

VOLUNTARY TERM LIFE AND VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE OVERVIEW

Prepared for the employees of University of California, Davis

Voluntary Term Life Insurance Coverage – paid by you

Eligibility	All active full-time Employees working at least 20 hours per week of the Employer who are eligible to participate in the University of California Medical School Clinical Compensation Plan or University of California General Health Sciences Compensation Plan.	
Eligibility Waiting Period	You are eligible for benefits on the date of hire.	
Employee	Benefit Amount	1, 2 or 3 times salary
	Guaranteed Coverage Amount	\$500,000 combined with Basic Life (1 x salary)
	Maximum	The lesser of 4 times salary or \$750,000 combined with Basic Life (1 x salary)
	Benefit Reduction Schedule	Providing you are still employed, your benefits will reduce to 50% at age 75

Voluntary AD&D Insurance Coverage (All Guaranteed Issue)– paid by you

Eligibility	All active full-time Employees working at least 20 hours per week of the Employer who are eligible to participate in the University of California Medical School Clinical Compensation Plan or University of California General Health Sciences Compensation Plan.	
Eligibility Waiting Period	You are eligible for benefits on the date of hire.	
Employee	Benefit Amount	1, 2 or 3 times salary
	Maximum	The lesser of 3 times salary or \$500,000
	Benefit Reduction Schedule	Providing you are still employed, your benefits will reduce to 50% at age 75

No one may be covered more than once under this plan.

Guaranteed Coverage for Voluntary Term Life Insurance Coverage

Guaranteed Coverage Amount is the amount of coverage you can elect without answering any medical questions or taking a health exam. Guaranteed Coverage is only available during Initial Enrollment and other times as approved. If you apply for coverage that is above the Guaranteed Coverage Amount, or if you are applying for coverage after 31 days after you become eligible, you must fill out a Medical Evidence of Insurability form.

How Much Your Voluntary Life and AD&D Coverage will Cost per Month

Age	Life Employee Cost Per \$1,000	AD&D Employee Cost Per \$1,000
<20	\$0.059	\$.034
20-24	\$0.059	\$.034
25-29	\$0.059	\$.034
30-34	\$0.067	\$.034
35-39	\$0.084	\$.034
40-44	\$0.135	\$.034
45-49	\$0.237	\$.034
50-54	\$0.399	\$.034
55-59	\$0.628	\$.034
60-64	\$0.722	\$.034
65-69	\$0.883	\$.034
70-74	\$1.317	\$.034
75-79	\$1.436	\$.034
80-84	\$1.546	\$.034
85-89	\$1.657	\$.034
90-94	\$1.801	\$.034
95-99	\$1.886	\$.034

Cost Calculation Example (based on the Benefit Amount)

	Age	Rate Per \$1,000		Benefit Amount				Estimated Cost
Example EE Life Costs	36	.084	X	100,000	÷	1,000	=	\$8.40
Example EE AD&D Costs		.034	X	100,000	÷	1,000	=	\$3.40
Total Costs							=	\$11.80

Other Voluntary Life Coverage Features

Accelerated Death Benefit – Terminal Illness

If you are diagnosed by two unaffiliated physicians as terminally ill with a life expectancy of 12 months or less, the benefit for terminal illness provides for up to 50% of the Term Life Insurance coverage amount in-force or \$250,000, whichever is less, to be paid to the insured. This benefit is payable only once in the insured's lifetime, and will reduce the life insurance death benefit.

Continuation for Disability for Employees Age 60 or over - If your active service ends due to disability, at age 60 or over, your coverage will continue while you are disabled. Benefits will remain in force until the earliest of: the date you are no longer disabled, the date the policy terminates, the date you are Disabled for 12 consecutive months, or the day after the last period for which premiums are paid. You are considered disabled if, because of injury or sickness, you are unable to perform all the material duties of your Regular Occupation, or you are receiving disability benefits under your Employer's plan.

Extended Death Benefit - The extended death benefit ensures that if you become disabled prior to age 60, and die before it is determined if you qualify for Waiver of Premium, we will pay the life insurance benefit if you remain disabled during that period. If you qualify for this benefit, your coverage is also extended. No additional premium payment is required for the extended coverage.

Waiver of Premium - If you are totally disabled prior to age 60 and can't work for at least 6 months, you won't need to pay premiums for your coverage while you are disabled, provided the insurance company approves you for this benefit. You are considered totally disabled when you are completely unable to engage in any occupation for wage or profit because of injury or sickness. This benefit will remain in force until age 70, subject to proof of continuing disability each year.

