

Optional Dependent Term Life Insurance Optional Accidental Death & Dismemberment Insurance

Coverages are issued by The Prudential Insurance Company of America (Prudential)



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# Summary of Benefits

### SAN BERNARDINO COMMUNITY COLLEGE DISTRICT

#### **All Employees**

Basic Term Life, Basic Accidental Death & Dismemberment, Optional Term Life, Optional Dependent Term Life and Optional Accidental Death & Dismemberment

**Issued by The Prudential Insurance Company of America** 

Effective: 07/01/2019

#### **Basic Term Life**

100% Employer Paid

- Basic Term Life: You are automatically enrolled for \$50,000.
- If you are terminally ill, you can get a partial payment of your group life insurance benefit. You can use this payment as you see fit. The payment to your beneficiary will be reduced by the amount you receive with the Accelerated Benefit Option.\* Refer to the plan booklet for details.
- Payment of premium can be waived if you are totally disabled for 6 months, you are less than 60 years old when the disability begins, and you continue to be totally disabled. This waiver terminates at age 70. This provision may vary by state.
- Coverage will be reduced as you age by 35% at age 65 and 50% at age 70.
- Coverage will end on your termination of employment or as specified in the plan booklet. You may convert your insurance to an individual life insurance policy issued by the Prudential Insurance Company of America.

#### **Basic Accidental Death & Dismemberment**

100% Employer Paid

- Basic AD&D pays you and your beneficiary a benefit for the loss of life or other injuries resulting from a covered accident -- 100% for loss of life and a lesser percentage for other injuries. Injuries covered may include loss of sight or speech, paralysis, and dismemberment of hands or feet. Basic AD&D benefits are paid regardless of other coverages you may have.
- Basic AD&D: You are automatically enrolled for an amount equal to your Basic Term Life coverage amount.



#### **Optional Term Life**

#### 100% Employee Paid

- Purchase coverage in increments of \$10,000 up to a maximum of \$500,000. Please refer to your plan certificate(s) to review the required minimum and maximum coverage amounts allowed.
  - If enrolling when first eligible within the specified period of your date of hire, you can elect up to the guaranteed issue amount of the lesser of 3.0 times your covered annual earnings or \$200,000, without providing proof of good health to Prudential.
  - All other elections or enrolling after the enrollment period will require proof of good health satisfactory to Prudential for all coverage amounts.
  - If you have been previously denied coverage in the past, proof of good health satisfactory to Prudential is required for all coverage amounts.
- If terminally ill, you can get a partial payment of your group term life insurance benefit. You can use this payment as you see fit. In the event of your death, your beneficiary will receive a benefit payout which has been reduced by the amount you receive.
- Payment of premium can be waived if you are totally disabled for 6 months, you are less than 60 years old when the disability begins, and you continue to be totally disabled. This waiver terminates at age 70. This provision may vary by state. Refer to the plan booklet for details.
- Coverage will be reduced as you age by 35% at age 65 and 50% at age 70.
- Upon termination of employment, you (if eligible to port) may choose to continue a coverage amount equal to or lower than your current benefit amount. Coverage amounts will be subject to maximum of five times your annual earnings or \$1 million, whichever is less.

# Spouse / Domestic Partner - Optional Dependent Term Life<sup>5</sup>

#### 100% Employee Paid

- Purchase coverage for your spouse in increments of \$10,000 up to a maximum of \$500,000. **Please note:** The Dependent Term Life Insurance coverage amount on your spouse may not exceed 100% of your Optional Term Life coverage amount.
  - If enrolling your spouse when first eligible, you can elect up to the guaranteed issue amount of \$30,000, on your spouse, without providing proof of good health to Prudential.
  - All other elections or enrolling after the enrollment period will require proof of good health satisfactory to Prudential for all coverage amounts.
  - If your spouse has been previously denied coverage in the past, proof of good health satisfactory to Prudential is required for all coverage amounts.
- Coverage will be reduced as you age by 35% at age 65 and 50% at age 70.
- <sup>5</sup> California Residents: Coverage is extended to include California Registered Domestic Partners.
- Upon termination of employment, your spouse (if eligible to port) may choose to continue a coverage amount equal to or lower than your current benefit amount. Coverage amounts for you and your spouse will be subject to a maximum of five times your annual earnings or \$1 million, whichever is less.

#### **Child - Optional Dependent Term Life**

100% Employee Paid

- Purchase coverage for \$2,500 or \$5,000 or \$10,000. **Please note:** The Optional Dependent Term Life Insurance coverage amount on your children may not exceed 100% of your Optional Term Life coverage amount. There are no health requirements for this coverage.
- Coverage begins from live birth, and continues to age 26.
- Upon termination of employment, you (if eligible to port) may choose to continue a dependent child coverage amount equal to or lower than your current benefit amount.

# **Optional Accidental Death & Dismemberment**

100% Employee Paid

- Employee Coverage: Purchase coverage for \$10,000, \$25,000, \$50,000, \$100,000, \$250,000 or \$500,000, not to exceed 10.0 times your annual earnings for amounts over \$150,000. Please refer to your plan certificate(s) to review the required minimum and maximum coverage amounts allowed.
- Spouse / Domestic Partner Coverage: Purchase a coverage amount equal to 60% of your Optional AD&D Insurance coverage amount.
- Children Coverage: Purchase a coverage amount equal to 25% of your Optional AD&D Insurance coverage amount. to a maximum of \$50.000.
- Children coverage begins from live birth and continues to age 26.
- Coverage will be reduced as you age by 35% at age 65 and 50% at age 70.

#### Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

\*Accelerated Death Benefit option is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. The death benefit is reduced by the amount of the accelerated death benefit paid. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered "terminally ill" or "chronically ill." You may wish to seek professional tax advice before exercising this option.

This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").

This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage. If you do not have other health insurance coverage, you may be subject to a federal tax penalty.

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York Department of Financial Services.

IMPORTANT NOTICE - THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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# **Rate Sheet**

## SAN BERNARDINO COMMUNITY COLLEGE DISTRICT

#### **All Employees**

**Issued by The Prudential Insurance Company of America** 

Effective: 07/01/2019

# **Employee - Optional Term Life Tenthly Cost per Coverage Amount**

Coverage is available in increments of \$10,000 to a maximum of \$500,000. Refer to the Optional Term Life section for evidence of insurability details. Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000	\$110,000	\$120,000	\$130,000
Age													
< 30	\$0.48	\$0.96	\$1.44	\$1.92	\$2.40	\$2.88	\$3.36	\$3.84	\$4.32	\$4.80	\$5.28	\$5.76	\$6.24
30-34	\$0.48	\$0.96	\$1.44	\$1.92	\$2.40	\$2.88	\$3.36	\$3.84	\$4.32	\$4.80	\$5.28	\$5.76	\$6.24
35-39	\$0.72	\$1.44	\$2.16	\$2.88	\$3.60	\$4.32	\$5.04	\$5.76	\$6.48	\$7.20	\$7.92	\$8.64	\$9.36
40-44	\$1.08	\$2.16	\$3.24	\$4.32	\$5.40	\$6.48	\$7.56	\$8.64	\$9.72	\$10.80	\$11.88	\$12.96	\$14.04
45-49	\$1.80	\$3.60	\$5.40	\$7.20	\$9.00	\$10.80	\$12.60	\$14.40	\$16.20	\$18.00	\$19.80	\$21.60	\$23.40
50-54	\$2.76	\$5.52	\$8.28	\$11.04	\$13.80	\$16.56	\$19.32	\$22.08	\$24.84	\$27.60	\$30.36	\$33.12	\$35.88
55-59	\$4.68	\$9.36	\$14.04	\$18.72	\$23.40	\$28.08	\$32.76	\$37.44	\$42.12	\$46.80	\$51.48	\$56.16	\$60.84
60-64	\$7.80	\$15.60	\$23.40	\$31.20	\$39.00	\$46.80	\$54.60	\$62.40	\$70.20	\$78.00	\$85.80	\$93.60	\$101.40
65-69	\$13.08	\$26.16	\$39.24	\$52.32	\$65.40	\$78.48	\$91.56	\$104.64	\$117.72	\$130.80	\$143.88	\$156.96	\$170.04
70+	\$22.20	\$44.40	\$66.60	\$88.80	\$111.00	\$133.20	\$155.40	\$177.60	\$199.80	\$222.00	\$244.20	\$266.40	\$288.60

