

Group Voluntary Life and Accidental Death and Dismemberment (AD&D) Insurance

For Active Members Of The State Of Nevada Public Employees' Benefits Program

Answers To Your Questions About Coverage From Standard Insurance Company





About This Brochure

This booklet is designed to answer some common questions about the group Voluntary Life and Accidental Death and Dismemberment (AD&D) insurance coverage being offered by the State of Nevada Public Employees' Benefits Program (PEBP) to eligible employees. It is not intended to provide a detailed description of the coverage.

If you become insured, you may access a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy issued by Standard Insurance Company. Neither the certificate nor the information presented in this brochure modify the group policy or the insurance coverage in any way. If you have additional questions, please go to <https://pebp.state.nv.us> or call 800.326.5496.

Group Voluntary Life Insurance Features

The time you spend with your family is priceless, and you wouldn't trade those special moments together for anything in the world. But what would happen if you suddenly died?

Would they have the funds to pay bills, your home mortgage, burial and funeral expenses? Would they be able to live on one income and maintain their current lifestyle? What about medical expenses associated with a terminal illness? Would your family be financially prepared? By sponsoring group Voluntary Life insurance from Standard Insurance Company, the State of Nevada Public Employees' Benefits Program offers you an excellent opportunity to help protect your loved ones.

The advantages to you and your loved ones include:

Choice - You decide how much coverage you need from the range of amounts available.

Flexibility - If your needs change, you can request to change the amount of coverage. Increases in coverage may require evidence of insurability.

Convenience - With premiums deducted directly from your paycheck, you don't have to worry about mailing monthly payments.

Savings - Typically, group insurance rates are lower than the rates of individual insurance plans, generally providing you with coverage at a lower cost.

Peace of Mind - You can take comfort and satisfaction in knowing that you have done something positive for your family's future.

Commonly Asked Questions

The following information provides details to give you a better understanding of group Voluntary Life insurance available from The Standard.

Am I eligible for this coverage?

To be a member and eligible for the Voluntary Life coverage, you must be:

- An active full-time employee of the State of Nevada (or any non-State agency approved by the PEBP Board) regularly working at least 80 hours each month;
- An active professional full-time employee under contract with the Nevada System of Higher Education;
- An active member of the Nevada Senate or Assembly;
- An active employee of any other organization which provides benefits under the State of Nevada Public Employees' Benefits Program who is regularly working at least 80 hours each month; or
- A biennial or critical labor shortage employee of the employer who was insured under Standard Insurance Group Policy 642682-C and is no longer receiving distributions from a Public Employees Retirement System (PERS).

You are not eligible if you are a temporary or seasonal employee (other than a seasonal employee pursuant to NAC 287.500); or a full-time member of the armed forces of any country.



If you are a Biennial or Critical Labor Shortage employee and a) were insured as a retiree under Standard Group Policy 642682-C, and b) are no longer receiving a Public Employee Retirement System (PERS) distribution, you will be insured for an amount of Life and AD&D Insurance for which you were insured for under Standard Group Policy 642682-C.

When does my Voluntary Life insurance go into effect?

Your coverage effective date depends on when you become an eligible member, when you apply and whether you are required to provide evidence of insurability. You must apply and agree to pay premiums.

If you are not required to provide evidence of insurability, your Voluntary Life coverage becomes effective on:

- The date you become eligible, if you apply on or before that date.
- The date you apply, if you apply within 60 days after you become eligible.
- The later of the date you apply and the date you have a family status change, if you apply within 60 days of a family status change.
- The first day of the plan year following an annual enrollment period, if you apply during an annual enrollment period.

If you are required to provide evidence of insurability, your Voluntary Life coverage becomes effective on the later of the July 1 immediately following the annual enrollment period in which you apply or the date The Standard approves your evidence of insurability, if you apply during an annual enrollment period. If you apply outside of the annual enrollment period, your Voluntary Life coverage becomes effective the date The Standard approves your evidence of insurability.

In every case, you must meet the active work requirement before your insurance becomes effective.

What is the active work requirement?

Active work means performing with reasonable continuity, the material duties of your own occupation at your employer's usual place of business. You must be capable of active work on the day before the scheduled effective date of your insurance or your insurance will not become effective as scheduled. If you are not actively at work on the day before the scheduled effective date of insurance including Dependents Life insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

How much coverage do I need?

It can be difficult to determine the amount of life insurance you need. Each family has its own unique set of circumstances, combined with needs that may arise with the unexpected loss of life. Use the worksheet on page 5 in calculating the amount of life insurance coverage you may need. The final total is the amount of Voluntary Life insurance you might want to consider applying for to meet your obligations.

How much coverage can I get for myself?

You may elect Voluntary Life coverage in units of \$5,000, to a maximum of \$500,000. If you want to become insured for an amount of Voluntary Life insurance greater than the guarantee issue amount of \$100,000, then you must provide satisfactory evidence of insurability. This means you will have to answer medical questions or provide additional medical information or take a physical exam to purchase coverage in excess of \$100,000.

What if I apply late or want to increase my coverage?

If you do not apply for coverage when initially eligible, you may apply (or increase coverage) at any time. However, except as provided below, late applications and requests for coverage increases require you to provide satisfactory evidence of insurability.

- If you are already insured for Voluntary Life, you may increase your coverage at annual enrollment by \$20,000 without submitting evidence of insurability (provided the amount of your Voluntary Life coverage will not exceed \$100,000).
- If you have a qualified change in family status you will not be required to submit evidence of insurability provided you apply within 60 days following the change in family status and the amount of your Voluntary Life coverage will not exceed \$100,000.
- If your spouse/domestic partner is insured as a member, and then ceases to be a member and you were insured as a Dependent, but eligible to be insured as a member, evidence of insurability will not be required for you to become insured for Life Insurance as a member to the amount for which you were insured for as a Dependent, provided you apply for such amounts of Life Insurance within 31 days after your spouse/domestic partner ceases to be insured as a member.

Is Accidental Death and Dismemberment (AD&D) coverage also included?

This plan includes AD&D insurance from The Standard. With Voluntary Life and AD&D insurance, you or your beneficiaries may be eligible to receive an additional benefit amount in the event of death or dismemberment as a result of an accident.

The amount of the AD&D insurance benefit for loss of life is equal to the amount payable for Voluntary Life insurance coverage on the date of the accident. The amount of the AD&D insurance benefit for other covered losses is a percentage of the amount payable for Voluntary Life insurance coverage on the date of the accident, as shown below:

Loss	Percentage Payable
One hand or one foot..... (even if the severed part is surgically reattached)	50%
Sight in one eye.....	50%
Audible speech.....	50%
Hearing in both ears.....	50%
Two or more losses listed above.....	100%
Thumb and index finger on the same hand ¹	25%
Life..... (if the insured employee disappears and the disappearance is caused solely and directly by an accident that would have reasonably resulted in death) ²	100%
Life..... (by accidental exposure to adverse weather conditions)	100%
Quadriplegia.....	100%
Hemiplegia.....	50%
Paraplegia.....	75%

The loss must occur due to an accident and independently of all other causes, within 365 days after the accident. Loss of life must be evidenced by a certified copy of the death certificate. All other losses must be certified by a physician in the appropriate specialty as determined by us.

¹This benefit is not payable if an AD&D insurance benefit is payable for the loss of the entire hand.

²The disappearance must occur independently of all other causes and continue for a period of 365 days after the date of the accident despite reasonable search efforts.

Additional Life Insurance Worksheet

Consider the amount needed to support your family and the number of years that they will need that support.

You

Your Spouse/
Domestic Partner

Immediate Needs

Medical and hospital expenses

\$ _____

\$ _____

Funeral/Burial expenses

Loans/Debts requiring payment upon death

Taxes

Federal and state income taxes

Property taxes

Federal and state estate taxes

Long Term Needs

Mortgage

\$ _____

\$ _____

Debts (credit cards, car and student loans, etc.)