When Your Coverage Begins and Ends

Coverage becomes effective on the later of the program's effective date, the date you become eligible, the date we receive your completed enrollment form, or the date you authorize any necessary payroll deductions. Your coverage will not begin unless you are actively at work on the effective date. Coverage will continue while you and remain eligible, the group policy is in force, and required premium paid.

Conversion - If group life coverage ends (except due to nonpayment of premium), your employment is terminated, membership in an eligible class is terminated, or insurance coverage is reduced based on attained age, you can convert to an individual non-term policy. To convert, you must apply for the conversion policy and pay the first premium payment within 31 days after your group coverage ends. Premiums may change at this time, and terms of coverage will be subject to change.

Exclusions: Voluntary life insurance will not be paid if you commit suicide, while sane or insane, within the first two years of coverage

Other Voluntary Accidental Death & Dismemberment (AD&D) Insurance Coverage Features

A Valuable Combination of Benefits

Survivors of severe accidents will be paid an additional benefit according to the chart below.

If, within 365 days of a covered accident, bodily injuries result in:	We will pay this % of the benefit amount:
Loss of life	100%
Total paralysis of upper and lower limbs, or Loss of any combination of two: hands, feet or eyesight, or Loss of speech and hearing in both ears	100%
Total paralysis of both lower or upper limbs	75%
Total paralysis of upper and lower limbs on one side of the body, or Loss of hand, foot or sight in one eye, or Loss of speech or loss of hearing in both ears, or Severance and Reattachment of one hand or foot	50%
Total paralysis of one upper or lower limb, or Loss of all four fingers of the same hand, or Loss of thumb and index finger of the same hand	25%
Loss of all toes of the same foot	20%

Only one benefit (the largest) will be paid for losses from the same accident.

Additional Benefits of Voluntary Accidental Death & Dismemberment Insurance

For Wearing a Seatbelt & Protection by an Airbag - Additional 10% benefit but not more than \$10,000 if the covered person dies in an automobile accident while wearing a seatbelt or approved child restraint. We will increase the benefit by an additional 5% but not more than \$10,000 if the insured person was also positioned in a seat protected by a properly-functioning and properly deployed Supplemental Restraint System (Airbag).

For Comas - You will receive 1% of the full benefit amount each month, for up to a maximum of 11 months, if you or an insured family member are in a coma for 30 days or more as a result of a Covered Accident. If the covered person is still in a coma after 11 months, or dies, the full benefit amount will be paid.

What is Not Covered

Self-inflicted injuries or suicide while sane or insane • commission or attempt to commit a felony or an assault • any act of war, declared or undeclared • any active participation in a riot, insurrection or terrorist act • bungee jumping • parachuting • skydiving • parasailing • hang-gliding • sickness, disease, bodily or mental infirmity, bacterial or viral infection or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food • voluntarily using any drug, narcotic, poison, gas or fumes except one prescribed by a licensed physician and taken as prescribed • operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant including any prescribed drug for which the covered person has been provided a written warning against operating a vehicle while taking it • a Covered Accident that occurs while the covered person is engaged in the activities of active duty service in the military, navy or air force of any country or international organization (this does not include Reserve or National Guard training, unless it extends beyond 31 days) • traveling in an aircraft that is owned, leased or controlled by the sponsoring organization or any of its subsidiaries or affiliates • air travel, except as a passenger on a regularly scheduled commercial airline or in an aircraft being used by the Air Mobility Command or its foreign equivalent • flight in, boarding or alighting from an Aircraft or any craft designed to fly above the Earth's surface being flown by the covered person or in which the covered person is a member of the crew.

When Your Coverage Begins and Ends

Coverage becomes effective on the later of the program's effective date, the date you become eligible, the date we receive your completed application, or the date you authorize any necessary payroll deductions. Your coverage will not begin unless you are actively at work on the effective date. Coverage will continue while you and remain eligible, the group policy is in force, and required premiums are paid.

Conversion - If, before you reach age 70, this group coverage is reduced or ends for any reason except non-payment of premium or age, you can convert to an individual policy. No medical certification is needed. To continue coverage, you must apply for the conversion policy and pay the first premium in effect for your age and occupation within 31 days after your group coverage ends. Converted policies are subject to certain benefits and limits as outlined in your certificate, should you become insured under the plan.

This information is a brief description of the important features of the plan. It is not a contract. Terms and conditions of coverage are set forth in Group Policy No. GL-016108 and Group Policy No. OK-961579. Please refer to your Certificate of Insurance or Summary Plan Description for more detailed information. Coverage is underwritten by Life Insurance Company of North America, a Cigna company. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. © Cigna 2015