

Life and AD&D Insurance Benefits

Benefits are provided by Aetna

The State of Nebraska offers both life and accidental death and dismemberment (AD&D) insurance coverage to employees. Newly hired employees may elect any supplemental coverage amount within the first 30 days of employment without having to provide evidence of insurability.

Open Enrollment Only

If you are currently enrolled in supplemental life insurance coverage, you may increase your coverage level by one increment without providing evidence of insurability.

Basic Life Insurance

The State provides eligible full-time employees with a basic life insurance benefit of \$20,000 at no cost. Part-time employees are eligible for the \$20,000 insurance benefit and pay 50% of the monthly rate. The part-time rate is \$0.48 per month.

Accidental Death & Dismemberment Insurance(AD&D) – Employee Only

AD&D insurance pays benefits if you die or suffer certain serious injuries as a result of an accident. The AD&D benefit is paid based upon the type of loss you suffer.

AD&D Information

Rate	\$0.10/month
Coverage	Up to \$5,200

* Dependent coverage is not available.

Supplemental Employee Life Insurance

You may elect to purchase additional life insurance coverage for yourself. Coverage can be purchased in increments of one-half, 1, 1.5, 2, 3, 4, or 5 times your annual salary. Amounts will be rounded to the next highest \$1,000. Employees pay the entire cost for supplemental life insurance through a payroll deduction. **Employee supplemental life rates are based on your age and salary as of July 1 of each year.**

During open enrollment, employees may increase supplemental life coverage by one increment without approval by the carrier. Any increases outside of the Open Enrollment period, or any increases greater than one increment, will require evidence of insurability and approval by the carrier.

Supplemental Life Coverage - Monthly Rates

Age	Rate/\$1,000
Under 25	\$0.024
25-29	\$0.024
30-34	\$0.032
35-39	\$0.049
40-44	\$0.073
45-49	\$0.105
50-54	\$0.178
55-59	\$0.381
60-64	\$0.729
65-69	\$1.191
70-74	\$1.620
75-79	\$3.677
80 and over	\$7.444

Supplemental Life Insurance – Dependent

You may also purchase optional life insurance for your spouse and dependent child(ren) up to age 26. There are two dependent life options to choose from and both include coverage for spouse and your child(ren) but vary by spouse's age.

Dependent Supplemental Life Insurance Monthly Rates

	Option 1 (Low) Spouse &/or Child(ren) \$5,000 Policy	Option 2 (High) Spouse &/or Child(ren) \$10,000 Policy
If Spouse under age 70	\$1.54	\$3.00
If Spouse 70 or older	\$4.10	\$8.22



NOTE: If both husband and wife are employed by the State, only one may cover the children on the State's supplemental dependent life coverage. Also, they cannot elect dependent life coverage on each other.



Accelerated Death Benefit

The voluntary group life insurance plan offers an “Accelerated Death Benefit” that allows you to receive a partial life insurance benefit if you are:

- Diagnosed with a terminal illness and not expected to survive more than 24 months; or
- Diagnosed with one of the following medical conditions:
 - Amyotrophic Lateral Sclerosis (Lou Gehrig’s disease);
 - End stage heart, kidney, liver and/or pancreatic organ failure and you are not a transplant candidate;
 - A medical condition requiring artificial life support, without which you would die; or
 - A permanent neurological deficit resulting from a cerebral vascular accident (stroke) or a traumatic brain injury which are both expected to result in life-long confinement in a hospital or skilled nursing facility.

The Amount of Accelerated Death Benefit

You can request up to the Accelerated Death Benefit percentage or 75% of the life insurance that is currently in effect however not:

- Less than \$5,000 or
- More than \$500,000

Requesting an Accelerated Death Benefit

To request the Accelerated Death Benefit, you must complete and submit a request form to Aetna. The request form must include:

- A statement of the amount requested; and
- A **physician’s** statement verifying that you are suffering from a non-correctable terminal illness, or, are suffering from one of the listed medical conditions that is expected to result in a drastically limited life span. The statement must also provide the following information:
 - All medical test results;
 - Laboratory reports; and
 - All supporting documentation and information on which the physician’s statement is based.

Your human resource partner will be able to assist with the completion/submission of the “Accelerated Death Benefit” claim form.

NOTES:

