

Group Life Insurance

Optional Life and AD&D

SUMMARY OF BENEFITS

Sponsored by: Pampa ISD

All Full-Time Employees and All Bus Drivers

Life Benefit	Employee	Spouse	Dependent
Amount	Choice of \$10,000 increments Not to exceed 5 times your annual salary	Choice of \$5,000 increments Employee must elect coverage for spouse to be eligible. Not to exceed 50% of employee approved amount.	\$5,000 or \$10,000 Child: 14 days to age 26 regardless of student status Employee must elect coverage for dependents to be eligible.
Minimum Amount	\$10,000	\$5,000	\$5,000
Maximum Amount	\$500,000	\$250,000	\$10,000
Guarantee Issue for Newly Eligible Employees	\$100,000 under age 65 \$30,000 age 65-69 No Guarantee Issue age 70 and older	\$50,000 if employee is under age 60 \$10,000 age 60-69 No Guarantee Issue if employee is age 60 and older	\$10,000
Current Eligible Employees	You or your spouse may elect or increase insurance coverage up to 2 increments on a guaranteed acceptance basis during your company's defined annual open enrollment period, provided that you or your spouse have not been previously declined for coverage.		

AD&D Benefit	Employee	Spouse
Amount	Benefit amount equal to the life amount elected by you. Cost included in the schedule.	Same as employee

Benefit Reduction	Employee	Spouse
Benefits will reduce:	Benefits will terminate at retirement	Benefits terminate at employee age 70

Additional Benefits

- See Definition: Accelerated Death Benefit
- See Definition: Conversion
- See Definition: Seat Belt, Airbag, and Common Carrier

Eligibility	Employee	Spouse and Dependents
	All employees in an eligible class. You are able to take advantage of this coverage now without a health examination. You may not be offered this opportunity again, or may be responsible for the cost of required examinations.	Cannot be in a period of limited activity on the day coverage takes effect.

Definitions

Accelerated Death Benefit	Accelerated Death Benefit provides an option to withdraw a percentage of your life insurance coverage when diagnosed as terminally ill (as defined in the policy). The death benefit will be reduced by the amount withdrawn. To qualify, you have satisfied the Active Work rule and have been covered under this policy for the required amount of time as defined by the policy. Check with your tax advisor or attorney before exercising this option.
AD&D	Accidental Death and Dismemberment (AD&D) insurance provides specified benefits for a covered accidental bodily injury that directly causes dismemberment (e.g., the loss of a hand, foot, or eye). In the event that death occurs from a covered accident, both the life and the AD&D benefit would be payable.
Conversion	If you terminate your employment or become ineligible for this coverage, you have the option to convert all or part of the amount of coverage in force to an individual life policy on the date of termination without Evidence of Insurability. Conversion election must be made within 31 days of your date of termination.
Guarantee Issue	For timely entrants enrolled within 31 days of becoming eligible, the Guarantee Issue amount is available without any Evidence of Insurability requirement. Evidence of Insurability will be required for any amounts above this, for late enrollees or increase in insurance, and it will be provided at your own expense.
Seat Belt, Airbag, Common Carrier	If you die as a result of a covered auto accident while wearing a seat belt or in a vehicle equipped with an airbag, additional benefits are payable up to \$10,000 or 10% of the principal sum, whichever is less. If loss occurs for you due to an accident while riding as a passenger in a common carrier, benefits will be double the amount that would otherwise apply as outlined in the certificate.
Limited Activity	A period when a spouse or dependent is confined in a health care facility; or, whether confined or not, is unable to perform the regular and usual activities of a healthy person of the same age and sex.
Term Life	Coverage provided to the designated beneficiary upon the death of the insured. Coverage is provided for the time period that you are eligible and premium is paid. There is no cash value associated with this product.
Exclusion: Suicide	Benefits will not be paid if the death results from suicide within 2 years after coverage is effective. May apply if employee contributes toward the premium.

Additional Benefits

LifeKeysSM	Online will & testament preparation service, identity theft resources and beneficiary assistance support for all employees and eligible dependents covered under the Group Term Life and/or AD&D policy.
TravelConnectSM	Travel assistance services for employees and eligible dependents traveling more than 100 miles from home.

For assistance or additional information

Contact Lincoln Financial Group at (800) 423-2765 or log on to www.LincolnFinancial.com

NOTE: This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater details. Should there be a difference between this summary and the contract, the contract will govern.

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**Employee Monthly Premium
Life and AD&D insurance
Premium for sample benefit amounts**

Employee and Spouse premiums are calculated separately.
Refer to Program Specifications for your maximum benefit amounts.

