



Mayfield City Schools Voluntary Life Program Benefit & Cost Illustration

Individual Elections

- **You** may elect benefit coverage ranging from \$10,000 to \$500,000 in increments of \$10,000
- A **spouse** is eligible for coverage ranging from \$5,000 to \$100,000 in increments of \$5,000
- **Dependent child(ren)** are eligible for \$5,000 up to the age of 19 (or 24 if a full-time student)

Plan Features

- **Disability Waiver of Premium**
If an employee becomes totally and permanently disabled prior to age 60, his life insurance will continue in force without further payment of premium on a year-to-year basis but not beyond age 65. Subject to periodic submission of evidence of total and permanent disability.
- **Portability/Continuance:** Allows employee to continue low cost protection if coverage under this group plan ends, subject to certain restrictions provided the employee and any eligible dependents have been insured for Voluntary Life at least three months. Surviving spouses may also elect to continue coverage for themselves and all eligible child(ren). Portability/Continuance not available if: (a) employee is eligible for this plan's Extended Life Benefit; or (b) if coverage terminates due to employee's failure to pay any required premium or termination of the group plan. Portability ceases on attainment of age 70.
- **Conversion:** An employee can convert this policy to an individual policy (subject to the terms of the employer's contract).
- **Seatbelt and Airbag Benefit:** Benefit amounts will be increased if the employee/dependent dies as a direct result of an automobile accident: a) \$10,000 for the employee, \$5,000 for the dependent if properly wearing a seatbelt; b) \$15,000 for the employee, \$7,500 for the dependent while both properly wearing a seatbelt and sitting in a seat equipped with an airbag.
- **Enhanced Employee Accidental Death and Dismemberment insurance** equal to the employee's life benefits. Enhanced benefits include Catastrophic Loss Benefits, College Education Benefit, Spousal Education & Retraining, Day Care Expense Benefit, Repatriation Benefit, Common Carrier, and Seatbelt & Airbag Benefit.
- **Accelerated Life Benefit** for employee coverage – Up to 80% of the death benefit, Minimum \$10,000, Maximum: \$250,000, subject to state limitation.

Guarantee Issue Underwriting (With Dependent GI):

Employee: the lesser of 3 times your BAE or \$50,000

Spouse: \$20,000

Child: \$5,000

- A health statement will be required and coverage will be subject to full medical underwriting if you elect coverage amounts that exceed the guidelines above, enroll at a later date or request a benefit increase.

Voluntary Life General Limitations and Exclusions:

- **Suicide:** We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefits. This exclusion may vary according to state law.
- **Accelerated Life Benefit:** Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid.
- **Accidental Death & Dismemberment:** We pay no Accidental Death and Dismemberment benefits for an insured where death or dismemberment occurs: while legally intoxicated, while voluntarily using a non-prescription controlled substance, through intentional self-injury, while participating in civil disorder or committing a felony, traveling on any type of aircraft while having any duties on that aircraft, by declared or undeclared war or act of war or armed aggression, or while a member of any armed force (may vary by state), as the result of a disease or a bodily infirmity, while driving without a valid drivers license. GP-1-R-ADD et al.

*A loss may be defined as death, quadriplegia, loss of speech and hearing, loss of cognitive function, comatose state in excess of one month, hemiplegia or paraplegia. The loss must occur within 90 days of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated.

Important Information about Voluntary Term Life: You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two-year limitation also applies to any increase in benefit (may vary by state). Dependent coverage will not take effect if a dependent, other than a newborn is confined to a hospital or other health care facility, or is unable to perform the normal activities of someone of like age and sex (may vary by state). Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding 1 year; or (b) in an area under travel warning by the US Department of State, subject to state specific variations. Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid. GP-1-R-EOPT-96.

We pay no Accidental Death and Dismemberment benefits for an insured where death or dismemberment occurs: while legally intoxicated, while voluntarily using a non-prescription controlled substance, through intentional self-injury, while participating in civil disorder or committing a felony, traveling on any type of aircraft while having any duties on that aircraft, by declared or undeclared war or act of war or armed aggression, or while a member of any armed force (may vary by state), as the result of a disease or a bodily infirmity, while driving without a valid drivers license. GP-1-R-ADD et al. *A loss may be defined as death, quadriplegia, loss of speech and hearing, loss of cognitive function, comatose state in excess of one month, hemiplegia or paraplegia. The loss must occur within 90 days of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated.

