

Plan Highlights

Voluntary Group Term Life Insurance



Broward County Professional Paramedics & Firefighters Benefit Fund

ELIGIBILITY

Employees: Each Active, Full-time employee working 30 or more hours per week, except any person working on a temporary or seasonal basis.

Dependents: You or your spouse must be insured in order for Dependent children to be covered.

Dependents are:

- Your legal spouse under age 70.
- Your unmarried financially dependent children* age 14 days to 20 years (to 26 years if full-time student).

*natural and adopted children upon finalization of adoption; stepchildren and foster children living with you.

Upper age limits do not apply to handicapped children.

A person may not have coverage as both an Employee and Dependent.

Only one insured spouse may cover Dependent children.

BENEFIT AMOUNT

Employee and Spouse: Choose from a minimum of \$10,000 to a maximum of \$100,000 (in \$10,000 increments) for yourself and/or your spouse. The benefit amounts chosen need not be the same.

Eligible Dependent Child(ren): Age 14 days to 6 months: \$1,000

Age 6 months to 20 years of age (26, if full-time student): choice of

\$2,500, \$5,000; \$7,500 or \$10,000

Choose one benefit amount for all eligible children in family.

GUARANTEE ISSUE (INITIAL ELIGIBILITY PERIOD ONLY)

Employee:

Under age 60: \$100,000

Age 60 but under age 70: \$10,000

Age 70 or older: none

Spouse:

Under age 60: \$20,000

Age 60 or older: none

Guarantee Issue is subject to underwriting rules and is not available in all circumstances.

CONTRIBUTION REQUIREMENTS

Coverage is employee paid.

RATE

See attached Rate Sheet.

BENEFIT REDUCTION DUE TO AGE

Age Original Benefit Reduced to:

75	60%
80	35%
85	27.5%
90	20%
95	7.5%
100	5%

FEATURES

- Living Benefit Rider (expressed as Accelerated Death Benefit in some states and Imminent Death Benefit in PA)
- Conversion Privilege
- FMLA/MSLA Continuation
- Portability
- Waiver of Premium

EXCLUSIONS

Death by suicide is not covered during the first two years an insured's insurance is in force. Insurance coverage is incontestable after it has been in force two years during the insured's lifetime, except for non-payment of premium.

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for coverage and benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-8349, et al.

**Reliance Standard Voluntary Plans
Voluntary Group Term Life Insurance
Premium Table**

**Plan Holder: Broward County Professional Paramedics & Firefighters Benefit
Fund - VG # 181874**

Scheduled Benefit: Each eligible employee may elect for himself and/or his eligible spouse an amount of insurance shown in the Table below.

For employees age 75 and older:

Benefit amounts are reduced according to the age-based reduction chart shown in the Voluntary Term Life brochure. When selecting an amount of insurance, you must select a pre-age 75 benefit amount.

Employee/Spouse Premiums:

To find you and your spouse's premium -

- Determine your age band: Your age = your age at your last birthday.
- Select a benefit amount (employees age 75 and older: see above comment - do not select a calculated reduced amount).
- Spouse premium: Repeat the steps above for your spouse at his/her age at his/her last birthday. Your spouse must be under age 70 to be enrolled.
- Employee and spouse rates change as insured moves from one age bracket to the next.

Biweekly Premiums

Benefit Amount	Age 00-29	Age 30-34	Age 35-39	Age 40-44	Age 45-49	Age 50-54	Age 55-59	Age 60-64	Age 65-69	Age 70+
\$10,000	\$0.40	\$0.41	\$0.56	\$0.87	\$1.35	\$2.11	\$3.67	\$4.08	\$6.94	\$12.33
\$20,000	\$0.80	\$0.81	\$1.13	\$1.74	\$2.70	\$4.22	\$7.34	\$8.17	\$13.87	\$24.66
\$30,000	\$1.20	\$1.22	\$1.69	\$2.60	\$4.06	\$6.33	\$11.01	\$12.25	\$20.81	\$37.00
\$40,000	\$1.61	\$1.62	\$2.25	\$3.47	\$5.41	\$8.44	\$14.68	\$16.34	\$27.75	\$49.33
\$50,000	\$2.01	\$2.03	\$2.82	\$4.34	\$6.76	\$10.55	\$18.35	\$20.42	\$34.68	\$61.66
\$60,000	\$2.41	\$2.44	\$3.38	\$5.21	\$8.11	\$12.66	\$22.02	\$24.51	\$41.62	\$73.99
\$70,000	\$2.81	\$2.84	\$3.94	\$6.07	\$9.47	\$14.76	\$25.68	\$28.59	\$48.56	\$86.33
\$80,000	\$3.21	\$3.25	\$4.50	\$6.94	\$10.82	\$16.87	\$29.35	\$32.68	\$55.50	\$98.66
\$90,000	\$3.61	\$3.66	\$5.07	\$7.81	\$12.17	\$18.98	\$33.02	\$36.76	\$62.43	\$110.99
\$100,000	\$4.02	\$4.06	\$5.63	\$8.68	\$13.52	\$21.09	\$36.69	\$40.85	\$69.37	\$123.32
\$110,000	\$4.42	\$4.47	\$6.19	\$9.54	\$14.88	\$23.20	\$40.36	\$44.93	\$76.31	\$135.66
\$120,000	\$4.82	\$4.87	\$6.76	\$10.41	\$16.23	\$25.31	\$44.03	\$49.02	\$83.24	\$147.99
\$130,000	\$5.22	\$5.28	\$7.32	\$11.28	\$17.58	\$27.42	\$47.70	\$53.10	\$90.18	\$160.32
\$140,000	\$5.62	\$5.69	\$7.88	\$12.15	\$18.93	\$29.53	\$51.37	\$57.18	\$97.12	\$172.65
\$150,000	\$6.02	\$6.09	\$8.45	\$13.02	\$20.28	\$31.64	\$55.04	\$61.27	\$104.05	\$184.98
\$160,000	\$6.42	\$6.50	\$9.01	\$13.88	\$21.64	\$33.75	\$58.71	\$65.35	\$110.99	\$197.32
\$170,000	\$6.83	\$6.90	\$9.57	\$14.75	\$22.99	\$35.86	\$62.38	\$69.44	\$117.93	\$209.65
\$180,000	\$7.23	\$7.31	\$10.14	\$15.62	\$24.34	\$37.97	\$66.05	\$73.52	\$124.86	\$221.98
\$190,000	\$7.63	\$7.72	\$10.70	\$16.49	\$25.69	\$40.08	\$69.72	\$77.61	\$131.80	\$234.31
\$200,000	\$8.03	\$8.12	\$11.26	\$17.35	\$27.05	\$42.18	\$73.38	\$81.69	\$138.74	\$246.65
\$210,000	\$8.43	\$8.53	\$11.82	\$18.22	\$28.40	\$44.29	\$77.05	\$85.78	\$145.68	\$258.98
\$220,000	\$8.83	\$8.94	\$12.39	\$19.09	\$29.75	\$46.40	\$80.72	\$89.86	\$152.61	\$271.31
\$230,000	\$9.24	\$9.34	\$12.95	\$19.96	\$31.10	\$48.51	\$84.39	\$93.95	\$159.55	\$283.64
\$240,000	\$9.64	\$9.75	\$13.51	\$20.82	\$32.46	\$50.62	\$88.06	\$98.03	\$166.49	\$295.98
\$250,000	\$10.04	\$10.15	\$14.08	\$21.69	\$33.81	\$52.73	\$91.73	\$102.12	\$173.42	\$308.31

