

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

**SUMMARY OF BENEFITS** 

Sponsored by: Eskaton Properties, Inc

Life Benefit	Employee	Spouse/Domestic Partner	Dependent			
	Employee must elect coverage for	r Spouse/Domestic Partner or de	pendents to be eligible.			
Amount	Choice of \$10,000 increments	Choice of \$10,000 increments	Age 1 Day to 14 Days: \$500			
			Age 14 Days to 6 months: \$2,000			
			6 months to age 19 (to age 26 if full-time student): \$10,000 - \$20,000			
Minimum Amount	\$10,000	\$10,000	\$10,000			
Maximum Amount	\$500,000, limited to 5 times your annual salary Employees age 70 and older, maximum benefit is \$50,000	\$500,000, limited to 100% of employee amount	\$20,000			
Guarantee Issue for Newly Eligible Employee	\$200,000	\$30,000				
Current Eligible Employees	You or your Spouse/Domestic Partner may electoverage equal to 2 benefit levels on a guarar your company's defined annual open enrollme your Spouse/Domestic Partner have not been or pending for coverage.	nteed acceptance basis during ent period, provided that you or				
AD&D Benefit	Employee	Spouse/Domestic Partner				
Amount	Benefit amount equal to the life amount elected by you. Cost included in the schedule.	Same as employee				
Benefit Reduction	Employee	Spouse/Domestic Partner				
Benefits will	35% at age 70;	35% at Spouse Age 70;				
reduce:	Additional 20% of original amount at age 75;	Additional 20% of original amount at Spouse Age 75;				
	Additional 15% of original amount at age 80;	Additional 15% of original amount at Spouse Age 80;				
	Additional 15% of original amount at age 85; Benefits terminate at retirement	Additional 15% of original amount at Spouse Age 85				
	benefits terminate at retirement	Benefits terminate at Employee	Retirement			
Eligibility	Employee	Spouse/Domestic Partner and	d Dependents			
	All employees in an eligible class.	Cannot be in a period of limited effect.	activity on the day coverage takes			
Additional Bene	efits					
See Definition:	Accelerated Death Benefit					
See Definition:	Portability					

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Seat Belt, Airbag, and Common Carrier

See Definition:

#### **Definitions**

### Accelerated Death Benefit

Accelerated Death Benefit provides an option to withdraw a percentage of your life insurance

coverage when diagnosed as terminally ill (as defined in the policy). The death benefit will be reduced by the amount withdrawn. To qualify, you have satisfied the Active Work rule and have been covered under this policy for the required amount of time as defined by the policy. Check with your tax advisor

or attorney before exercising this option.

AD&D Accidental Death and Dismemberment (AD&D) insurance provides specified benefits for a covered

accidental bodily injury that directly causes dismemberment (e.g., the loss of a hand, foot, or eye). In the event that death occurs from a covered accident, both the life and the AD&D benefit would be

payable

**Conversion** If you terminate your employment or become ineligible for this coverage, you have the option to

convert all or part of the amount of coverage in force to an individual life policy on the date of termination without Evidence of Insurability. Conversion election must be made within 31 days of your

date of termination.

**Guarantee Issue** For timely entrants enrolled within 31 days of becoming eligible, the Guarantee Issue amount is

available without any Evidence of Insurability requirement. Evidence of Insurability will be required for any amounts above this, for late enrollees or increase in insurance, and it will be provided at your own

expense.

Limited Activity A period when a Spouse/Domestic Partner or dependent is confined in a health care facility; or,

whether confined or not, is unable to perform the regular and usual activities of a healthy person of the

same age and sex.

of time after your employment by paying the required premium. Portability is available if you cease employment for a reason other than total disability or retirement at Social Security Normal Retirement

Age. A written application must be made within 31 days of your termination.

Seat Belt, Airbag, and Common Carrier

If you die as a result of a covered auto accident while wearing a seat belt or in a vehicle equipped with an airbag, additional benefits are payable up to \$10,000 or 10% of the principal sum, whichever is less. If loss occurs for you due to an accident while riding as a passenger in a common carrier,

**Term Life** Benefit provided to the designated beneficiary upon the death of the insured. The benefit is provided

for the time period that you are eligible and premium is paid. There is no cash value associated with

benefits will be double the amount that would otherwise apply as outlined in the certificate.

this product.