Educational/Vocational fund

Childcare expenses

Emergency fund for unforeseen expenses

Income Replacement

Consider the income needed to support your family and the number of years they will need that support.

\$ _____

\$ _____

Total Income Needs

Add together all of the above.

\$ _____

\$ _____

Available Resources

Existing life insurance coverage

\$ _____

\$ _____

Other assets such as 401(k), stocks, bonds, etc.

Total Additional Life Insurance Needed

Subtract the amount of your available resources from your total income needs.

\$ _____

\$ _____

How much will the Voluntary Life and AD&D coverage cost me?

The monthly premium rates for the group Voluntary Life coverage are indicated in the table below. These rates are effective as of July 1, 2019.

Employee age on July 1	Rate per \$1,000 of total coverage
Age 29 and under.....	\$0.09
Age 30 to 34.....	\$0.11
Age 35 to 39.....	\$0.12
Age 40 to 44.....	\$0.14
Age 45 to 49.....	\$0.21
Age 50 to 54.....	\$0.30
Age 55 to 59.....	\$0.52
Age 60 to 64.....	\$0.69
Age 65 to 69.....	\$1.30
Age 70+	\$2.09

To calculate the monthly payroll deduction for your Voluntary Life coverage, use the rates above and the formula below. You may also access a premium calculator at: <https://pebp.state.nv.us>.

1. Enter amount of Voluntary Life coverage desired	\$ _____
	÷ 1,000
2. Divide the amount by 1,000	_____
3. Select your rate from the rate table above	_____
4. Multiply divided amount by the rate on the line above	_____

The amount shown on the last line is your estimated monthly payroll deduction. Premiums for the Voluntary Life coverage may be deducted directly from your paycheck.

How much coverage may I get for my spouse/domestic partner?

Coverage for your spouse/domestic partner is available in units of \$5,000, to a maximum of \$250,000, but not to exceed 100 percent of your Voluntary Life coverage. If you elect an amount of Voluntary Life insurance for your spouse/domestic partner greater than the guarantee issue amount of \$20,000, then you must provide satisfactory evidence of insurability. This means your spouse/domestic partner will need to answer medical questions or provide additional medical information or take a physical exam to qualify for coverage in excess of \$20,000.

All late applications and requests for coverage increases also require you to provide satisfactory evidence of insurability.

How much will the Voluntary Life coverage cost for my spouse/ domestic partner?

The monthly premium rates for spouse/domestic partner coverage under the group Voluntary Life plan are indicated below.

Spouse/Domestic Partner age on July 1	Rate per \$1,000 of total coverage
Age 29 and under.....	\$0.09
Age 30 to 34.....	\$0.11
Age 35 to 39.....	\$0.12
Age 40 to 44.....	\$0.14
Age 45 to 49.....	\$0.21
Age 50 to 54.....	\$0.30
Age 55 to 59.....	\$0.52
Age 60 to 64.....	\$0.69
Age 65 to 69.....	\$1.30
Age 70+	\$2.09

Please note the spouse/domestic partner’s premium rate is based on the spouse/domestic partner’s age as of July 1st.

To calculate the monthly payroll deduction for your spouse/domestic partner’s Voluntary Life coverage, use the rates above and the formula given below. You may also access a premium calculator at: <https://pebp.state.nv.us>.

1. Enter amount of Voluntary Life coverage desired	\$ _____
	÷ 1,000
2. Divide the amount by 1,000	_____
3. Select your rate from the rate table above	_____
4. Multiply divided amount by the rate on the line above	_____

The amount shown on the last line is the estimated monthly payroll deduction for your spouse/domestic partner’s coverage. Premiums for the spouse/ domestic partner’s Voluntary Life coverage may be deducted directly from your paycheck.

How much coverage may I get for my eligible dependent children?

Coverage for your dependent child(ren) is available in units of \$2,500 to a maximum of \$10,000, but not to exceed 100 percent of your Voluntary Life coverage.

Who qualifies as an eligible dependent child?

