



# Voluntary Term Life Insurance

FOR EMPLOYEES OF CITY OF FARGO

ELIGIBILITY - ALL ELIGIBLE EMPLOYEES						
Eligibility Requirement		You must be actively working a minimum of 20 hours per week to be eligible for coverage.				
Dependent Eligibility Requirement		To be eligible for coverage, your dependents must be able to perform normal activities, and not be confined (at home, in a hospital, or in any other care facility), and any child(ren) must be under age 26. In order for your spouse and/or children to be eligible for coverage, you must elect coverage for yourself.				
Premium Paymen	t	The premiums for this insurance are paid in full by you.				
COVERAGE GUID	DELINES					
Mini		imum	Guarantee Issue	Maximum		
For You	\$10,000		10 times annual salary, up to \$200,000	\$200,000, in increments of \$10,000, but no more than 10 times annual salary		
Spouse	\$5,000		100% of employee's benefit, up to \$50,000	50% of employee's benefit, up to \$100,000		
Children	\$10,000		100% of employee's benefit	50% of employee's benefit, up to \$10,000		

Subject to any reductions shown below. Guarantee Issue is available to new hires. Amounts over the Guarantee Issue will require a health application/evidence of insurability. For late entrants, all amounts will require a health application/evidence of insurability.

BENEFITS	
Life Insurance Benefit Amount	Within the coverage guidelines defined above, you select the amount of life insurance coverage you want.
	This plan includes the option to select coverage for your spouse and dependent children. Children include those, up to age 26.
	In the event of death, the benefit paid will be equal to the benefit amount after any age reductions less any living care/accelerated death benefits previously paid under this plan.
Accidental Death &	For you, your spouse and your dependent child(ren): The Principal Sum amount is equal to the amount of the life insurance benefit.
Dismemberment (AD&D) Benefit Amount	AD&D coverage is available if you or your dependents are injured or die as a result of an accident, and the injury or death is independent of sickness and all other causes. The benefit amount depends on the type of loss incurred, and is either all or a portion of the Principal Sum.
FEATURES	
Living Care/ Accelerated Death Benefit	50% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$100,000.
Waiver of Premium	If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions.
Annual Benefit Amount Increase	If you enroll for even the minimum amount of coverage during your initial enrollment, you have the ability to enroll for additional coverage at your next enrollment by up to \$10,000, provided the total amount of insurance does not exceed your maximum benefit amount. This feature allows you to secure additional life insurance protection in the event your needs change (ex. you get married or have a child). Amounts over the Guarantee Issue will require evidence of insurability (information about your health).
Additional AD&D Benefits	In addition to basic AD&D benefits, you are protected by the following benefits: - Seat Belt - Airbag

Conversion	If your employment ends, you may apply for an individual life insurance policy from Mutual of Omaha without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.
SERVICES	
Travel	The Travel Assistance program is an added benefit that provides assistance for your travels over
Assistance	100 miles away from home or outside the country.
Hearing	The Hearing Discount Program provides you and your family discounted hearing products,
Discount	including hearing aids and batteries. Call 1-888-534-1747 or visit
Program	www.amplifonusa.com/mutualofomaha to learn more.
Will Prep	We work with Willing® to offer employees discounted online will preparation tools. In just a few clicks you can complete a customized plan to protect your family and property (valid in all 50 states). To get started visit <a href="https://www.willing.com/mutualofomaha">www.willing.com/mutualofomaha</a>
AGE REDUCTIC	INS AND EXCLUSIONS
Insurance benefi	ts and guarantee issue amounts are subject to age reductions:
- At age 70, am	nounts reduce to 65%
- At age 75, am	nounts reduce to 45%
- At age 80, am	nounts reduce to 30%
- At age 85, am	nounts reduce to 20%
- At age 90, am	nounts reduce to 15%
Spouse coverage	e terminates when you reach age 70.

Life insurance benefits will not be paid if the insured's death is the result of suicide within one year from the date coverage begins. If this occurs, the sum of the premiums paid will be returned to the beneficiary. The same applies for any future increases in coverage under this plan.

Information about the AD&D exclusions for this plan will be included in the summary of coverage, which you will receive after enrolling.