	\$140,000	\$150,000	\$160,000	\$170,000	\$180,000	\$190,000	\$200,000	\$210,000	\$220,000	\$230,000	\$240,000	\$250,000	\$260,000
Age													
< 30	\$6.72	\$7.20	\$7.68	\$8.16	\$8.64	\$9.12	\$9.60	\$10.08	\$10.56	\$11.04	\$11.52	\$12.00	\$12.48
30-34	\$6.72	\$7.20	\$7.68	\$8.16	\$8.64	\$9.12	\$9.60	\$10.08	\$10.56	\$11.04	\$11.52	\$12.00	\$12.48
35-39	\$10.08	\$10.80	\$11.52	\$12.24	\$12.96	\$13.68	\$14.40	\$15.12	\$15.84	\$16.56	\$17.28	\$18.00	\$18.72
40-44	\$15.12	\$16.20	\$17.28	\$18.36	\$19.44	\$20.52	\$21.60	\$22.68	\$23.76	\$24.84	\$25.92	\$27.00	\$28.08
45-49	\$25.20	\$27.00	\$28.80	\$30.60	\$32.40	\$34.20	\$36.00	\$37.80	\$39.60	\$41.40	\$43.20	\$45.00	\$46.80
50-54	\$38.64	\$41.40	\$44.16	\$46.92	\$49.68	\$52.44	\$55.20	\$57.96	\$60.72	\$63.48	\$66.24	\$69.00	\$71.76
55-59	\$65.52	\$70.20	\$74.88	\$79.56	\$84.24	\$88.92	\$93.60	\$98.28	\$102.96	\$107.64	\$112.32	\$117.00	\$121.68
60-64	\$109.20	\$117.00	\$124.80	\$132.60	\$140.40	\$148.20	\$156.00	\$163.80	\$171.60	\$179.40	\$187.20	\$195.00	\$202.80
65-69	\$183.12	\$196.20	\$209.28	\$222.36	\$235.44	\$248.52	\$261.60	\$274.68	\$287.76	\$300.84	\$313.92	\$327.00	\$340.08
70+	\$310.80	\$333.00	\$355.20	\$377.40	\$399.60	\$421.80	\$444.00	\$466.20	\$488.40	\$510.60	\$532.80	\$555.00	\$577.20