Exclusion: Suicide Benefits will not be paid if the death results from suicide within 1 year after coverage is effective. May

apply if employee contributes toward the premium.

**Additional Benefits** 

LifeKeys<sup>SM</sup> Online will & testament preparation service, identity theft resources and beneficiary assistance

support for all employees and eligible dependents covered under the Group Term Life and/or AD&D

policy.

TravelConnect<sup>SM</sup> Travel assistance services for employees and eligible dependents traveling more than 100 miles from

home.

### For assistance or additional information Contact Lincoln Financial Group at

(800) 423-2765; reference ID: **ESKATONPR** 

www.LincolnFinancial.com

NOTE: This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater details. Should there be a difference between this summary and the contract, the contract will govern.

Insurance products are issued by The Lincoln National Life Insurance Company (Fort Wayne, IN), which does not solicit business in New York, nor is it licensed to do so. Product availability and/or features may vary by state. Limitations and exclusions apply. **Not for use in New York**.

## Monthly Employee Premium Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse/Domestic Partner premiums are calculated separately. Refer to Program Specifications for your maximum benefit amounts.

Benefits and premium amounts reflect age reductions.

Monthly RATE	AGE	\$ 10,000	\$ 20,000	\$ 30,000	\$ 40,000	\$ 50,000	\$ 60,000	\$ 70,000	\$ 80,000	\$ 90,000	\$ 100,000
0.093	<24	\$0.93	\$1.86	\$2.79	\$3.72	\$4.65	\$5.58	\$6.51	\$7.44	\$8.37	\$9.30
0.093	25-29	\$0.93	\$1.86	\$2.79	\$3.72	\$4.65	\$5.58	\$6.51	\$7.44	\$8.37	\$9.30
0.097	30-34	\$0.97	\$1.94	\$2.91	\$3.88	\$4.85	\$5.82	\$6.79	\$7.76	\$8.73	\$9.70
0.136	35-39	\$1.36	\$2.72	\$4.08	\$5.44	\$6.80	\$8.16	\$9.52	\$10.88	\$12.24	\$13.60
0.212	40-44	\$2.12	\$4.24	\$6.36	\$8.48	\$10.60	\$12.72	\$14.84	\$16.96	\$19.08	\$21.20
0.340	45-49	\$3.40	\$6.80	\$10.20	\$13.60	\$17.00	\$20.40	\$23.80	\$27.20	\$30.60	\$34.00
0.544	50-54	\$5.44	\$10.88	\$16.32	\$21.76	\$27.20	\$32.64	\$38.08	\$43.52	\$48.96	\$54.40
0.850	55-59	\$8.50	\$17.00	\$25.50	\$34.00	\$42.50	\$51.00	\$59.50	\$68.00	\$76.50	\$85.00
1.232	60-64	\$12.32	\$24.64	\$36.96	\$49.28	\$61.60	\$73.92	\$86.24	\$98.56	\$110.88	\$123.20
1.878	65-69	\$18.78	\$37.56	\$56.34	\$75.12	\$93.90	\$112.68	\$131.46	\$150.24	\$169.02	\$187.80
3.085	70-74	\$6,500	\$13,000	\$19,500	\$26,000	\$32,500	N/A	N/A	N/A	N/A	N/A
		\$20.05	\$40.11	\$60.16	\$80.21	\$100.26	N/A	N/A	N/A	N/A	N/A
3.244	75-79	\$4,500	\$9,000	\$13,500	\$18,000	\$22,500	N/A	N/A	N/A	N/A	N/A
		\$14.60	\$29.20	\$43.79	\$58.39	\$72.99	N/A	N/A	N/A	N/A	N/A
3.244	80-84	\$3,000	\$6,000	\$9,000	\$12,000	\$15,000	N/A	N/A	N/A	N/A	N/A
		\$9.73	\$19.46	\$29.20	\$38.93	\$48.66	N/A	N/A	N/A	N/A	N/A
3.244	85-99	\$1,500	\$3,000	\$4,500	\$6,000	\$7,500	N/A	N/A	N/A	N/A	N/A
		\$4.87	\$9.73	\$14.60	\$19.46	\$24.33	N/A	N/A	N/A	N/A	N/A

