

Mississippi Department of Transportation

Cigna Group Insurance Voluntary Group Term Life Insurance

Below is a brief description of your Employer's Voluntary Life Insurance coverage with Cigna Group Insurance. This is only a summary, for detailed information regarding coverage, definitions, exclusions, limitations, reductions, conversion and claims, please refer to the employee benefit booklet.

EMPLOYEE:

Classification: All eligible, full-time employees who work at least 30 hours per week for the employer on a regular basis.

Amount of Insurance: Increments of \$10,000 to a maximum of \$500,000

Guaranteed Issue **\$200,000**

Reduction: To 50% at Age 65. Benefits terminate at age 70.

PORTABILITY of coverage is available at Retirement or Termination.

SPOUSE

Amount of Insurance Up to 50% of the employee's coverage election to a maximum of \$100,000 and a minimum of \$10,000. Spouse must be performing normal daily activities, not confined to a home or hospital.

\$75,000

Same as employee.

CHILD

Eligibility: Ages 14 days to 19 years old (25 if a fulltime student). Child must be performing normal daily activities, not confined to home or hospital.

Guaranteed Issue: All amounts are guarantee issue.

Amount of Insurance: \$2,500 or \$5,000, or \$10,000 per child.

NOTE:

No medical questions required up to \$200,000 for eligible members (\$75,000 for spouse), during the initial enrollment period.

Only the group policy contains all terms and provisions of coverage.

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OTHER FEATURES:

Portability
Disability waiver prior to age 60.
Accelerated Death Benefits
Common Carrier provision

VOLUNTARY LIFE RATES

<u>Age of Employee</u>	<u>Monthly Rate Per \$1,000</u>	
Up to Age 29		\$.05
30 to 34		\$.06
35 to 39		\$.07
40 to 44		\$.10
45 to 49		\$.20
50 to 54		\$.33
55 to 59		\$.58
60 to 64		\$.81
65 to 69		\$1.15
Child(ren):	\$2,500	\$.50/month
	\$5,000	\$1.00/month
	\$10,000	\$2.00/month

Sample Calculation:		A 44 year-old tobacco-free employee wants \$50,000 for himself, \$20,000 for his spouse (also age 44) and \$5,000 for his child(ren):			
	# of 1,000				
Employee	50	x	\$0.10	Rate per \$1,000	= \$ 5.00
Spouse	20	x	\$0.10	Rate per \$1,000	= \$ 2.00
Child(ren)	5	x	\$1.00 ⁽¹⁾	Rate per unit	= \$ 1.00
Total cost per month:					\$ 8.00
<p><small>(1)\$1.00 is the rate for dependent child(ren) coverage regardless of the number of dependent child(ren) being covered.</small></p>					

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