# **Employee - Optional Term Life Tenthly Cost per Coverage Amount**

Coverage is available in increments of \$10,000 to a maximum of \$500,000. Refer to the Optional Term Life section for evidence of insurability details. Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$270,000	\$280,000	\$290,000	\$300,000	\$310,000	\$320,000	\$330,000	\$340,000	\$350,000	\$360,000	\$370,000	\$380,000	
Age													
< 30	\$12.96	\$13.44	\$13.92	\$14.40	\$14.88	\$15.36	\$15.84	\$16.32	\$16.80	\$17.28	\$17.76	\$18.24	
30-34	\$12.96	\$13.44	\$13.92	\$14.40	\$14.88	\$15.36	\$15.84	\$16.32	\$16.80	\$17.28	\$17.76	\$18.24	
35-39	\$19.44	\$20.16	\$20.88	\$21.60	\$22.32	\$23.04	\$23.76	\$24.48	\$25.20	\$25.92	\$26.64	\$27.36	
40-44	\$29.16	\$30.24	\$31.32	\$32.40	\$33.48	\$34.56	\$35.64	\$36.72	\$37.80	\$38.88	\$39.96	\$41.04	
45-49	\$48.60	\$50.40	\$52.20	\$54.00	\$55.80	\$57.60	\$59.40	\$61.20	\$63.00	\$64.80	\$66.60	\$68.40	
50-54	\$74.52	\$77.28	\$80.04	\$82.80	\$85.56	\$88.32	\$91.08	\$93.84	\$96.60	\$99.36	\$102.12	\$104.88	
55-59	\$126.36	\$131.04	\$135.72	\$140.40	\$145.08	\$149.76	\$154.44	\$159.12	\$163.80	\$168.48	\$173.16	\$177.84	
60-64	\$210.60	\$218.40	\$226.20	\$234.00	\$241.80	\$249.60	\$257.40	\$265.20	\$273.00	\$280.80	\$288.60	\$296.40	
65-69	\$353.16	\$366.24	\$379.32	\$392.40	\$405.48	\$418.56	\$431.64	\$444.72	\$457.80	\$470.88	\$483.96	\$497.04	
70+	\$599.40	\$621.60	\$643.80	\$666.00	\$688.20	\$710.40	\$732.60	\$754.80	\$777.00	\$799.20	\$821.40	\$843.60	

	\$390,000	\$400,000	\$410,000	\$420,000	\$430,000	\$440,000	\$450,000	\$460,000	\$470,000	\$480,000	\$490,000	\$500,000	
Age													
< 30	\$18.72	\$19.20	\$19.68	\$20.16	\$20.64	\$21.12	\$21.60	\$22.08	\$22.56	\$23.04	\$23.52	\$24.00	
30-34	\$18.72	\$19.20	\$19.68	\$20.16	\$20.64	\$21.12	\$21.60	\$22.08	\$22.56	\$23.04	\$23.52	\$24.00	
35-39	\$28.08	\$28.80	\$29.52	\$30.24	\$30.96	\$31.68	\$32.40	\$33.12	\$33.84	\$34.56	\$35.28	\$36.00	
40-44	\$42.12	\$43.20	\$44.28	\$45.36	\$46.44	\$47.52	\$48.60	\$49.68	\$50.76	\$51.84	\$52.92	\$54.00	
45-49	\$70.20	\$72.00	\$73.80	\$75.60	\$77.40	\$79.20	\$81.00	\$82.80	\$84.60	\$86.40	\$88.20	\$90.00	
50-54	\$107.64	\$110.40	\$113.16	\$115.92	\$118.68	\$121.44	\$124.20	\$126.96	\$129.72	\$132.48	\$135.24	\$138.00	
55-59	\$182.52	\$187.20	\$191.88	\$196.56	\$201.24	\$205.92	\$210.60	\$215.28	\$219.96	\$224.64	\$229.32	\$234.00	
60-64	\$304.20	\$312.00	\$319.80	\$327.60	\$335.40	\$343.20	\$351.00	\$358.80	\$366.60	\$374.40	\$382.20	\$390.00	
65-69	\$510.12	\$523.20	\$536.28	\$549.36	\$562.44	\$575.52	\$588.60	\$601.68	\$614.76	\$627.84	\$640.92	\$654.00	
70+	\$865.80	\$888.00	\$910.20	\$932.40	\$954.60	\$976.80	\$999.00	\$1,021.20	\$1,043.40	\$1,065.60	\$1,087.80	\$1,110.00	

