

# Accidental Death and Dismemberment (AD&D) insurance

Valley Schools Employee Benefits Group - Glendale Union High School District | All Eligible Employees | 67018

## Protect your savings and your family

A serious accident can change the course of your life and leave you and the people you love with unexpected expenses. AD&D insurance provides financial protection if you or anyone on your plan suffers from a covered accidental injury or accidental death.

## How it works

You have the opportunity to purchase additional Accidental Death & Dismemberment (AD&D) insurance, beyond what your employer has provided for you.

You are responsible for paying all of the cost.

### Benefits

<b>For you</b>	You can choose from \$10,000 to \$500,000—in increments of \$10,000.  Coverage ends at termination of employment or retirement.
<b>For your spouse</b>	If you elect coverage for yourself, you can choose \$10,000 to \$250,000—in increments of \$10,000.  (The amount you select for your spouse cannot exceed your elected Voluntary AD&D coverage amount.)
<b>For your child(ren)</b>	If you elect coverage for yourself, you can choose \$1,000 to \$10,000—in increments of \$1,000.  A full benefit is payable for a dependent child from birth to 26 years old, married or unmarried.



## Reasons why you may need AD&D insurance

Provide financial support for you or others

Pay household expenses

Hire help for child or elder care

Funeral or medical expenses

*You or your beneficiaries can use the benefit to pay for injury-related expenses or to help replace lost income—however way the money is needed.*



Sun Life Assurance Company of Canada  
sunlife.com  
800-247-6875

## Covered accidental injuries

You may receive up to 100% of your AD&D coverage amount for losses resulting from one accident, such as paralysis, speech or hearing loss, or thumb and index finger loss. If a covered accident results in your death, your beneficiary will receive 100% of your AD&D coverage amount.

This chart shows a partial list of AD&D insurance benefit amounts as a percentage of coverage. You may refer to the certificate for the full list of covered accidental injuries.

### Benefits

Accidental injury	The plan pays
Accidental death	100%
Quadriplegia	100%
Loss of sight of one eye	50%
Loss of speech only or hearing only	50%
Loss of limb (arm or leg)	50%
Loss of thumb and index finger on the same hand	25%

## Accidental Death and Dismemberment FAQ

### Can I take my insurance with me if I leave my employer?

Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.

### How is my benefit claim filed and paid?

In the event of your accidental death or injury, you or your beneficiary(ies) and your employer will complete the appropriate claims forms and submit these to Sun

Life. Our claims examiners review the claim and gather additional information if necessary. We will notify you or your beneficiaries when the decision is made. If your death claim is approved, beneficiaries may elect to receive a lump sum payment or to have the benefit paid into an account where the funds accumulate interest and can be withdrawn at any time. (State restrictions apply, and options may vary by state.) If your AD&D claim for an accidental injury is approved, the benefit amount will be paid directly to you.

**Read the important plan provisions section for more information including limitations and exclusions.**

## Important plan provisions

**The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”) and do not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. They do NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services.**

To become insured, all persons must be actively at work and performing their regular duties at their usual place of business on the proposed effective date or their date of coverage will be deferred until they return to active work. Refer to the Certificate for details and similar requirements for dependent coverage.

### Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

### Accidental Death and Dismemberment

We will not pay a benefit that is due to or results from: suicide while sane or insane; injuring oneself intentionally; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; voluntary use of any controlled substance/illegal drugs; operation of a motorized vehicle while intoxicated; bodily or mental infirmity or disease or infection unless due to an accidental injury; riding in or driving any motor-driven vehicle in a race, stunt show, or speed test.

### Information about services offered

Value-added services are not insurance, are offered only on specific lines of coverage and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. The entities that provide the value-added services are not subcontractors of Sun Life and Sun Life is not responsible or liable for the care, services, or advice provided by them. Sun Life reserves the right to discontinue any of the Services at any time.

**This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern. Product offerings may not be available in all states and may vary depending on state laws and regulations.**

Sun Life Financial companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, “Sun Life Financial” or “Sun Life”).

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 98P-ADD, 12-GP-01, 13-ADD-C-01, 15-GP-01, 15-LF-C-01, 15-ADD-C-01, 12-DI-C-01, 16-DI-C-01, TDBPOLICY-2006, TDI-POLICY, 12-AC-C-01, 16-AC-C-01, 12-SD-C-01, 16-SD-C-01, and 16-CAN-C-01.

© 2018 Sun Life Assurance Company of Canada, Wellesley Hills, MA 02481. All rights reserved. Sun Life Financial and the globe symbol are registered trademarks of Sun Life Assurance Company of Canada. Visit us at [www.sunlife.com/us](http://www.sunlife.com/us).

GVBH-EE-6701

SLPC 29219 08/18 (exp 08/22)



# Rate Sheet

**Employee** - Coverage and **monthly** cost for employee Voluntary AD&D.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and the corresponding costs per monthly pay period.

Coverage Amounts	Cost per Monthly pay period
\$10,000	0.20
\$20,000	0.40
\$30,000	0.60
\$40,000	0.80
\$50,000	1.00
\$60,000	1.20
\$70,000	1.40
\$80,000	1.60
\$90,000	1.80
\$100,000	2.00
\$110,000	2.20
\$120,000	2.40
\$130,000	2.60
\$140,000	2.80
\$150,000	3.00
\$160,000	3.20
\$170,000	3.40
\$180,000	3.60
\$190,000	3.80
\$200,000	4.00
\$210,000	4.20
\$220,000	4.40
\$230,000	4.60
\$240,000	4.80
\$250,000	5.00
\$260,000	5.20
\$270,000	5.40
\$280,000	5.60
\$290,000	5.80
\$300,000	6.00
\$310,000	6.20
\$320,000	6.40
\$330,000	6.60
\$340,000	6.80
\$350,000	7.00
\$360,000	7.20
\$370,000	7.40
\$380,000	7.60
\$390,000	7.80
\$400,000	8.00
\$410,000	8.20
\$420,000	8.40
\$430,000	8.60
\$440,000	8.80
\$450,000	9.00
\$460,000	9.20
\$470,000	9.40
\$480,000	9.60
\$490,000	9.80
\$500,000	10.00

# Rate Sheet

**Spouse** - Coverage and **monthly** cost for spouse Voluntary AD&D.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and the corresponding costs per monthly pay period.

Coverage Amounts	Cost per Monthly pay period
\$10,000	0.20
\$20,000	0.40
\$30,000	0.60
\$40,000	0.80
\$50,000	1.00
\$60,000	1.20
\$70,000	1.40
\$80,000	1.60
\$90,000	1.80
\$100,000	2.00
\$110,000	2.20
\$120,000	2.40
\$130,000	2.60
\$140,000	2.80
\$150,000	3.00
\$160,000	3.20
\$170,000	3.40
\$180,000	3.60
\$190,000	3.80
\$200,000	4.00
\$210,000	4.20
\$220,000	4.40
\$230,000	4.60
\$240,000	4.80
\$250,000	5.00

**Child(ren)** - Coverage and **monthly** cost for child Voluntary AD&D.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and the corresponding costs per monthly pay period.

Coverage Amounts	Cost per Monthly pay period
\$1,000	0.02
\$2,000	0.04
\$3,000	0.06
\$4,000	0.08
\$5,000	0.10
\$6,000	0.12
\$7,000	0.14
\$8,000	0.16
\$9,000	0.18
\$10,000	0.20