the age of 65 or until you are no longer Disabled, whichever occurs first, subject to insurance carrier approval.</p>
<p>What if I am diagnosed with a terminal illness?</p>	<p>This plan has a feature called a Living Benefit that allows you to receive a portion of your Life Insurance benefit while you are living if you were diagnosed with a covered terminal illness. Funds can be used for medical expenses, or fulfill any other desired purpose. Minimum and maximum amounts apply.</p>
<p>Will coverage reduce?</p>	<p>Employee Age: Your Employee Basic Life and AD&D and Employee Supplemental Life and AD&D reduces to 50% at age 70 and terminates upon your retirement.</p> <p>Dependent Age: Spouse coverage will terminate upon the Insured Employee's retirement or when the Employee's coverage terminates. Child coverage will terminate when your child turns age 26, when the child becomes married, or when the Employee's coverage terminates, whichever occurs first.</p>

<p>Are there any limitations or exclusions?</p>	<p>Armed Forces: The coverage will end if the covered person enters the armed forces of any country, on a full-time basis.</p> <p>Suicide Exclusion: No Employee Supplemental or Dependent Life Insurance benefit will be payable for a death occurring within 2 years of an Insured Person's effective date of coverage under the Group Policy, if such death was caused by suicide, attempted suicide, or any other intentionally self-inflicted Injury or Physical Disease, while sane or insane. This Suicide Exclusion shall reapply to increases of insurance as of the effective date of the increase.</p> <p>AD&D Insurance Exclusions: No AD&D benefit is payable if the loss is caused or contributed to by any of the following:</p> <ol style="list-style-type: none"> 1. War or Act of War. War means a state or period of declared or undeclared war whether civil or international, or any substantial armed conflict with organized forces of a military nature between nations, states or parties; 2. Suicide, attempted suicide or other intentionally self-inflicted Injury, while sane or insane; 3. Committing or attempting to commit a felony or assault, or actively participating in a violent disorder or riot. Actively participating does not include being at the scene of a violent disorder or riot while performing Your official duties; 4. Any Injury sustained while under the voluntary use or consumption of any poison, illegal drugs, or controlled substance, unless used or consumed according to the directions of a Physician; 5. Physical Disease existing at the time of the Accident; 6. Medical negligence and malpractice; 7. Bacterial infections (except due to accidental food poisoning or caused by an accidental wound); 8. Any Loss incurred while operating, riding in or descending from any aircraft, except as a fare-paying passenger on a commercial aircraft.
<p>When coverage ends.</p>	<p>Conversion: This coverage contains a Conversion feature, which means that if your employment ends, you can choose to convert your group plan to an individual whole life plan. Restrictions apply, premiums and fees may be higher and you must apply within 31 days from when your coverage ends.</p> <p>Portability: This coverage contains a Portability feature, which means that if your employment ends, you can choose to take the Employee Supplemental Life and AD&D coverage with you. Restrictions apply, premiums and fees may be higher and you must apply while coverage is in force.</p>
<p>Who do I contact with questions?</p>	<p>Questions may be directed to the Human Resources Office.</p>

Administered by:

NATIONAL INSURANCE SERVICES

Corporate Headquarters
 250 South Executive Drive, Suite 300
 Brookfield, WI 53005
Offices Nationwide
 800.627.3660

Underwritten by:

 **Madison National Life Insurance Company**
 A Member of The IHC Group

PO Box 5008, Madison, WI 53705

This is a brief description of life insurance. For complete details including all benefits, exclusions and limitations, refer to Certificate form number GTL-C600-0608M-NE as issued to your employer.

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