Please contact your employer if you have questions prior to enrolling.

# Voluntary Term Life and AD&D Coverage Selection and Premium Calculation

Please note that the premium amounts presented below may vary slightly from the amounts provided on your enrollment form, due to rounding.

# To select your benefit amount and calculate your premium, do the following:

- Locate the benefit amount you want from the top row of the employee premium table. Your benefit amount must be in an increment of \$10,000. Refer to the Coverage Guidelines section for minimums and maximums, if needed.
- 2) Find your age bracket in the far left column.

- 3) Your premium amount is found in the box where the row (your age) and the column (benefit amount) intersect.
- Enter the benefit and premium amounts into their respective areas in the Voluntary Life and AD&D section of your enrollment form.

If the benefit amount you want to select is greater than any amount in the table below, select the benefit amount from the top row that when multiplied by another number results in the benefit amount you want. For example, if you want \$150,000 in coverage, you obtain your premium amount by multiplying the rate for \$50,000 times 3.

	EMPLOYEE PREMIUM TABLE (12 PAYROLL DEDUCTIONS PER YEAR)									
Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
0 - 34	\$0.70	\$1.40	\$2.10	\$2.80	\$3.50	\$4.20	\$4.90	\$5.60	\$6.30	\$7.00
35 - 39	\$0.80	\$1.60	\$2.40	\$3.20	\$4.00	\$4.80	\$5.60	\$6.40	\$7.20	\$8.00
40 - 44	\$1.20	\$2.40	\$3.60	\$4.80	\$6.00	\$7.20	\$8.40	\$9.60	\$10.80	\$12.00
45 - 49	\$1.90	\$3.80	\$5.70	\$7.60	\$9.50	\$11.40	\$13.30	\$15.20	\$17.10	\$19.00
50 - 54	\$2.90	\$5.80	\$8.70	\$11.60	\$14.50	\$17.40	\$20.30	\$23.20	\$26.10	\$29.00
55 - 59	\$4.50	\$9.00	\$13.50	\$18.00	\$22.50	\$27.00	\$31.50	\$36.00	\$40.50	\$45.00
60 - 64	\$7.00	\$14.00	\$21.00	\$28.00	\$35.00	\$42.00	\$49.00	\$56.00	\$63.00	\$70.00
65 - 69	\$12.20	\$24.40	\$36.60	\$48.80	\$61.00	\$73.20	\$85.40	\$97.60	\$109.80	\$122.00
70 - 74	\$22.00	\$44.00	\$66.00	\$88.00	\$110.00	\$132.00	\$154.00	\$176.00	\$198.00	\$220.00
75 - 79	\$36.10	\$72.20	\$108.30	\$144.40	\$180.50	\$216.60	\$252.70	\$288.80	\$324.90	\$361.00
80+	\$73.00	\$146.00	\$219.00	\$292.00	\$365.00	\$438.00	\$511.00	\$584.00	\$657.00	\$730.00

Follow the method described above to select a benefit amount and calculate premiums for optional dependent spouse and/or child(ren) coverage. **Your spouse's rate is based on your age,** so find your age bracket in the far left column of the Spouse Premium Table. Your spouse's premium amount is found in the box where the row (the age) and the column (benefit amount) intersect. Your spouse's benefit amount must be in an increment of \$5,000. Refer to the Coverage Guidelines section for minimums and maximums, if needed.

	SPOUSE PREMIUM TABLE (12 PAYROLL DEDUCTIONS PER YEAR)									
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
0 - 34	\$0.35	\$0.70	\$1.05	\$1.40	\$1.75	\$2.10	\$2.45	\$2.80	\$3.15	\$3.50
35 - 39	\$0.40	\$0.80	\$1.20	\$1.60	\$2.00	\$2.40	\$2.80	\$3.20	\$3.60	\$4.00
40 - 44	\$0.60	\$1.20	\$1.80	\$2.40	\$3.00	\$3.60	\$4.20	\$4.80	\$5.40	\$6.00
45 - 49	\$0.95	\$1.90	\$2.85	\$3.80	\$4.75	\$5.70	\$6.65	\$7.60	\$8.55	\$9.50
50 - 54	\$1.45	\$2.90	\$4.35	\$5.80	\$7.25	\$8.70	\$10.15	\$11.60	\$13.05	\$14.50
55 - 59	\$2.25	\$4.50	\$6.75	\$9.00	\$11.25	\$13.50	\$15.75	\$18.00	\$20.25	\$22.50
60 - 64	\$3.50	\$7.00	\$10.50	\$14.00	\$17.50	\$21.00	\$24.50	\$28.00	\$31.50	\$35.00
65 - 69	\$6.10	\$12.20	\$18.30	\$24.40	\$30.50	\$36.60	\$42.70	\$48.80	\$54.90	\$61.00

ALL CHILDREN PREMIUM TABLE (12 PAYROLL DEDUCTIONS PER YEAR)*
\$10,000
\$1.10

\*Regardless of how many children you have, they are included in the "All Children" premium amounts listed in the table above.

# **UNITED OF OMAHA LIFE INSURANCE COMPANY**

A Mutual of Omaha Company





Life Insurance

HELP PROTECT WHAT MATTERS - YOU, YOUR FAMILY & YOUR FUTURE

Life insurance is a simple answer to a very difficult question: How will my loved ones manage financially when I die? It's a subject no one really wants to think about. But, if someone depends on you financially, it's one question you cannot avoid.

# **PROTECTION FOR EVERY STAGE OF YOUR LIFE**

Whether you're single, married, have children or are close to retirement, having life insurance is a must. Life insurance pays benefits to your loved ones after you die, replacing your income and allowing the financial plans you put in place to continue uninterrupted.

When determining how much life insurance you need, think about the expenses you may encounter through every stage of your life. Consider:

## FINAL EXPENSES & OTHER DEBT

- Funeral costs and final medical expenses
- Mortgage and credit card debt
- Taxes and estate settlement costs

#### ONGOING EXPENSES

- Food and clothing
- · Housing and utilities
- Transportation
- Health care
- Insurance

#### FUTURE EXPENSES

- College
- Retirement

#### **HOW MUCH IS ENOUGH?**

The toughest part of buying life insurance is determining how much you need. The amount of life insurance you need depends on your personal situation and financial goals. No matter what your current life stage, life insurance is there to help protect your family financially – *even if you can't*.

INCOME REPLACEMENT & ASSETS	
Annual income your loved ones need now and in the future	\$
(Current income multiplied by number years needed – for example: \$50k x 5 years = \$250,000)	
Subtotal (Income) =	= \$
FINAL EXPENSES & OTHER DEBT	
Funeral Expenses (\$15,000 is a reasonable estimate)	\$
Mortgage	\$
<b>Credit Card and other debt</b> (Balance, car loans, etc)	\$
Subtotal (Debt) =	= \$
EDUCATIONAL FUNDS	
<b>College costs per person</b> (4 years at Private \$118,000/ Public \$48,000 institution)	\$
Subtotal (Education) =	= \$
TOTAL LIFE INSURANCE NEEDED	
Income + Debt + Education =	
Total Need For Life Insurance	



Life insurance is underwritten by United of Omaha Life Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175, 1-800-769-7159. Policy form number 7000GM-U-EZ 2010 or state equivalent (7000GM-U-EZ 2010 NC). United of Omaha is licensed nationwide, except in New York. Some exclusions, limitations and reductions may apply.





# Long-Term Disability Insurance

FOR EMPLOYEES OF CITY OF FARGO

ELIGIBILITY - ALL	ELIGIBLE EMPLOYEES
Eligibility Requirement	You must be actively working a minimum of 20 hours per week to be eligible for coverage.
Premium Payment	The premiums for this insurance are paid in full by the policyholder. There is no cost to you for this insurance.
BENEFITS	
Elimination Period	Your benefits begin on the later of 120 calendar days after the onset of your disabling injury or illness or the date your short term disability ends.
Monthly Benefit	Your benefit is equivalent to 60% of your before-tax monthly earnings, not to exceed the plan's maximum monthly benefit amount less other income sources.
	The premium for your long-term disability coverage is waived while you are receiving benefits.
Maximum Monthly Benefit	\$10,000
Minimum Monthly Benefit	\$100/10%
Maximum Benefit Period	If you become disabled prior to age 62, benefits are payable to age 65, your Social Security Normal Retirement Age or 3.5 years, whichever is longest. At age 62 (and older), the benefit period will be based on a reduced duration schedule.
Partial Disability Benefits	If you become disabled and can work part-time (but not full-time), you may be eligible for partial disability benefits.
DEFINITIONS	
Own Occupation	2 Years
Own Occupation Earnings Test	99%
Definition of Monthly Earnings	Monthly earnings for salaried employees is the gross annual salary in effect immediately prior to the date disability begins, divided by 12. Monthly earnings for hourly employees is the hourly rate of pay multiplied by the average number of hours worked during the 12 month period immediately prior to the date disability begins. If employed for part of the prior 12 month period, monthly earnings is the hourly rate of pay multiplied by the average number of hours worked.
FEATURES	
Vocational Rehabilitation Benefit	If you become disabled and participate in the vocational rehabilitation program, you will be eligible for a monthly benefit increase of 10%.
Survivor Benefit	If you pass away while receiving disability benefits, a lump sum equal to 3 times your monthly benefit will be paid to your eligible survivor.
Enhanced Disability	Provides additional benefits to you if you are unable to perform at least two of five activities of daily living (ADLs).
Portability	The portability feature allows you to apply for disability insurance through a trust policy should your employment end, without having to provide evidence of insurability. You will be responsible for paying the premium for coverage.
SERVICES	
Travel Assistance	The Travel Assistance program is an added benefit that provides assistance for your travels over 100 miles away from home or outside the country.

Employee Assistance Program (EAP)	The EAP program provides you and your loved ones access to trained professionals and resources for assistance with personal and workplace issues.
Hearing Discount Program	The Hearing Discount Program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit <a href="http://www.amplifonusa.com/mutualofomaha">www.amplifonusa.com/mutualofomaha</a> to learn more.

# **EMPLOYEE ASSISTANCE PROGRAM**

When it's difficult to cope with problems, we often turn to family or friends for support. Unfortunately, sometimes that is not enough. Sometimes we need the ear of an experienced professional, one who will keep our concerns confidential and help guide us in the right direction.

Mutual of Omaha's Employee Assistance Program (EAP) has trained professionals to work with you as you search for solutions to personal and workplace issues.

EAP is paid for by your company and is available to help you deal with a variety of personal and professional issues. Staff members are highly trained, master's-level professionals with experience in family, personal, work-related and substance abuse issues. The program is voluntary and confidential; only your EAP professional will know you have called.

# FOR FAMILY MEMBERS, TOO

MUGC8223

Our staff understands that your family members also may benefit from speaking with an EAP professional. That's why the program is available to both you and your immediate dependent family members. Give each family member a copy of the EAP wallet card, below, so they'll have EAP contact information available at all times.

# **PROGRAM SERVICES**

Mutual of Omaha's EAP professionals have experience dealing with a variety of personal and professional issues, including:

- Stress
- Resiliency
- Depression
- Gambling and other addictive behavior
- Parenting
- Financial issues
- Life changes
- Relationship issues
- Drug/alcohol abuse
- Mental health
- Grief issues
- Balancing work and home
- Consultation personal, family and work issues

# DON'T DELAY - CALL TODAY

EAP professionals want to help you work through your concerns with an objective point of view. Start today by calling an EAP professional.

EAP staff members are available 24 hours a day, 7 days a week, every day of the year by calling 1-800-316-2796. If you would benefit from speaking with a professional face to face, the EAP staff can help you find appropriate resources in your area.

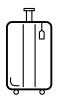
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Mutual of Omaha's Employee Assistance Program	Confidential, professional help, 24 hours a day Stress/depression Resiliency
Professional, confidential, quality assistanceanytime	<ul> <li>Financial issues</li> <li>Family/relationship issues</li> <li>Drug/alcohol abuse</li> </ul>
<b>1-800-316-2796</b> mutualofomaha.com/eap	<ul> <li>Grief issues</li> <li>Other personal concerns</li> <li>MUGC8223-</li> </ul>

Fold Here

You will not see this benefit on your enrollment form.



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# Worldwide Travel Assistance and Identity Theft Protection for You and Your Family

Travel Assistance can help you avoid unexpected bumps in the road anywhere in the world. For you, your spouse and dependent children on any single trip up to 120 days in length, and more than 100 miles from home.

# PRE-TRIP ASSISTANCE\*

Minimize travel hassles by calling us pre-departure for:

- Information regarding passport and other documentation needs
- Travel, health advisories and inoculation requirements for foreign countries
- · Daily foreign currency exchange rates
- Consulate and embassy locations

### IMMEDIATE ATTENTION FOR EMERGENCIES WHILE TRAVELING

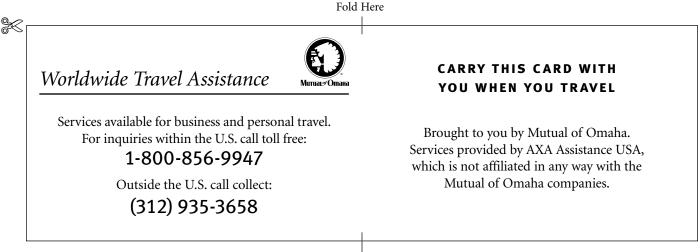
While traveling more than 100 miles from home, call Travel Assistance toll-free 24/7 for immediate help from a multi-lingual professional.

\*Available at any time, not subject to 100 mile travel radius

## EMERGENCY TRAVEL SUPPORT SERVICES

- **Translation and interpreter services** 24/7 access to translators or interpreters
- **Locating legal services** referrals for local attorney or consular offices and help maintaining business and family communications until legal counsel is retained (includes coordination of financial assistance for bonds/bail)
- **Baggage** assistance with lost, stolen or delayed baggage while traveling on a common carrier
- Emergency payment and cash assistance with advance of funds for medical expenses or other travel emergencies by coordinating with your credit card company, bank, employer, or other sources of credit; includes arrangements for emergency cash from a friend, family member, business or credit card
- **Emergency messages** assistance with recording and retrieving messages between you, your family and/or business associates at any time
- **Document replacement** coordination of credit card, airline ticket, or other documentation replacement
- Vehicle return if evacuation or repatriation is necessary

MUGC9550



#### MEDICAL ASSISTANCE

- · Locating medical providers and referrals
- Communication on your medical status with family, physicians, employer, travel company and consulate
- Emergency evacuation if adequate medical facilities are not available, including payment of covered expenses
- Transportation home for further treatment in the event of death, assist in the return of mortal remains
- Transportation arrangements for the visit of a family member or friend if your hospitalization is more than seven calendar days
- Return home for dependent children if your hospitalization is more than seven calendar days
- Assistance with lodging arrangements if convalescence is needed prior to, or after, medical treatment
- Coordination with your health insurance carrier during a medical emergency
- Assistance obtaining prescription drugs or other necessary personal medical items

# TRAVEL ASSISTANCE PLAN LIMITATIONS

AXA Assistance USA will not pay emergency evacuation, medically necessary repatriation, repatriation of remains or other expenses incurred while traveling within 100 miles of participant's place of residence, or for any one of the following reasons:

- Traveling against the advice of a physician
- Traveling for medical treatment
- Pregnancy and childbirth (exception: complications of pregnancy)

Expenses for emergency evacuation, medically necessary repatriation, repatriation of remains, return of dependent children, family or friend transportation arrangement and vehicle return are covered up to \$200,000 per person per event.

# **IDENTITY THEFT**

Your Travel Assistance benefit automatically includes Identity Theft Assistance, coordinated at no additional cost. Whether at home or traveling, this benefit provides education, prevention and recovery information to help you protect your identity.

# EDUCATION AND PREVENTION

- Comprehensive ID theft assistance guide
- Tips to defend against ID theft

# **RECOVERY INFORMATION**

- Information regarding the steps to recover from credit card and check fraud
- Guidelines if your Social Security number is compromised
- Instructions for lost or stolen passport
- Contact list for financial institutions, credit bureaus and check companies

### ASSISTANCE

If you need help with an ID theft issue, case managers are available 24 hours a day, seven days a week and can be reached by calling the same toll-free number used to contact AXA: 800-856-9947.