This handout is for illustrative purposes. You will receive benefit booklets when your enrollment application is processed. If there is a discrepancy between this handout and your benefit booklet, the benefit booklet prevails.

www.GuardianLife.com

Benefit and Cost Summary

Voluntary Life/AD&D Monthly Employee Cost

Coverage	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000
Under 30	\$0.90	\$1.80	\$2.70	\$3.60	\$4.50	\$5.40
30 - 34	\$1.00	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00
35 - 39	\$1.00	\$2.00	\$3.00	\$4.00	\$5.00	\$6.00
40 - 44	\$1.50	\$3.00	\$4.50	\$6.00	\$7.50	\$9.00
45 - 49	\$2.20	\$4.40	\$6.60	\$8.80	\$11.00	\$13.20
50 - 54	\$3.50	\$7.00	\$10.50	\$14.00	\$17.50	\$21.00
55 - 59	\$7.00	\$14.00	\$21.00	\$28.00	\$35.00	\$42.00
60 - 64	\$10.20	\$20.40	\$30.60	\$40.80	\$51.00	\$61.20

Coverage	\$70,000	\$80,000	\$90,000	\$100,000	\$110,000	\$120,000
Under 30	\$6.30	\$7.20	\$8.10	\$9.00	\$9.90	\$10.80
30 - 34	\$7.00	\$8.00	\$9.00	\$10.00	\$11.00	\$12.00
35 - 39	\$7.00	\$8.00	\$9.00	\$10.00	\$11.00	\$12.00
40 - 44	\$10.50	\$12.00	\$13.50	\$15.00	\$16.50	\$18.00
45 - 49	\$15.40	\$17.60	\$19.80	\$22.00	\$24.20	\$26.40
50 - 54	\$24.50	\$28.00	\$31.50	\$35.00	\$38.50	\$42.00
55 - 59	\$49.00	\$56.00	\$63.00	\$70.00	\$77.00	\$84.00
60 - 64	\$71.40	\$81.60	\$91.80	\$102.00	\$112.20	\$122.40

Coverage	\$130,000	\$140,000	\$150,000	\$160,000	\$170,000	\$180,000
Under 30	\$11.70	\$12.60	\$13.50	\$14.40	\$15.30	\$16.20
30 - 34	\$13.00	\$14.00	\$15.00	\$16.00	\$17.00	\$18.00
35 - 39	\$13.00	\$14.00	\$15.00	\$16.00	\$17.00	\$18.00
40 - 44	\$19.50	\$21.00	\$22.50	\$24.00	\$25.50	\$27.00
45 - 49	\$28.60	\$30.80	\$33.00	\$35.20	\$37.40	\$39.60
50 - 54	\$45.50	\$49.00	\$52.50	\$56.00	\$59.50	\$63.00
55 - 59	\$91.00	\$98.00	\$105.00	\$112.00	\$119.00	\$126.00
60 - 64	\$132.60	\$142.80	\$153.00	\$163.20	\$173.40	\$183.60

Coverage	\$190,000	\$200,000	\$210,000	\$220,000	\$230,000	\$240,000
Under 30	\$17.10	\$18.00	\$18.90	\$19.80	\$20.70	\$21.60
30 - 34	\$19.00	\$20.00	\$21.00	\$22.00	\$23.00	\$24.00
35 - 39	\$19.00	\$20.00	\$21.00	\$22.00	\$23.00	\$24.00
40 - 44	\$28.50	\$30.00	\$31.50	\$33.00	\$34.50	\$36.00
45 - 49	\$41.80	\$44.00	\$46.20	\$48.40	\$50.60	\$52.80
50 - 54	\$66.50	\$70.00	\$73.50	\$77.00	\$80.50	\$84.00
55 - 59	\$133.00	\$140.00	\$147.00	\$154.00	\$161.00	\$168.00
60 - 64	\$193.80	\$204.00	\$214.20	\$224.40	\$234.60	\$244.80