The following children qualify for coverage from live birth to age 26, if you provide primary support and maintenance for them and claim them as dependents on your IRS tax submissions:

- Your biological or adopted child
- Child of your spouse/domestic partner, if living in your home
- Disabled children as provided in the group policy
- Child for whom you have legal guardianship under a court order, if living in your home.

A child may not be insured by more than one member.

How much will the Voluntary Life coverage cost for my eligible dependent children?

The monthly premium rates for dependent children coverage under the group Voluntary Life plan are indicated below.

Option 1: \$2,500

\$0.30 per member, regardless the number of dependents

Option 2: \$5,000

\$0.60 per member, regardless the number of dependents

Option 3: \$7,500

\$0.90 per member, regardless the number of dependents

Option 4: \$10,000

\$1.20 per member, regardless the number of dependents

Will I have to provide information regarding my medical history?

If you apply for Voluntary Life insurance within 60 days of becoming eligible to apply and meet the active work requirement, you will automatically qualify for up to a set amount of insurance coverage called the guarantee issue amount. This means that you will not need to answer medical questions to purchase coverage up to this amount. For employees, the guarantee issue amount is \$100,000. For spouse/domestic partners, the guarantee issue amount is \$20,000. All coverage for children is guarantee issue (no evidence of insurability is required).

What if I apply late?

Evidence of insurability is never required to insure your children. However, if you apply for coverage for yourself or your spouse/domestic partner more than 60 days after becoming eligible to apply or if you determine that you need more insurance than the guarantee issue amount, satisfactory evidence of insurability is required. You (or your spouse/domestic partner) will need to complete and submit a Medical History Statement. In some cases, we may request additional medical information or a physical exam.

However, if you are already insured for Voluntary Life, evidence of insurability will not be required as follows:

- To increase your coverage at annual enrollment by \$20,000 (provided the amount of your Voluntary Life coverage will not exceed \$100,000).
- To increase your coverage by \$20,000 within 60 days following a change in family status (provided the amount of your Voluntary Life coverage will not exceed \$100,000).

Evidence of insurability is always required to insure your spouse/domestic partner if you apply more than 60 days after you first become eligible or if you wish to increase your spouse/domestic partner's coverage.

Note: Evidence of insurability is required for reinstatement of terminated coverage unless you are a reinstated biennial or critical labor shortage employee. See the group insurance certificate for more information.

How are benefits paid?

For benefit amounts less than \$10,000, The Standard issues a check to each designated beneficiary. The Standard pays amounts of \$10,000 or more to each designated beneficiary by depositing funds into Standard Secure Access — a convenient, no fee, interest-bearing draft account.

With Standard Secure Access, each beneficiary receives a personalized checkbook and has complete control of the account. Beneficiaries can write checks as needed or for the full amount. This arrangement allows beneficiaries to earn competitive interest rates on their benefits while they take the necessary time to consider financial decisions and evaluate their choices.

Will insurance benefits be reduced as I grow older?

Your Voluntary Life coverage will not reduce because of age.

What happens if I become totally disabled and can't work?

The Standard may continue your Voluntary Life insurance without payment of premium if you are insured under the group policy as an active employee and:

- Become totally disabled while under age 60
- Complete the waiting period of 180 days
- Provide The Standard with satisfactory proof of loss

Waiver of Premium does not apply to AD&D insurance.

What happens if I become terminally ill?

Under the Accelerated Benefit provision, you may be eligible to receive up to 75 percent, or a maximum of \$500,000, of your Voluntary Life insurance coverage if you become terminally ill, qualify for Waiver of Premium, have a life expectancy of less than 12 months and meet other eligibility requirements.

This benefit allows you to use the proceeds as you desire — whether to cover medical expenses or to maintain your quality of life. The amount of Voluntary Life insurance payable upon your death is reduced by the Accelerated Benefit paid and an interest charge. However, to help protect your beneficiaries, The Standard will pay at least 10 percent of the original Voluntary Life coverage amount at that time even if interest charges on the accelerated amount would have exhausted the remaining benefits over time.

Are there any other benefits with the Voluntary Life coverage from The Standard?

Repatriation Benefit

The Standard pays an additional benefit, the Repatriation Benefit, if you die more than 200 miles from your primary place of residence. The Standard will pay for expenses incurred to transport your body to a mortuary near your primary place of residence, but not to exceed \$5,000 or ten percent of the Life insurance benefit, whichever is less.

Life Services Toolkit

Resources and tools to help you and your beneficiary meet life's challenges after a loss. Online tools and services can help you create a will, make advance funeral plans and put your finances in order. The Life Services Toolkit is automatically available to those insured under a Group Life insurance policy from The Standard. Recipients of an Accelerated Benefit can access services for 12 months after the date of payment. Life insurance Beneficiaries can access services for 12 months after the date of death.

¹The Life Services Toolkit is not available to Life insurance Beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

Visit the Life Services Toolkit website for more information and tools to help you make important life decisions.

www.standard.com/mytoolkit with the username “assurance”

Additional AD&D Benefits

The Voluntary AD&D coverage includes the following additional benefits. Please refer to your certificate of insurance for the complete provisions.

- **Air Bag Benefit.** An Air Bag Benefit may be payable in the event you die as a result of an automobile accident and you were seated in the driver’s or a passenger’s seating position intended to be protected by the Air Bag System and the Air Bag System deploys. The Air Bag Benefit is the lesser of (1) \$5,000 or (2) the amount of AD&D insurance benefit payable for loss of your life.
- **Seat Belt Benefit.** A Seat Belt Benefit may be payable in the event you die as a result of an automobile accident and you were properly wearing and using a seat belt system. The Seat Belt Benefit is the lesser of (1) \$20,000 or (2) the amount of AD&D insurance benefit payable for loss of your life.
- **Child Care Benefit.** A Child Care Benefit may be payable if child care is necessary in order for your spouse/domestic partner to work or be retrained. The Child Care Benefit equals the total child care expense incurred by your spouse/domestic partner within 36 months after the date of your death for all children under age 13, but not to exceed \$5,000 per year, or the cumulative total of \$10,000 or 25% of the AD&D insurance benefit, whichever is less.
- **Higher Education Benefit.** A Higher Education Benefit may be payable if your child is, within 12 months after your death, registered and in full- time attendance at an accredited institution of higher education beyond high school. The Higher Education Benefit equals the tuition expenses incurred per child within 4 years after the date of your death, exclusive of room and board, but not to exceed \$5,000 per year, or the cumulative total of \$20,000 or 25% of the AD&D insurance benefit, whichever is less.
- **Career Adjustment Benefit.** A Career Adjustment Benefit may be payable if your spouse/ domestic partner is, within 36 months after your death, registered and in attendance at a professional or trades training program for the purpose of obtaining employment or increasing earnings. The Career Adjustment Benefit is the tuition expenses for training incurred by your spouse/domestic partner within 36 months after the date of your death, exclusive of room and board, but not to exceed \$5,000 per year, or the cumulative total of \$10,000 or 25% of the AD&D insurance benefit, whichever is less.
- **Occupational Assault.** An Occupational Assault Benefit may be payable in the event you suffer death or dismemberment as a result of an act of workplace physical violence that is punishable by law. The Occupational Assault Benefit is the lesser of (1) \$25,000 or (2) 50% of the amount of the AD&D insurance benefit otherwise payable for the loss.
- **Public Transportation.** A Public Transportation Benefit may be payable if you die as a result of an accident that occurs while you are riding as a fare-paying passenger on public transportation. The Public Transportation Benefit is the lesser of (1) \$200,000 or (2) 100% of the amount of the AD&D insurance benefit otherwise payable for the loss of your life.
- **Line of Duty Benefit.** A Line Of Duty Benefit may be payable for public safety officers who suffer death or dismemberment in an accident while acting in the line of duty. The Line of Duty Benefit is the lesser of (1) \$50,000 or (2) 100% of the amount of the AD&D insurance benefit otherwise payable for the loss.

- **Coma Benefit.** A Coma Benefit may be payable if you become comatose for at least 31 days as a result of a covered accident. The Coma Benefit is 1% per month of the remainder of the AD&D insurance benefit payable for loss of life after reduction by any AD&D insurance benefit paid for any other loss as a result of the same accident. Payments for coma will not exceed a maximum of 11 months.

What are the exclusions for Voluntary Life Insurance?

Voluntary Life has no exclusions.

AD&D insurance benefits are not payable for death or dismemberment caused or contributed to by:

- War or act of war, declared or undeclared, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Suicide or other intentionally self-inflicted injury while sane or insane
- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a physician
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

When does coverage end?

Voluntary Life coverage ends automatically on the earliest of the following:

- The last day for which premium was paid for your Voluntary Life insurance (except if premiums are waived while totally disabled)
- The date your employment terminates
- The date the group policy terminates or is amended to terminate coverage for your class
- The date you cease to be a member; however, insurance may continue for limited periods under certain circumstances described in the group policy

Dependents Life coverage for your spouse/domestic partner and children ends automatically on the earliest of the following:

- Five months after the date you die
- The date the last period ends for which a premium was paid for your Dependents Life insurance
- When the dependent ceases to be an eligible dependent
- For your spouse/domestic partner, the date of your divorce or termination of your domestic partner relationship
- For a child who is disabled, 90 days after we mail you a request for proof of disability, if proof is not given

AD&D insurance will automatically end on the earliest of the following:

- The date the last period ends for which a premium was paid for your AD&D insurance
- The date your Voluntary Life insurance ends
- The date your Waiver of Premium begins

If my Voluntary Life insurance ends or reduces, may I convert to an individual policy?

If your Voluntary Life insurance from The Standard ends or reduces for any reason other than failure to pay premiums, the Right to Convert provision allows you to convert your Voluntary Life coverage to certain types of individual life insurance policies without having to provide evidence of insurability. You must apply for conversion and pay the required premium within 31 days after group coverage ends or reduces. AD&D coverage may not be converted under this provision.

May I buy group life coverage after I leave my employer?

If your insurance ends because your employment terminates, you may be eligible to buy group life insurance from The Standard through the Portability provision, assuming you meet the eligibility requirements. For more information, refer to your group insurance certificate or visit <https://pebp.state.nv.us>.

What is the process for designating a beneficiary?

PEBP administers the beneficiary designations for Voluntary Life/AD&D insurance. The beneficiary designation applies to Voluntary Life/AD&D insurance under the Group Insurance Policy.

A beneficiary designation should be made, even if you don't elect Voluntary Life insurance.

A beneficiary designation may be made by completing the Beneficiary Designation form, which can be accessed at <https://pebp.state.nv.us>.

If you do not name a beneficiary, or if you are not survived by one, benefits will be paid in equal shares to the first surviving class of classes below:

1. Your spouse/domestic partner.
2. Your children.
3. Your parents.
4. Your brothers and sisters.
5. Your estate.

How do I apply for Voluntary Life insurance coverage?

To apply for Voluntary Life insurance, login to <https://pebp.state.nv.us>. You can apply during your Annual Open Enrollment period or in the event of a Family Status change, but remember that coverage subject to Evidence of Insurability will not become effective until approved by The Standard.

What if I have additional questions?

If you have any additional questions or for more information about how to apply for this important coverage, please contact 800.326.5496 or go to <https://pebp.state.nv.us>.



Standard Insurance Company

For more than one hundred years we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers.

Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits and Individual Disability insurance. We provide insurance to more than 25,700 groups, covering approximately 6 million employees nationwide.* Our first group policy, written in 1951 and still in force today, stands as a testament to our commitment to building long-term relationships.

To learn more about Voluntary Life Insurance from The Standard contact your human resources department or visit us at **www.standard.com**.

* As of December 31, 2016, based on internal data developed by Standard Insurance Company.

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GP190-LIFE, GP399-LIFE/TRUST