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

# Spouse / Domestic Partner - Optional Dependent Term Life Tenthly Cost per Coverage Amount

Coverage is available in increments of \$10,000 to a maximum of \$500,000, not to exceed 100% of your Optional Term Life coverage amount. Refer to the Optional Dependent Term Life section for evidence of insurability details. Initial rates based on employee's age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000	\$110,000	\$120,000	\$130,000
Age													
< 30	\$0.48	\$0.96	\$1.44	\$1.92	\$2.40	\$2.88	\$3.36	\$3.84	\$4.32	\$4.80	\$5.28	\$5.76	\$6.24
30-34	\$0.48	\$0.96	\$1.44	\$1.92	\$2.40	\$2.88	\$3.36	\$3.84	\$4.32	\$4.80	\$5.28	\$5.76	\$6.24
35-39	\$0.72	\$1.44	\$2.16	\$2.88	\$3.60	\$4.32	\$5.04	\$5.76	\$6.48	\$7.20	\$7.92	\$8.64	\$9.36
40-44	\$1.08	\$2.16	\$3.24	\$4.32	\$5.40	\$6.48	\$7.56	\$8.64	\$9.72	\$10.80	\$11.88	\$12.96	\$14.04
45-49	\$1.80	\$3.60	\$5.40	\$7.20	\$9.00	\$10.80	\$12.60	\$14.40	\$16.20	\$18.00	\$19.80	\$21.60	\$23.40
50-54	\$2.76	\$5.52	\$8.28	\$11.04	\$13.80	\$16.56	\$19.32	\$22.08	\$24.84	\$27.60	\$30.36	\$33.12	\$35.88
55-59	\$4.68	\$9.36	\$14.04	\$18.72	\$23.40	\$28.08	\$32.76	\$37.44	\$42.12	\$46.80	\$51.48	\$56.16	\$60.84
60-64	\$7.80	\$15.60	\$23.40	\$31.20	\$39.00	\$46.80	\$54.60	\$62.40	\$70.20	\$78.00	\$85.80	\$93.60	\$101.40
65-69	\$13.08	\$26.16	\$39.24	\$52.32	\$65.40	\$78.48	\$91.56	\$104.64	\$117.72	\$130.80	\$143.88	\$156.96	\$170.04
70+	\$22.20	\$44.40	\$66.60	\$88.80	\$111.00	\$133.20	\$155.40	\$177.60	\$199.80	\$222.00	\$244.20	\$266.40	\$288.60