Coverage	\$250,000	\$260,000	\$270,000	\$280,000	\$290,000	\$300,000
Under 30	\$22.50	\$23.40	\$24.30	\$25.20	\$26.10	\$27.00
30 - 34	\$25.00	\$26.00	\$27.00	\$28.00	\$29.00	\$30.00
35 - 39	\$25.00	\$26.00	\$27.00	\$28.00	\$29.00	\$30.00
40 - 44	\$37.50	\$39.00	\$40.50	\$42.00	\$43.50	\$45.00
45 - 49	\$55.00	\$57.20	\$59.40	\$61.60	\$63.80	\$66.00
50 - 54	\$87.50	\$91.00	\$94.50	\$98.00	\$101.50	\$105.00
55 - 59	\$175.00	\$182.00	\$189.00	\$196.00	\$203.00	\$210.00
60 - 64	\$255.00	\$265.20	\$275.40	\$285.60	\$295.80	\$306.00

Coverage	\$310,000	\$320,000	\$330,000	\$340,000	\$350,000	\$360,000
Under 30	\$27.90	\$28.80	\$29.70	\$30.60	\$31.50	\$32.40
30 - 34	\$31.00	\$32.00	\$33.00	\$34.00	\$35.00	\$36.00
35 - 39	\$31.00	\$32.00	\$33.00	\$34.00	\$35.00	\$36.00
40 - 44	\$46.50	\$48.00	\$49.50	\$51.00	\$52.50	\$54.00
45 - 49	\$68.20	\$70.40	\$72.60	\$74.80	\$77.00	\$79.20
50 - 54	\$108.50	\$112.00	\$115.50	\$119.00	\$122.50	\$126.00
55 - 59	\$217.00	\$224.00	\$231.00	\$238.00	\$245.00	\$252.00
60 - 64	\$316.20	\$326.40	\$336.60	\$346.80	\$357.00	\$367.20

Coverage	\$370,000	\$380,000	\$390,000	\$400,000	\$410,000	\$420,000
Under 30	\$33.30	\$34.20	\$35.10	\$36.00	\$36.90	\$37.80
30 - 34	\$37.00	\$38.00	\$39.00	\$40.00	\$41.00	\$42.00
35 - 39	\$37.00	\$38.00	\$39.00	\$40.00	\$41.00	\$42.00
40 - 44	\$55.50	\$57.00	\$58.50	\$60.00	\$61.50	\$63.00
45 - 49	\$81.40	\$83.60	\$85.80	\$88.00	\$90.20	\$92.40
50 - 54	\$129.50	\$133.00	\$136.50	\$140.00	\$143.50	\$147.00
55 - 59	\$259.00	\$266.00	\$273.00	\$280.00	\$287.00	\$294.00
60 - 64	\$377.40	\$387.60	\$397.80	\$408.00	\$418.20	\$428.40

Coverage	\$430,000	\$440,000	\$450,000	\$460,000	\$470,000	\$480,000
Under 30	\$38.70	\$39.60	\$40.50	\$41.40	\$42.30	\$43.20
30 - 34	\$43.00	\$44.00	\$45.00	\$46.00	\$47.00	\$48.00
35 - 39	\$43.00	\$44.00	\$45.00	\$46.00	\$47.00	\$48.00
40 - 44	\$64.50	\$66.00	\$67.50	\$69.00	\$70.50	\$72.00
45 - 49	\$94.60	\$96.80	\$99.00	\$101.20	\$103.40	\$105.60
50 - 54	\$150.50	\$154.00	\$157.50	\$161.00	\$164.50	\$168.00
55 - 59	\$301.00	\$308.00	\$315.00	\$322.00	\$329.00	\$336.00
60 - 64	\$438.60	\$448.80	\$459.00	\$469.20	\$479.40	\$489.60

Coverage	\$490,000	\$500,000
Under 30	\$44.10	\$45.00
30 - 34	\$49.00	\$50.00
35 - 39	\$49.00	\$50.00
40 - 44	\$73.50	\$75.00
45 - 49	\$107.80	\$110.00
50 - 54	\$171.50	\$175.00
55 - 59	\$343.00	\$350.00
60 - 64	\$499.80	\$510.00