AGE	Monthly Rate per \$1,000	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
<25	0.0800	\$0.80	\$1.60	\$2.40	\$3.20	\$4.00	\$4.80	\$5.60	\$6.40	\$7.20	\$8.00
25-29	0.0900	\$0.90	\$1.80	\$2.70	\$3.60	\$4.50	\$5.40	\$6.30	\$7.20	\$8.10	\$9.00
30-34	0.1100	\$1.10	\$2.20	\$3.30	\$4.40	\$5.50	\$6.60	\$7.70	\$8.80	\$9.90	\$11.00
35-39	0.1300	\$1.30	\$2.60	\$3.90	\$5.20	\$6.50	\$7.80	\$9.10	\$10.40	\$11.70	\$13.00
40-44	0.1800	\$1.80	\$3.60	\$5.40	\$7.20	\$9.00	\$10.80	\$12.60	\$14.40	\$16.20	\$18.00
45-49	0.2800	\$2.80	\$5.60	\$8.40	\$11.20	\$14.00	\$16.80	\$19.60	\$22.40	\$25.20	\$28.00
50-54	0.4400	\$4.40	\$8.80	\$13.20	\$17.60	\$22.00	\$26.40	\$30.80	\$35.20	\$39.60	\$44.00
55-59	0.7000	\$7.00	\$14.00	\$21.00	\$28.00	\$35.00	\$42.00	\$49.00	\$56.00	\$63.00	\$70.00
60-64	0.8700	\$8.70	\$17.40	\$26.10	\$34.80	\$43.50	\$52.20	\$60.90	\$69.60	\$78.30	\$87.00
65-69	1.4900	\$14.90	\$29.80	\$44.70	\$59.60	\$74.50	\$89.40	\$104.30	\$119.20	\$134.10	\$149.00
70-74	2.4000	\$24.00	\$48.00	\$72.00	\$96.00	\$120.00	\$144.00	\$168.00	\$192.00	\$216.00	\$240.00
75-79	3.6700	\$36.70	\$73.40	\$110.10	\$146.80	\$183.50	\$220.20	\$256.90	\$293.60	\$330.30	\$367.00
80+		For benefit and premium amounts, please see your Plan Administrator.									

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:

Use this formula to calculate premium for benefit amounts over \$100,000.

Age	Monthly Rate Per \$1,000	X	Benefit In \$1,000's	=	Monthly Cost
Example: 35	0.1300	X	150	=	\$19.50
		X		=	

Dependent Children Monthly Rate =

\$5,000 = \$0.50

\$10,000 = \$1.00

Premium covers all dependent children regardless of the number of children.

**Spouse Monthly Premium
Life and AD&D insurance
Premium for sample benefit amounts**

Employee and Spouse premiums are calculated separately.
Spouse premiums will be calculated based on Employee age.
Refer to Program Specifications for your maximum benefit amounts.

AGE	Monthly Rate per \$1,000	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<25	0.0800	\$0.40	\$0.80	\$1.20	\$1.60	\$2.00	\$2.40	\$2.80	\$3.20	\$3.60	\$4.00
25-29	0.0900	\$0.45	\$0.90	\$1.35	\$1.80	\$2.25	\$2.70	\$3.15	\$3.60	\$4.05	\$4.50
30-34	0.1100	\$0.55	\$1.10	\$1.65	\$2.20	\$2.75	\$3.30	\$3.85	\$4.40	\$4.95	\$5.50
35-39	0.1300	\$0.65	\$1.30	\$1.95	\$2.60	\$3.25	\$3.90	\$4.55	\$5.20	\$5.85	\$6.50
40-44	0.1800	\$0.90	\$1.80	\$2.70	\$3.60	\$4.50	\$5.40	\$6.30	\$7.20	\$8.10	\$9.00
45-49	0.2800	\$1.40	\$2.80	\$4.20	\$5.60	\$7.00	\$8.40	\$9.80	\$11.20	\$12.60	\$14.00
50-54	0.4400	\$2.20	\$4.40	\$6.60	\$8.80	\$11.00	\$13.20	\$15.40	\$17.60	\$19.80	\$22.00
55-59	0.7000	\$3.50	\$7.00	\$10.50	\$14.00	\$17.50	\$21.00	\$24.50	\$28.00	\$31.50	\$35.00
60-64	0.8700	\$4.35	\$8.70	\$13.05	\$17.40	\$21.75	\$26.10	\$30.45	\$34.80	\$39.15	\$43.50
65-69	1.4900	\$7.45	\$14.90	\$22.35	\$29.80	\$37.25	\$44.70	\$52.15	\$59.60	\$67.05	\$74.50
70+		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

This is an estimate of premium cost. Actual deductions may vary slightly due to rounding and payroll frequency.

Example:
Use this formula to calculate premium for benefit amounts over \$50,000.

Age	Monthly Rate Per \$1,000	X	Benefit In \$1,000's	=	Monthly Cost
Example: 35	0.1300	X	75	=	\$9.75
		X		=	

Dependent Children Monthly Rate =

\$5,000 = \$0.50
\$10,000 = \$1.00

Premium covers all dependent children regardless of the number of children.