

# Group Term Life Insurance

Explore Your Benefits & Costs



Group Name: City of Grand Junction

Group Number: 695718

Class: All Employees working 20 hours or more per week

**You're committed to caring for your loved ones.** If the future doesn't go the way you planned, **Group Term Life Insurance can help.** After a death, it provides a benefit payment to your beneficiary(ies) that can be used for funeral expenses, co-signed loan debt, future education, or whatever they choose.

This document includes expanded information about Group Term Life Insurance, such as how much it will cost, details about what's covered and what's excluded, and more. As you explore, keep in mind:



No medical questions or tests are required for basic coverage\*



Accidental Death & Dismemberment coverage is also included



Keep your coverage even if you leave your employer

It's difficult to think about loss, but important to be prepared for the unexpected. The Group Term Life Insurance available through your employer is a simple way to stay covered in the coming year.

\*If you choose coverage beyond the basic amount, you may need to answer questions about current and past health conditions and receive approval from the insurer. Learn more in the "Guaranteed Issue/Evidence of Insurability" section that follows.

ReliaStar Life Insurance Company  
a member of the Voya® family of companies




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## Get basic coverage at no cost

Your employer is providing basic Group Term Life Insurance to you at no cost to you. This pays a benefit to your beneficiary if you pass away during a specific period of time ("term") and if your coverage is active. Your coverage also includes Accidental Death & Dismemberment Insurance, which provides a benefit separate from the life insurance benefit, if you pass away or are severely injured as the result of a covered accident.

The basic coverage being offered to Regular Full-Time Employees is:

	Coverage Amount
 <b>All Regular Full-Time Employees</b>	1 times Basic Yearly Earnings, not to exceed \$150,000. Coverage amounts are rounded to the next highest \$1,000.
 <b>Your spouse*</b>	\$5,000. The cost is shared evenly between you and your employer for this insurance should you choose to elect it.
 <b>Your child(ren)*</b>	\$2,000. The cost is shared evenly between you and your employer for this insurance should you choose to elect it.



## Add supplemental coverage based on your needs


All Regular Full-Time and Part-Time employees have the opportunity to elect additional coverage called Supplemental Life Insurance. You may also add supplemental Accidental Death & Dismemberment Insurance, which provides the insured person or their beneficiary a payment separate from the life insurance benefit if the insured person dies or is severely injured in a covered accident.

When you enroll, you'll have the opportunity to choose up to the following amount(s):



Not sure how much you need? Try the Life Insurance Calculator at [go.voya.com/lifecalc](http://go.voya.com/lifecalc) to learn more.

	Coverage Amount	Guaranteed Issue Limit
 <b>All Regular Full-Time and Part-Time Employees</b>	\$10,000 to \$500,000 in \$10,000 increments not to exceed 5 times your annual salary.	\$180,000
 <b>Your spouse*</b>	\$10,000 to \$500,000 in \$5,000 increments not to exceed 100% of your approved employee Supplemental Life Insurance amount.	\$30,000

 <b>Your child(ren)*</b>	\$2,000 to \$10,000 in \$2,000 increments.	\$10,000
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"Spouse" also includes domestic partners or civil union partners as defined by the group policy. If your spouse is covered under the policy as an employee, then your spouse is not eligible for coverage under the spouse benefit. Children up to age 26.

## Guaranteed-Issue Limit and Evidence of Insurability




The guaranteed-issue limit is the amount that's available to new hires, or when newly eligible, without providing evidence of insurability (EOI). To get coverage beyond this limit or add/increase coverage after this enrollment period, you may need to complete an EOI form for all applicable family members. This form includes questions about current and past health conditions. The insurer may request additional information before approving or denying coverage.

Enrollment at a scheduled annual enrollment period for an increase to existing Supplemental Employee Life coverage, any increased amounts exceeding \$180,000 (new plus existing elections) or 2 plan increments, whichever is less, will require evidence of insurability.

When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.

## Accidental Death & Dismemberment Insurance

In addition, you may make a separate election for Accidental Death & Dismemberment Insurance. With this coverage, the insured person or their beneficiary will receive a benefit payment separate from their life insurance benefit payment if a covered accident leads to severe injuries or death.

Coverage Amount	
 <b>For you</b>	<p>Basis AD&amp;D for Regular Full-Time Employees: 1 times your annual salary plus an additional \$50,000 to a maximum of \$200,000. There is no cost to you for this insurance. Coverage amounts are rounded to the next highest \$1,000.</p> <p>Supplemental AD&amp;D for All Regular Full-Time and Part-Time Employees: \$10,000 to \$500,000 in \$10,000 increments.</p>
 <b>Your spouse</b>	<p>\$10,000 to \$500,000 in \$5,000 increments, so long as the spouse is also enrolled in Basic and/or Supplemental Life coverage.</p>
 <b>Your child(ren)</b>	<p>\$2,000 to \$10,000 in \$2,000 increments for children age birth to age 26, so long as the children are also enrolled in Basic and/or Supplemental Life coverage.</p>

## Age reductions

For you - Benefit amount(s) reduce to 65% of original coverage at age 65, to 50% of original coverage at age 70, and to 35% of original coverage at age 75.

For your spouse\* - Benefit amount(s) reduce to 65% of original coverage at spouse age 65, to 50% of original coverage at age 70, and to 35% of original coverage at age 75.

