



Summary of Benefits

Voluntary Accidental Death and Dismemberment Benefit Summary

Group ID:	00519289	Member Coverage Type:	Voluntary
Group Name:	MASSEY SHARED SERVICES, LLC	Class:	0002 ALL OTHER ELIGIBLE FULL-TIME EMPLOYEES
Waiting Period:	90 day(s)	As of Date:	10/26/2016

Coverage Information

Employee Volume Amount	<p>Minimum Amount of \$10,000 and Increments of \$10,000 to a maximum of \$500,000</p> <table border="1"> <tr><td>\$10,000</td><td>\$110,000</td><td>\$210,000</td><td>\$310,000</td><td>\$410,000</td></tr> <tr><td>\$20,000</td><td>\$120,000</td><td>\$220,000</td><td>\$320,000</td><td>\$420,000</td></tr> <tr><td>\$30,000</td><td>\$130,000</td><td>\$230,000</td><td>\$330,000</td><td>\$430,000</td></tr> <tr><td>\$40,000</td><td>\$140,000</td><td>\$240,000</td><td>\$340,000</td><td>\$440,000</td></tr> <tr><td>\$50,000</td><td>\$150,000</td><td>\$250,000</td><td>\$350,000</td><td>\$450,000</td></tr> <tr><td>\$60,000</td><td>\$160,000</td><td>\$260,000</td><td>\$360,000</td><td>\$460,000</td></tr> <tr><td>\$70,000</td><td>\$170,000</td><td>\$270,000</td><td>\$370,000</td><td>\$470,000</td></tr> <tr><td>\$80,000</td><td>\$180,000</td><td>\$280,000</td><td>\$380,000</td><td>\$480,000</td></tr> <tr><td>\$90,000</td><td>\$190,000</td><td>\$290,000</td><td>\$390,000</td><td>\$490,000</td></tr> <tr><td>\$100,000</td><td>\$200,000</td><td>\$300,000</td><td>\$400,000</td><td>\$500,000</td></tr> </table>	\$10,000	\$110,000	\$210,000	\$310,000	\$410,000	\$20,000	\$120,000	\$220,000	\$320,000	\$420,000	\$30,000	\$130,000	\$230,000	\$330,000	\$430,000	\$40,000	\$140,000	\$240,000	\$340,000	\$440,000	\$50,000	\$150,000	\$250,000	\$350,000	\$450,000	\$60,000	\$160,000	\$260,000	\$360,000	\$460,000	\$70,000	\$170,000	\$270,000	\$370,000	\$470,000	\$80,000	\$180,000	\$280,000	\$380,000	\$480,000	\$90,000	\$190,000	\$290,000	\$390,000	\$490,000	\$100,000	\$200,000	\$300,000	\$400,000	\$500,000
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Spouse Volume Amount	<p>Minimum Amount of \$10,000 and Increments of \$10,000 to a maximum of \$100,000</p> <table border="1"> <tr><td>\$10,000</td></tr> <tr><td>\$20,000</td></tr> <tr><td>\$30,000</td></tr> <tr><td>\$40,000</td></tr> <tr><td>\$50,000</td></tr> <tr><td>\$60,000</td></tr> <tr><td>\$70,000</td></tr> <tr><td>\$80,000</td></tr> <tr><td>\$90,000</td></tr> <tr><td>\$100,000</td></tr> </table>	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000																																								
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Child Volume Amount	Flat \$10,000																																																		
Member Guaranteed Issue	Your Voluntary Accidental Death and Dismemberment coverage is guaranteed based on your Voluntary Life coverage.																																																		
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Cutbacks	35% at age 70 55% at age 75																																																		

Plan Information

When is my policy effective?	Coverage is effective after you satisfy any waiting period required by your employer. Coverage will not begin until Guardian has approved any amount subject to medical underwriting.
Do I have to answer medical questions as part of purchasing insurance?	If you enroll after the open enrollment period, you must answer some medical questions to help us assess your insurability. Answering "yes" to any of the questions will not necessarily prevent you from obtaining coverage.
Can I take the policy with me if I leave the company?	No

Voluntary Accidental Death and Dismemberment and General Exclusions

We pay no Accidental Death and Dismemberment (AD&D) benefits for an insured where death or dismemberment occurs:

- As the result of a disease or a bodily infirmity
- By declared or undeclared war or act of war or armed aggression, or while a member of any armed force
- May vary by state
- Through intentional self-injury
- While driving without a valid driver's license
- While legally intoxicated
- While participating in civil disorder or committing a felony
- Traveling on any type of aircraft while having any duties on that aircraft
- While voluntarily using a non-prescription controlled substance

*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 365 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. We pay no benefits for any loss caused:

- by willful self injury
- sickness, disease or medical treatment
- by participating in a civil disorder or committing a felony
- by duties performed as a crew member on an aircraft
- by declared or undeclared act of war or armed aggression while a member of any armed force
- while driving a motor vehicle without a current, valid driver's license
- by legal intoxication; or by voluntarily using a non-prescription controlled substance
- Contract #GP-1-R-ADCL1-00 et al



This Benefit Summary is for illustrative purposes. Your benefits booklet will show exactly what is covered and/or excluded under your plan. If there is a discrepancy between this Benefit Summary and your benefit booklet, the benefit booklet prevails.

Definitions shown on this site are in summary form and are for general informational purposes. The terms of the insurance contract prevails.