Enrollment at a Glance

A Guide to Your Plan Basics

Clermont Board of County Commissioners

**Take advantage of insurance offered at your workplace.
It's convenient and affordable.**

Life Insurance provides basic protection for your loved ones if something happens to you. While many U.S. households have life insurance, the average amount of coverage is often inadequate to meet family needs or pay off debt. Taking advantage of life insurance coverage offered by Clermont Board of County Commissioners can be an important part of your financial security.

Clermont Board of County Commissioners provides you with Basic Life Insurance coverage and Accidental Death and Dismemberment Insurance in the amount of $25,000. Eligible employees may apply for more coverage in the Supplemental Group Term Life Insurance program.

Supplemental Term Life Insurance

Your Life Insurance Benefits include:

***Convenient Payroll Deductions** (Applicable for Supplemental Life Only)* – Since deductions are taken directly from your paycheck, you never have to worry about late payments or lapse notices.

***"Take it With You"** (Applicable for Supplemental Life Only* – The portability option allows for continued coverage that can help protect your family even when your current employment ends.

Waiver of Premium – If you become totally disabled prior to age 60, your life insurance premium may be waived if you satisfy certain conditions as defined by the policy.

Accelerated Benefit – You may collect a portion of your death benefit (typically 80%) while you are living, if you are diagnosed with a terminal condition with a limited life expectancy under six months (may vary by state).

Refer to the information on the following pages to learn more about Supplemental Group Term Life Insurance options and determine your coverage cost.

Supplemental Term Life Insurance Coverage Options

Review the information below to learn about the Life Insurance coverage options available.

	For You	*For Your Spouse*	*For Your Children*[1]
Eligibility	All Eligible Employees working 35+ hours per week. No minimum hours required for Elected Officials.	Coverage is available only if Employee Supplemental Life Insurance is elected.	Coverage is available only if Employee Supplemental Life Insurance is elected.
Coverage Options	$10,000 to $250,000 in $10,000 increments. The amount chosen cannot exceed 5 times your annual salary.	$10,000 to $100,000 in $10,000 increments. Coverage is limited to 100% of the total amount of Employee Supplemental Life Insurance coverage.	$5,000 to $20,000 in $5,000 increments on your children age 14 days to 19 years, and full-time students to 25 years.
Guaranteed Issue Offer*	*New Hire* – If you are less than age 60, you can elect up to $150,000 or 5 times your annual salary, whichever is less, of coverage without providing proof of good health during the initial eligibility period. If you are age 60 or older, you can elect up to $75,000 or 5 times your annual salary, whichever is less of coverage without providing proof of good health during the initial eligibility period.	*New Hire* – You can elect up to $50,000 of coverage without providing proof of good health on your spouse during the initial eligibility period.	*New Hire* – You can elect up to $20,000 of coverage without providing proof of good health on your children during the initial eligibility period.
Supplemental Accidental Death & Dismemberment Insurance	Coverage in an amount equal to your approved Employee Supplemental Life Insurance.	Coverage in an amount equal to their approved Dependent Spouse Supplemental Life Insurance.	Coverage in an amount equal to their approved Dependent Children Supplemental Life Insurance.
Age Reduction(s)	Not applicable	Not applicable.	Not applicable.

[1]Contact your employer if you have questions about the definitions of "child" for your plan.

Subject to a combined Basic Life, Supplemental Life and Accidental Death & Dismemberment Insurance plan maximum of $275,000.

Accidental Death & Dismemberment coverage has exclusions that are described in the certificate of coverage.

*Proof of good health is required if you elect Supplemental Life Insurance coverage in amounts in excess of the limits described above, or you submit an application for coverage more than 31 days after the date you become eligible. Subject to approval by the insurance company.

Insurance Rate Information and Premium Calculator

The cost is calculated based on the age of the employee at the start of the plan's current policy year.

The rates shown are guaranteed through 12/31/2015.

Employee and Spouse Supplemental Life Insurance Rates	
Age	**Monthly Cost per $1,000 of Coverage**
Under 35	$0.06
35-39	$0.10
40-44	$0.14
45-49	$0.204
50-54	$0.324
55-59	$0.528
60-64	$0.748
65-69	$1.24
70-74	$2.26
75 +	$4.608

Supplemental Accidental Death and Dismemberment (AD&D) Insurance Rates	
Coverage Type	**Monthly Cost per $1,000 of Coverage**
Employee Supplemental AD&D	$0.02
Dependent Spouse Supplemental AD&D	$0.02
Dependent Children Supplemental AD&D	$0.02

Dependent Children Life Insurance Rate	
Coverage Levels	**Monthly Cost per $1,000 of coverage**
$1,000 each child	$0.10

Clermont County

2013 Voluntary Life and Accidental Death Dismemberment Insurance Rates

GI (GUARANTEED ISSUE): Is the amount of insurance you can obtain as a new hire without submitting medical information.
GI Amount Maximums: Employee = $150,000 (but not more than 5x annual salary); Spouse = $50,000 (spouse and child coverage amount cannot be higher than the employees).

ADDITIONAL COVERAGE: You may apply for additional coverage, up to $250,000* (but not more than 5x your annual salary) for yourself and up to $100,000* for your spouse. An 'EOI' (Evidence of Insurability / medical disclaimer) form must be submitted for each person applying for coverage over the GI amount. EOI forms can be obtained from the County's Employee Benefits web site. *Coverage over the GI amount will become effective only after approval is received from ING.

The rates shown are based on semi-monthly (2 pays per month / 24 pays per calendar year).

Age	Mthly Rate per $1000	Coverage amounts available for employees and spouses.										Available for employees only		
		$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
Less than 35	0.0800	$0.40	$0.80	$1.20	$1.60	$2.00	$2.40	$2.80	$3.20	$3.60	$4.00	$4.40	$4.80	$5.20
35- 39	0.1200	$0.60	$1.20	$1.80	$2.40	$3.00	$3.60	$4.20	$4.80	$5.40	$6.00	$6.60	$7.20	$7.80
40 - 44	0.1600	$0.80	$1.60	$2.40	$3.20	$4.00	$4.80	$5.60	$6.40	$7.20	$8.00	$8.80	$9.60	$10.40
45- 49	0.2240	$1.12	$2.24	$3.36	$4.48	$5.60	$6.72	$7.84	$8.96	$10.08	$11.20	$12.32	$13.44	$14.56
50 - 54	0.3440	$1.72	$3.44	$5.16	$6.88	$8.60	$10.32	$12.04	$13.76	$15.48	$17.20	$18.92	$20.64	$22.36
55 - 59	0.5480	$2.74	$5.48	$8.22	$10.96	$13.70	$16.44	$19.18	$21.92	$24.66	$27.40	$30.14	$32.88	$35.62
60 - 64	0.7680	$3.84	$7.68	$11.52	$15.36	$19.20	$23.04	$26.88	$30.72	$34.56	$38.40	$42.24	$46.08	$49.92
65 - 69	1.2600	$6.30	$12.60	$18.90	$25.20	$31.50	$37.80	$44.10	$50.40	$56.70	$63.00	$69.30	$75.60	$81.90
70 - 74	2.2800	$11.40	$22.80	$34.20	$45.60	$57.00	$68.40	$79.80	$91.20	$102.60	$114.00	$125.40	$136.80	$148.20
75+	4.6280	$23.14	$46.28	$69.42	$92.56	$115.70	$138.84	$161.98	$185.12	$208.26	$231.40	$254.54	$277.68	$300.82

Age	Mthly Rate per $1000	Employees only											
		$140,000	$150,000	$160,000	$170,000	$180,000	$190,000	$200,000	$210,000	$220,000	$230,000	$240,000	$250,000
Less than 35	0.0800	$5.60	$6.00	$6.40	$6.80	$7.20	$7.60	$8.00	$8.40	$8.80	$9.20	$9.60	$10.00
35- 39	0.1200	$8.40	$9.00	$9.60	$10.20	$10.80	$11.40	$12.00	$12.60	$13.20	$13.80	$14.40	$15.00
40 - 44	0.1600	$11.20	$12.00	$12.80	$13.60	$14.40	$15.20	$16.00	$16.80	$17.60	$18.40	$19.20	$20.00
45- 49	0.2240	$15.68	$16.80	$17.92	$19.04	$20.16	$21.28	$22.40	$23.52	$24.64	$25.76	$26.88	$28.00
50 - 54	0.3440	$24.08	$25.80	$27.52	$29.24	$30.96	$32.68	$34.40	$36.12	$37.84	$39.56	$41.28	$43.00
55 - 59	0.5480	$38.36	$41.10	$43.84	$46.58	$49.32	$52.06	$54.80	$57.54	$60.28	$63.02	$65.76	$68.50
60 - 64	0.7680	$53.76	$57.60	$61.44	$65.28	$69.12	$72.96	$76.80	$80.64	$84.48	$88.32	$92.16	$96.00
65 - 69	1.2600	$88.20	$94.50	$100.80	$107.10	$113.40	$119.70	$126.00	$132.30	$138.60	$144.90	$151.20	$157.50
70 - 74	2.2800	$159.60	$171.00	$182.40	$193.80	$205.20	$216.60	$228.00	$239.40	$250.80	$262.20	$273.60	$285.00
75+	4.6280	$323.96	$347.10	$370.24	$393.38	$416.52	$439.66	$462.80	$485.94	$509.08	$532.22	$555.36	$578.50

OPEN ENROLLMENT: **Employees with existing coverage may elect to increase their employee and/or spouse coverage up to $20,000, and child life by $5,000 (up to the max allowed w/o an EOI) on January 1st of each year, during the period that cooincides with open enrollment. Must complete an EOI form to be submitted to ING for increases of more than $20,000 and/or over the GI.**

NOTE: The per pay rate to cover your children is the same no matter how many children are covered

Children:			
$5,000	$10,000	$15,000	$20,000
$0.30	$0.60	$0.90	$1.20

NOTE: After 1/1/2013 an EOI will be required for anyone picking up any level of new coverage other than new hires.