REQUEST FOR PROPOSALS
(RFP) # FY 2018-2019-005

GROUP LIFE INSURANCE AND ACCIDENTAL DEATH AND
DISMEMBERMENT (AD&D), SUPPLEMENTAL LIFE INSURANCE
AND LONG-TERM DISABILITY INSURANCE
FOR CITY OF HALLANDALE BEACH

EXHIBIT G - LIFE INSURANCE MONTHLY RATES AND
CONTRIBUTIONS AND PLAN SUMMARY

PREPARED BY:
CITY OF HALLANDALE BEACH
HUMAN RESOURCES DEPARTMENT
AND
PROCUREMENT DEPARTMENT
## Group Life Insurance Program

Your employer provides benefit eligible employees Term Life and Accidental Death & Dismemberment (AD&D) Insurance through Securian - administered by Ochs, Inc.

### LIFE and AD&D INSURANCE

Protect yourself and your family from the unexpected loss of life and income during working years. Life Insurance provides a financial benefit to beneficiaries upon death; AD&D Insurance provides additional financial protection if the insured’s death or dismemberment is due to a covered accident, whether it occurs at work or elsewhere.

#### Automatically Enrolled Coverage - employer paid

<table>
<thead>
<tr>
<th>Employee</th>
<th>Basic Term Life and AD&amp;D</th>
<th>$25,000</th>
<th>• Includes a matching AD&amp;D benefit</th>
</tr>
</thead>
</table>

#### Elect Supplemental Coverage - employee paid

<table>
<thead>
<tr>
<th>Employee</th>
<th>Term Life</th>
<th>Elect</th>
<th>up to $500,000 maximum</th>
<th>• Elect in $10,000 increments</th>
</tr>
</thead>
</table>

| Spouse** | Term Life | Elect | up to $250,000 maximum (not to exceed 100% of employee’s total basic & supplemental coverage) | • Elect in $5,000 increments |

| Child    | Term Life | Elect | up to $15,000 on each child | • Elect in $2,500 increments • One premium insures all eligible children from live birth to age 26 |

If your spouse or child is eligible for employee coverage, they cannot be covered as a dependent. Only one employee may cover a dependent child.

**Any reference to spouse includes domestic partner; see your certificate for details.
This is a summary of plan provisions related to the insurance policy issued by Minnesota Life or Securian Life, affiliates of the Securian Financial Group, Inc. In the event of a conflict between this summary and the policy and/or certificate, the policy and/or certificate shall dictate the insurance provisions, exclusions, all limitations, and terms of coverage.

Policy forms are offered under policy form series MHC-96-13180.9.

**Ochs, Inc.**
A Securian Company
400 Robert Street N, Ste. 1880, St. Paul, MN 55101

**Email:** ochs@ochsinc.com
**Phone:** 651-665-3789 • 1-800-392-7295
**Web:** ochsinc.com

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**MONTHLY COST**
**Employee or Spouse Supplemental Term Life**
See rate grid for easy cost calculation.

<table>
<thead>
<tr>
<th>Age</th>
<th>Rate per $1,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25</td>
<td>$0.095</td>
</tr>
<tr>
<td>25-29</td>
<td>$0.095</td>
</tr>
<tr>
<td>30-34</td>
<td>$0.117</td>
</tr>
<tr>
<td>35-39</td>
<td>$0.169</td>
</tr>
<tr>
<td>40-44</td>
<td>$0.241</td>
</tr>
<tr>
<td>45-49</td>
<td>$0.439</td>
</tr>
<tr>
<td>50-54</td>
<td>$0.671</td>
</tr>
<tr>
<td>55-59</td>
<td>$1.001</td>
</tr>
<tr>
<td>60-64</td>
<td>$1.360</td>
</tr>
<tr>
<td>65-69</td>
<td>$2.032</td>
</tr>
<tr>
<td>70-74*</td>
<td>$3.091</td>
</tr>
</tbody>
</table>

*Rates beyond age 74 are available upon request. Rates increase with age and all rates are subject to change.

**ADDITIONAL FEATURES**
- **Waiver of Premium** - If you become totally and permanently disabled, life insurance premiums may be waived.
- **Accelerated Benefit** - If an insured person becomes terminally ill, he/she may be eligible to request early payment of life insurance in force.
- **Take your coverage with you** - If you are no longer eligible for coverage as an active employee, you may be eligible to continue your coverage, if elected during the limited enrollment period. Premiums may be higher than those paid by active employees. Contact your employer or Ochs for information.

**NEWLY HIRED EMPLOYEES**
A special guaranteed issue opportunity is available for newly hired employees during their initial 31 day enrollment period. No evidence of insurability is required for the following guaranteed amounts:
- **Employee** - up to $100,000
- **Spouse** - up to $30,000
- **Child** - all coverage

**Evidence of insurability is required** for elections above the guaranteed amounts.

**ANNUAL ENROLLMENT**
During your employer’s designated annual enrollment period, no evidence of insurability is required for the following **guaranteed amounts**:
- **Child** - all coverage

**Evidence of insurability is required** for elections above the guaranteed amounts and all other elections.

**OTHER ENROLLMENT**
If your policy or employer allows enrollment outside of their designated enrollment periods, **elections will require evidence of insurability.** If you experience a family status change, check with your employer within 31 days to confirm guaranteed issue eligibility.

**ENROLL NOW**
Turn in your completed forms to your employer by the enrollment deadline. Premiums will be automatically deducted from your paycheck.

**BENEFICIARY DESIGNATIONS**
Naming a beneficiary is an important right of life insurance ownership; this determines who receives the death benefit. It is recommended that you review and update your elections periodically.

**Contact Ochs**
ochs@ochsinc.com
651-665-3789 or 1-800-392-7295

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### Employee and Spouse Supplemental Term Life (based on age)

| Coverage | $5,000 | $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 | $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 | $270,000 | $280,000 | $290,000 | $300,000 | $350,000 | $400,000 | $450,000 | $500,000 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Age      | < 25  | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70-74* |
| Rate per $1,000 | $0.095 | $0.095 | $0.117 | $0.169 | $0.241 | $0.439 | $0.671 | $1.001 | $1.360 | $2.032 | $3.091 |
| 4.800 | 6.65 | 8.19 | 9.36 | 11.70 | 11.70 | 14.04 | 13.03 | 12.35 | 10.45 | 14.25 | 9.50 | 9.50 | 11.40 | 12.35 | 13.30 | 14.25 | 15.20 | 16.15 | 17.10 | 18.05 | 19.00 | 19.95 | 20.90 | 21.85 | 22.80 | 23.75 | 24.70 | 25.65 | 26.60 | 27.55 | 28.50 | 33.25 | 38.00 | 42.75 | 47.50 | 353.60 | 326.40 | 312.80 | 285.60 | 258.40 | 250.25 | 232.00 | 216.00 | 192.00 | 168.00 | 144.00 | 120.00 | 96.00 | 72.00 | 48.00 | 24.00 | 12.00 | 6.00 | 3.00 |

*Additional rates available upon request
Rates change according to age brackets.
Rate Grid Private.doc

Rev 4-2018