GUARDIAN®

Monthly Spouse Cost

Coverage	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000
Under 30	\$0.60	\$1.20	\$1.80	\$2.40	\$3.00	\$3.60
30 - 34	\$0.70	\$1.40	\$2.10	\$2.80	\$3.50	\$4.20
35 - 39	\$0.70	\$1.40	\$2.10	\$2.80	\$3.50	\$4.20
40 - 44	\$1.20	\$2.40	\$3.60	\$4.80	\$6.00	\$7.20
45 - 49	\$1.90	\$3.80	\$5.70	\$7.60	\$9.50	\$11.40
50 - 54	\$3.20	\$6.40	\$9.60	\$12.80	\$16.00	\$19.20
55 - 59	\$6.70	\$13.40	\$20.10	\$26.80	\$33.50	\$40.20
60 - 64	\$9.90	\$19.80	\$29.70	\$39.60	\$49.50	\$59.40

Coverage	\$70,000	\$80,000	\$90,000	\$100,000	\$110,000	\$120,000
Under 30	\$4.20	\$4.80	\$5.40	\$6.00	\$6.60	\$7.20
30 - 34	\$4.90	\$5.60	\$6.30	\$7.00	\$7.70	\$8.40
35 - 39	\$4.90	\$5.60	\$6.30	\$7.00	\$7.70	\$8.40
40 - 44	\$8.40	\$9.60	\$10.80	\$12.00	\$13.20	\$14.40
45 - 49	\$13.30	\$15.20	\$17.10	\$19.00	\$20.90	\$22.80
50 - 54	\$22.40	\$25.60	\$28.80	\$32.00	\$35.20	\$38.40
55 - 59	\$46.90	\$53.60	\$60.30	\$67.00	\$73.70	\$80.40
60 - 64	\$69.30	\$79.20	\$89.10	\$99.00	\$108.90	\$118.80

Coverage	\$130,000	\$140,000	\$150,000	\$160,000	\$170,000	\$180,000
Under 30	\$7.80	\$8.40	\$9.00	\$9.60	\$10.20	\$10.80
30 - 34	\$9.10	\$9.80	\$10.50	\$11.20	\$11.90	\$12.60
35 - 39	\$9.10	\$9.80	\$10.50	\$11.20	\$11.90	\$12.60
40 - 44	\$15.60	\$16.80	\$18.00	\$19.20	\$20.40	\$21.60
45 - 49	\$24.70	\$26.60	\$28.50	\$30.40	\$32.30	\$34.20
50 - 54	\$41.60	\$44.80	\$48.00	\$51.20	\$54.40	\$57.60
55 - 59	\$87.10	\$93.80	\$100.50	\$107.20	\$113.90	\$120.60
60 - 64	\$128.70	\$138.60	\$148.50	\$158.40	\$168.30	\$178.20

Coverage	\$190,000	\$200,000	\$210,000	\$220,000	\$230,000	\$240,000
Under 30	\$11.40	\$12.00	\$12.60	\$13.20	\$13.80	\$14.40
30 - 34	\$13.30	\$14.00	\$14.70	\$15.40	\$16.10	\$16.80
35 - 39	\$13.30	\$14.00	\$14.70	\$15.40	\$16.10	\$16.80
40 - 44	\$22.80	\$24.00	\$25.20	\$26.40	\$27.60	\$28.80
45 - 49	\$36.10	\$38.00	\$39.90	\$41.80	\$43.70	\$45.60
50 - 54	\$60.80	\$64.00	\$67.20	\$70.40	\$73.60	\$76.80
55 - 59	\$127.30	\$134.00	\$140.70	\$147.40	\$154.10	\$160.80
60 - 64	\$188.10	\$198.00	\$207.90	\$217.80	\$227.70	\$237.60



Coverage	\$250,000	\$260,000	\$270,000	\$280,000	\$290,000	\$300,000
Under 30	\$15.00	\$15.60	\$16.20	\$16.80	\$17.40	\$18.00
30 - 34	\$17.50	\$18.20	\$18.90	\$19.60	\$20.30	\$21.00
35 - 39	\$17.50	\$18.20	\$18.90	\$19.60	\$20.30	\$21.00
40 - 44	\$30.00	\$31.20	\$32.40	\$33.60	\$34.80	\$36.00
45 - 49	\$47.50	\$49.40	\$51.30	\$53.20	\$55.10	\$57.00
50 - 54	\$80.00	\$83.20	\$86.40	\$89.60	\$92.80	\$96.00
55 - 59	\$167.50	\$174.20	\$180.90	\$187.60	\$194.30	\$201.00
60 - 64	\$247.50	\$257.40	\$267.30	\$277.20	\$287.10	\$297.00