Biweekly Premiums

Benefit Amount	Age 00-29	Age 30-34	Age 35-39	Age 40-44	Age 45-49	Age 50-54	Age 55-59	Age 60-64	Age 65-69	Age 70+
\$260,000	\$10.44	\$10.56	\$14.64	\$22.56	\$35.16	\$54.84	\$95.40	\$106.20	\$180.36	\$320.64
\$270,000	\$10.84	\$10.97	\$15.20	\$23.43	\$36.51	\$56.95	\$99.07	\$110.28	\$187.30	\$332.97
\$280,000	\$11.24	\$11.37	\$15.77	\$24.30	\$37.86	\$59.06	\$102.74	\$114.37	\$194.23	\$345.30
\$290,000	\$11.64	\$11.78	\$16.33	\$25.16	\$39.22	\$61.17	\$106.41	\$118.45	\$201.17	\$357.64
\$300,000	\$12.05	\$12.18	\$16.89	\$26.03	\$40.57	\$63.28	\$110.08	\$122.54	\$208.11	\$369.97
\$310,000	\$12.45	\$12.59	\$17.46	\$26.90	\$41.92	\$65.39	\$113.75	\$126.62	\$215.04	\$382.30
\$320,000	\$12.85	\$13.00	\$18.02	\$27.77	\$43.27	\$67.50	\$117.42	\$130.71	\$221.98	\$394.63
\$330,000	\$13.25	\$13.40	\$18.58	\$28.63	\$44.63	\$69.60	\$121.08	\$134.79	\$228.92	\$406.97
\$340,000	\$13.65	\$13.81	\$19.14	\$29.50	\$45.98	\$71.71	\$124.75	\$138.88	\$235.86	\$419.30
\$350,000	\$14.05	\$14.22	\$19.71	\$30.37	\$47.33	\$73.82	\$128.42	\$142.96	\$242.79	\$431.63
\$360,000	\$14.46	\$14.62	\$20.27	\$31.24	\$48.68	\$75.93	\$132.09	\$147.05	\$249.73	\$443.96
\$370,000	\$14.86	\$15.03	\$20.83	\$32.10	\$50.04	\$78.04	\$135.76	\$151.13	\$256.67	\$456.30
\$380,000	\$15.26	\$15.43	\$21.40	\$32.97	\$51.39	\$80.15	\$139.43	\$155.22	\$263.60	\$468.63
\$390,000	\$15.66	\$15.84	\$21.96	\$33.84	\$52.74	\$82.26	\$143.10	\$159.30	\$270.54	\$480.96
\$400,000	\$16.06	\$16.25	\$22.52	\$34.71	\$54.09	\$84.37	\$146.77	\$163.38	\$277.48	\$493.29
\$410,000	\$16.46	\$16.65	\$23.09	\$35.58	\$55.44	\$86.48	\$150.44	\$167.47	\$284.41	\$505.62
\$420,000	\$16.86	\$17.06	\$23.65	\$36.44	\$56.80	\$88.59	\$154.11	\$171.55	\$291.35	\$517.96
\$430,000	\$17.27	\$17.46	\$24.21	\$37.31	\$58.15	\$90.70	\$157.78	\$175.64	\$298.29	\$530.29
\$440,000	\$17.67	\$17.87	\$24.78	\$38.18	\$59.50	\$92.81	\$161.45	\$179.72	\$305.22	\$542.62
\$450,000	\$18.07	\$18.28	\$25.34	\$39.05	\$60.85	\$94.92	\$165.12	\$183.81	\$312.16	\$554.95
\$460,000	\$18.47	\$18.68	\$25.90	\$39.91	\$62.21	\$97.02	\$168.78	\$187.89	\$319.10	\$567.29
\$470,000	\$18.87	\$19.09	\$26.46	\$40.78	\$63.56	\$99.13	\$172.45	\$191.98	\$326.04	\$579.62
\$480,000	\$19.27	\$19.50	\$27.03	\$41.65	\$64.91	\$101.24	\$176.12	\$196.06	\$332.97	\$591.95
\$490,000	\$19.68	\$19.90	\$27.59	\$42.52	\$66.26	\$103.35	\$179.79	\$200.15	\$339.91	\$604.28
\$500,000	\$20.08	\$20.31	\$28.15	\$43.38	\$67.62	\$105.46	\$183.46	\$204.23	\$346.85	\$616.62

DEPENDENT CHILD(REN) Biweekly PREMIUMS:

Benefit Amount	Premium
\$2,500	\$0.23
\$5,000	\$0.44
\$7,500	\$0.65
\$10,000	\$0.87

(One rate for all eligible children in family, regardless of number)

PREMIUM CALCULATION (Add your elections here):

Employee Premium	
Spouse Premium	
Dependent Children Premium	
Total Premium	

(Rates are calculated as of coverage effective date and are based on insured's age in relation to Plan anniversary date. Billed rates may be higher if, at application, the person is at the highest age in an age band).

Please read this important information:

- You may not have coverage as both an employee and as a dependent.
- Only one insured spouse may cover the eligible dependent children.
- Neither you nor your spouse may hold more than a total of \$500,000 of group term life insurance with Reliance Standard under the master Group Policy. Insurance over that amount will be void and the premium refunded.

Rates are subject to change.