# Spouse / Domestic Partner - Optional Dependent Term Life Tenthly Cost per Coverage Amount

Coverage is available in increments of \$10,000 to a maximum of \$500,000, not to exceed 100% of your Optional Term Life coverage amount. Refer to the Optional Dependent Term Life section for evidence of insurability details. Initial rates based on employee's age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$140,000	\$150,000	\$160,000	\$170,000	\$180,000	\$190,000	\$200,000	\$210,000	\$220,000	\$230,000	\$240,000	\$250,000	\$260,000
Age													
< 30	\$6.72	\$7.20	\$7.68	\$8.16	\$8.64	\$9.12	\$9.60	\$10.08	\$10.56	\$11.04	\$11.52	\$12.00	\$12.48
30-34	\$6.72	\$7.20	\$7.68	\$8.16	\$8.64	\$9.12	\$9.60	\$10.08	\$10.56	\$11.04	\$11.52	\$12.00	\$12.48
35-39	\$10.08	\$10.80	\$11.52	\$12.24	\$12.96	\$13.68	\$14.40	\$15.12	\$15.84	\$16.56	\$17.28	\$18.00	\$18.72
40-44	\$15.12	\$16.20	\$17.28	\$18.36	\$19.44	\$20.52	\$21.60	\$22.68	\$23.76	\$24.84	\$25.92	\$27.00	\$28.08
45-49	\$25.20	\$27.00	\$28.80	\$30.60	\$32.40	\$34.20	\$36.00	\$37.80	\$39.60	\$41.40	\$43.20	\$45.00	\$46.80
50-54	\$38.64	\$41.40	\$44.16	\$46.92	\$49.68	\$52.44	\$55.20	\$57.96	\$60.72	\$63.48	\$66.24	\$69.00	\$71.76
55-59	\$65.52	\$70.20	\$74.88	\$79.56	\$84.24	\$88.92	\$93.60	\$98.28	\$102.96	\$107.64	\$112.32	\$117.00	\$121.68
60-64	\$109.20	\$117.00	\$124.80	\$132.60	\$140.40	\$148.20	\$156.00	\$163.80	\$171.60	\$179.40	\$187.20	\$195.00	\$202.80
65-69	\$183.12	\$196.20	\$209.28	\$222.36	\$235.44	\$248.52	\$261.60	\$274.68	\$287.76	\$300.84	\$313.92	\$327.00	\$340.08
70+	\$310.80	\$333.00	\$355.20	\$377.40	\$399.60	\$421.80	\$444.00	\$466.20	\$488.40	\$510.60	\$532.80	\$555.00	\$577.20
	\$270,000	\$280,000	\$290,000	\$300,000	\$310,000	\$320,000	\$330,000	\$340,000	\$350,000	\$360,000	\$370,000	\$380,000	
Age		,	,	,	,	,	,	,		,	,	,	
< 30	\$12.96	\$13.44	\$13.92	\$14.40	\$14.88	\$15.36	\$15.84	\$16.32	\$16.80	\$17.28	\$17.76	\$18.24	
30-34	\$12.96	\$13.44	\$13.92	\$14.40	\$14.88	\$15.36	\$15.84	\$16.32	\$16.80	\$17.28	\$17.76	\$18.24	
35-39	\$12.30	\$20.16	\$20.88	\$21.60	\$22.32	\$23.04	\$23.76	\$24.48	\$25.20	\$25.92	\$26.64	\$27.36	
40-44	\$29.16	\$30.24	\$31.32	\$32.40	\$33.48	\$34.56	\$35.64	\$36.72	\$37.80	\$38.88	\$39.96	\$41.04	
45-49	\$48.60	\$50.24	\$52.20	\$54.00	\$55.80	\$57.60	\$59.40	\$61.20	\$63.00	\$64.80	\$66.60	\$68.40	
50-54	\$74.52	\$77.28	\$80.04	\$82.80	\$85.56	\$88.32	\$91.08	\$93.84	\$96.60	\$99.36	\$102.12	\$104.88	
55-59	\$126.36	\$131.04	\$135.72	\$140.40	\$145.08	\$149.76	\$154.44	\$159.12	\$163.80	\$168.48	\$173.16	\$104.88	
60-64	\$210.60	\$131.04	\$226.20	\$234.00	\$241.80	\$249.60	\$257.40	\$265.20	\$273.00	\$280.80	\$288.60	\$296.40	
65-69	\$353.16	\$366.24	\$379.32	\$392.40	\$405.48	\$418.56	\$431.64	\$444.72	\$457.80	\$470.88	\$483.96	\$497.04	
70+	\$599.40	\$621.60	\$643.80	\$666.00	\$688.20	\$710.40	\$732.60	\$754.80	\$777.00	\$799.20	\$821.40	\$843.60	
	\$390,000	\$400,000	\$410,000	\$420,000	\$430,000	\$440,000	\$450,000	\$460,000	\$470,000	\$480,000	\$490,000	\$500,000	
Age													
< 30	\$18.72	\$19.20	\$19.68	\$20.16	\$20.64	\$21.12	\$21.60	\$22.08	\$22.56	\$23.04	\$23.52	\$24.00	
30-34	\$18.72	\$19.20	\$19.68	\$20.16	\$20.64	\$21.12	\$21.60	\$22.08	\$22.56	\$23.04	\$23.52	\$24.00	
35-39	\$28.08	\$28.80	\$29.52	\$30.24	\$30.96	\$31.68	\$32.40	\$33.12	\$33.84	\$34.56	\$35.28	\$36.00	
40-44	\$42.12	\$43.20	\$44.28	\$45.36	\$46.44	\$47.52	\$48.60	\$49.68	\$50.76	\$51.84	\$52.92	\$54.00	
45-49	\$70.20	\$72.00	\$73.80	\$75.60	\$77.40	\$79.20	\$81.00	\$82.80	\$84.60	\$86.40	\$88.20	\$90.00	
50-54	\$107.64	\$110.40	\$113.16	\$115.92	\$118.68	\$121.44	\$124.20	\$126.96	\$129.72	\$132.48	\$135.24	\$138.00	
55-59	\$182.52	\$187.20	\$191.88	\$196.56	\$201.24	\$205.92	\$210.60	\$215.28	\$219.96	\$224.64	\$229.32	\$234.00	
60-64	\$304.20	\$312.00	\$319.80	\$327.60	\$335.40	\$343.20	\$351.00	\$358.80	\$366.60	\$374.40	\$382.20	\$390.00	
65-69	\$510.12	\$523.20	\$536.28	\$549.36	\$562.44	\$575.52	\$588.60	\$601.68	\$614.76	\$627.84	\$640.92	\$654.00	
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Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

\$976.80

Spouse / Domestic Partner rate is based on employee's age.

\$910.20

\$932.40

\$954.60

70+

\$865.80

\$888.00

### Children - Optional Dependent Term Life Tenthly Cost per Coverage Amount

\$999.00

\$1,021.20 \$1,043.40 \$1,065.60

\$1,087.80 \$1,110.00

#### One premium rate covers all eligible children

Coverage is available for \$2,500 or \$5,000 or \$10,000, not to exceed 100% of your Optional Term Life coverage amount.

\$2,500	\$5,000	\$10,000
\$0.60	\$1.20	\$2.40

Rates may change if plan experience requires a change for all insureds.

### Employee - Optional Accidental Death & Dismemberment Tenthly Cost per Coverage Amount

Coverage is available for \$10,000, \$25,000, \$50,000, \$100,000, \$250,000 or \$500,000, not to exceed 10.0 times your covered annual earnings for amounts over \$150,000. Please refer to your plan certificate(s) to review the required minimum and maximum coverage amounts allowed.

	\$10,000	\$25,000	\$50,000	\$100,000	\$250,000	\$500,000
Employee	\$0.26	\$0.65	\$1.30	\$2.60	\$6.50	\$13.00

## "How much does this Optional AD&D insurance cost?"

#### Optional AD&D\*7

Coverage is available for 60% of your Optional AD&D Insurance coverage amount for your Spouse/Domestic Partner. Coverage is available 25% of your Optional AD&D Insurance coverage amount to a maximum of \$50,000 for your child(ren).

Insured	Tenthly Cost of Insurance (rates per \$1,000 of Coverage)
Spouse / Domestic Partner	\$0.026
Child(ren)	\$0.026

<sup>\*</sup> This is optional coverage and the entire cost of coverage is employee paid

<sup>&</sup>lt;sup>7</sup> California Residents Coverage is extended to include California Registered Domestic Partners.

Example	
Employee elects \$25,000 in coverage	Tenthly cost is $\$0.*$ ) per month for the employee
Spouse/Domestic Partner eligible for 60% of employee coverage = $$15,000$ in coverage	\$0.39 (\$15,000/1,000 x \$0.026)
Child(ren) eligible for 25% of employee coverage = \$6,250 in coverage	\$0.16 (\$6,250/1,000 x \$0.026)

#### Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

\*Accelerated Death Benefit option is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. The death benefit is reduced by the amount of the accelerated death benefit paid. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered "terminally ill" or "chronically ill." You may wish to seek professional tax advice before exercising this option.

This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").

This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage. If you do not have other health insurance coverage, you may be subject to a federal tax penalty.

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York Department of Financial Services.

#### IMPORTANT NOTICE - THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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