Premium amounts are also reduced accordingly, and automatically adjusted for the new benefit amount(s).

## How much does it cost?

The cost for Supplemental Life is calculated based on the age of the employee or spouse at the start of the plan's current policy year.

Rates shown are guaranteed until January 1, 2029.

### Employee Supplemental Life Insurance Rates

Age	Monthly Rate per \$1,000 of Coverage	
	Non-Tobacco User	Tobacco User
Under 25	\$0.062	\$0.092
25-29	\$0.062	\$0.092
30-34	\$0.080	\$0.120
35-39	\$0.104	\$0.176
40-44	\$0.150	\$0.265
45-49	\$0.241	\$0.422
50-54	\$0.370	\$0.713
55-59	\$0.606	\$1.008
60-64	\$0.977	\$1.521
65-69	\$1.725	\$2.558
70-74	\$3.114	\$4.498
75 +	\$6.257	\$8.074

### Spouse Supplemental Life Insurance Rates

Age	Monthly Rate per \$1,000 of Coverage
Under 25	\$0.048
25-29	\$0.048
30-34	\$0.066
35-39	\$0.100
40-44	\$0.146
45-49	\$0.228
50-54	\$0.352
55-59	\$0.538
60-64	\$0.908
65-69	\$1.534
70-74	\$2.728
75 +	\$5.552

### Supplemental Accidental Death and Dismemberment (AD&D) Insurance Rates

Coverage Type	Monthly Rate per \$1,000 of Coverage
Employee Supplemental AD&D	\$0.03
Spouse Supplemental AD&D	\$0.03
Children Supplemental AD&D	\$0.03

### Basic Spouse and Children Life Insurance Rates

#### Dep Unit / Monthly Cost

\$1.60

Monthly cost for all eligible children.

### Supplemental Children Life Insurance Rates

#### Monthly Rate per \$1,000 of Coverage

\$0.30

Monthly cost for all eligible children.



### To calculate your total monthly cost:

Employee

Spouse

Child(ren)

1. Enter the amount of coverage you'd like for you, your spouse, and your child(ren).
2. Divide each amount by 1,000.
3. Using the rate tables above, find the appropriate rate per \$1,000 of coverage for each person.
4. Multiply each answer from Step 2 by the appropriate rate.
5. Add your answers from Step 4 together to find your total monthly cost.

## What else is included?



**receive a  
portion of  
the benefit  
early**

### Accelerated Death Benefit

If you have a medical condition that requires permanent continuous confinement in an institution or are diagnosed with a terminal illness with a limited life expectancy, you may receive a portion of your death benefit while still living. Receipt of the accelerated benefit may be taxable, or may adversely affect your eligibility for Medicaid or other government benefits. You should consult your personal tax advisor to assess the impact of this benefit.



**continue  
coverage at  
no cost**

### Waiver of Premium benefit

If you aren't working because you are totally disabled, Waiver of Premium allows you to keep your Group Term Life Basic and Supplemental coverage for a period of time without paying premiums.



**keep  
coverage if  
employment  
ends**

### Continue or convert coverage

The portability provision allows for if your employment ends or you no longer meet your employer's eligibility criteria, you have the option to continue coverage by paying premiums directly to the insurance company. Or you may choose to convert coverage into an individual Whole Life Insurance policy. Coverage for your spouse or children is also available.

The following non-insurance services are also provided:

**Obtain** support when experiencing a loss.

### **Bereavement Support, including Funeral Planning & Will Preparation**

We work with Empathy to offer you Bereavement Support, including Funeral Planning & Will Preparation services. Combining technology and human care, Empathy helps families prepare for the future and navigate the emotional and practical challenges associated with loss.

From planning a funeral to the logistics of winding down an estate, Empathy offers an impactful solution to you and your family after the loss of a loved one. Empathy's bereavement support is also fully accessible to your loved ones, and various family members can share and join your account.

Bereavement Support, including Funeral Planning & Will Preparation services are provided by The Empathy Project, Inc., New York, NY.

Get resources for **counseling, legal support**, and much more.

### **Employee Assistance Program**

Sometimes life gives us a bit more than we can handle. Employee Assistance Program resources are available to support you and your family with counseling, legal support and financial guidance. These resources can help improve your emotional well-being, and address personal, family and life issues.

Employee Assistance Program services are provided by ComPsych® Corporation, Chicago, IL.

Access **extra support** the next time you travel.

### **Voya Travel Assistance**

Being in an unfamiliar place can cause stress, especially if something goes wrong. Voya Travel Assistance offers you and your dependents services when traveling 100 miles or more from home, including: medical assistance services, emergency medical transport services, travel assistance services such as pre-trip and cultural information, security services and accessible technology.

Voya Travel Assistance services are provided by International Medical Group, Inc., Indianapolis, IN.



## Exclusions and limitations

Supplemental Life Insurance coverages have a two-year suicide exclusion from the effective date of coverage or an increase in coverage.

AD&D Insurance has exclusions that are described in the certificate of insurance or rider.



### Questions?

Enrollment instructions will be provided by your employer. If you have additional questions before you enroll, please call your local Human Resource Representative.

This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Group Term Life Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy form ICC LP14GP or LP00GP (may vary by state).

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