Coverage	\$310,000	\$320,000	\$330,000	\$340,000	\$350,000	\$360,000
Under 30	\$18.60	\$19.20	\$19.80	\$20.40	\$21.00	\$21.60
30 - 34	\$21.70	\$22.40	\$23.10	\$23.80	\$24.50	\$25.20
35 - 39	\$21.70	\$22.40	\$23.10	\$23.80	\$24.50	\$25.20
40 - 44	\$37.20	\$38.40	\$39.60	\$40.80	\$42.00	\$43.20
45 - 49	\$58.90	\$60.80	\$62.70	\$64.60	\$66.50	\$68.40
50 - 54	\$99.20	\$102.40	\$105.60	\$108.80	\$112.00	\$115.20
55 - 59	\$207.70	\$214.40	\$221.10	\$227.80	\$234.50	\$241.20
60 - 64	\$306.90	\$316.80	\$326.70	\$336.60	\$346.50	\$356.40

Coverage	\$370,000	\$380,000	\$390,000	\$400,000	\$410,000	\$420,000
Under 30	\$22.20	\$22.80	\$23.40	\$24.00	\$24.60	\$25.20
30 - 34	\$25.90	\$26.60	\$27.30	\$28.00	\$28.70	\$29.40
35 - 39	\$25.90	\$26.60	\$27.30	\$28.00	\$28.70	\$29.40
40 - 44	\$44.40	\$45.60	\$46.80	\$48.00	\$49.20	\$50.40
45 - 49	\$70.30	\$72.20	\$74.10	\$76.00	\$77.90	\$79.80
50 - 54	\$118.40	\$121.60	\$124.80	\$128.00	\$131.20	\$134.40
55 - 59	\$247.90	\$254.60	\$261.30	\$268.00	\$274.70	\$281.40
60 - 64	\$366.30	\$376.20	\$386.10	\$396.00	\$405.90	\$415.80

Coverage	\$430,000	\$440,000	\$450,000	\$460,000	\$470,000	\$480,000
Under 30	\$25.80	\$26.40	\$27.00	\$27.60	\$28.20	\$28.80
30 - 34	\$30.10	\$30.80	\$31.50	\$32.20	\$32.90	\$33.60
35 - 39	\$30.10	\$30.80	\$31.50	\$32.20	\$32.90	\$33.60
40 - 44	\$51.60	\$52.80	\$54.00	\$55.20	\$56.40	\$57.60
45 - 49	\$81.70	\$83.60	\$85.50	\$87.40	\$89.30	\$91.20
50 - 54	\$137.60	\$140.80	\$144.00	\$147.20	\$150.40	\$153.60
55 - 59	\$288.10	\$294.80	\$301.50	\$308.20	\$314.90	\$321.60
60 - 64	\$425.70	\$435.60	\$445.50	\$455.40	\$465.30	\$475.20

Coverage	\$490,000	\$500,000
Under 30	\$29.40	\$30.00
30 - 34	\$34.30	\$35.00
35 - 39	\$34.30	\$35.00
40 - 44	\$58.80	\$60.00
45 - 49	\$93.10	\$95.00
50 - 54	\$156.80	\$160.00
55 - 59	\$328.30	\$335.00
60 - 64	\$485.10	\$495.00



Monthly Child(ren) Cost

Coverage	5,000
	\$0.75

Important Information about Voluntary Term Life: We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two-year limitation also applies to any increase in benefits (this exclusion may vary according to state law). Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid. Rates and premiums are estimated based on the employee data submitted. Final rates and premiums will be based on the plan of insurance, participation level, employee and dependent data taken from enrollment materials and the experience of the previous carrier if similar coverage is now in force. You must be working fulltime on the effective date of your coverage, otherwise, your coverage becomes effective after you have completed a specific waiting period. GP-1-R-EOPT-96 et al.

This handout is for illustrative purposes only. The payroll deductions are an approximation. Please see your paycheck for actual payroll deductions. If there is a discrepancy between this handout and your paycheck, your paycheck stub prevails.