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

### Example:

Use this formula to calculate premium for benefit amounts over \$

Age	Monthly	Rate Per \$1,000	х	Benefit In \$1,000's	=	Monthly	Cost
	35 0.	.136	Х	150	=	\$	20.40
			Х		=		

100,000

Example:

Dependent Children Benefit Amt

Monthly Rate:

\$ 10,000 \$ 20,000 \$ 2.30 \$ 4.60

Premium covers all dependent children regardless of the number of children.

### Monthly Spouse/Domestic Partner Premium Life and Accidental Death and Dismemberment Premium for sample benefit amounts

Employee and Spouse/Domestic Partner premiums are calculated separately. Spouse/Domestic Partner premiums will be calculated based on the Spouse/Domestic Partner Age.

Refer to Program Specifications for your maximum benefit amounts.

Benefits and premium amounts reflect age reductions.

Monthly RATE	AGE	\$ 10,000	\$ 20,000	\$ 30,000	\$ 40,000	\$ 50,000	\$ 60,000	\$ 70,000	\$ 80,000	\$ 90,000	\$ 100,000
0.093	<24	\$0.93	\$1.86	\$2.79	\$3.72	\$4.65	\$5.58	\$6.51	\$7.44	\$8.37	\$9.30
0.093	25-29	\$0.93	\$1.86	\$2.79	\$3.72	\$4.65	\$5.58	\$6.51	\$7.44	\$8.37	\$9.30
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0.212	40-44	\$2.12	\$4.24	\$6.36	\$8.48	\$10.60	\$12.72	\$14.84	\$16.96	\$19.08	\$21.20
0.340	45-49	\$3.40	\$6.80	\$10.20	\$13.60	\$17.00	\$20.40	\$23.80	\$27.20	\$30.60	\$34.00
0.544	50-54	\$5.44	\$10.88	\$16.32	\$21.76	\$27.20	\$32.64	\$38.08	\$43.52	\$48.96	\$54.40
0.850	55-59	\$8.50	\$17.00	\$25.50	\$34.00	\$42.50	\$51.00	\$59.50	\$68.00	\$76.50	\$85.00
1.232	60-64	\$12.32	\$24.64	\$36.96	\$49.28	\$61.60	\$73.92	\$86.24	\$98.56	\$110.88	\$123.20
1.878	65-69	\$18.78	\$37.56	\$56.34	\$75.12	\$93.90	\$112.68	\$131.46	\$150.24	\$169.02	\$187.80
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3.244	75-79	\$4,500	\$9,000	\$13,500	\$18,000	\$22,500	N/A	N/A	N/A	N/A	N/A
		\$14.60	\$29.20	\$43.79	\$58.39	\$72.99	N/A	N/A	N/A	N/A	N/A
3.244	80-84	\$3,000	\$6,000	\$9,000	\$12,000	\$15,000	N/A	N/A	N/A	N/A	N/A
		\$9.73	\$19.46	\$29.20	\$38.93	\$48.66	N/A	N/A	N/A	N/A	N/A
3.244	85-99	\$1,500	\$3,000	\$4,500	\$6,000	\$7,500	N/A	N/A	N/A	N/A	N/A
		\$4.87	\$9.73	\$14.60	\$19.46	\$24.33	N/A	N/A	N/A	N/A	N/A

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

#### Example:

Use this formula to calculate premium for benefit amounts over

100,000

Αg	ge	Monthly Rate	Per 00	Х	Benefit In \$1,000's	=	Monthly	Cost
	35	0.136		Х	75	=	\$	10.20
				Х		=		

Example:

Dependent Children Benefit

Amt Monthly Rate:

\$ 10,000	\$ 20,000			
\$ 2.30	\$	4.60		

Premium covers all dependent children regardless of the number of children.