# BASIC GROUP TERM LIFE and ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE BENEFIT HIGHLIGHTS





Approximately 50 million households recognize they need more life insurance (40 percent of households).1

# **Seton Hall University - Class 2**

The group term Life and Accidental Death and Dismemberment (AD&D) insurance available through your employer gives extra protection that you and your family may need. Life and AD&D insurance offers financial protection by providing you coverage in case of an untimely death or an accident that destroys your income-earning ability. Life benefits are disbursed to your beneficiaries in a lump sum in the event of your death.



To learn more about Life and AD&D insurance, visit thehartford.com/employeebenefits

# **COVERAGE INFORMATION**

APPLICANT	LIFE COVERAGE	AD&D COVERAGE
Employee	Benefit: 1 times earnings Maximum: \$255,000	AD&D: Included

# AD&D BENEFITS - PERCENT OF COVERAGE AMOUNT PER ACCIDENT

Covered accidents or death can occur up to 365 days after the accident. The total benefit for all losses due to the same accident will not exceed 100% of your coverage amount.

100 % of your covorage amount.				
LOSS FROM ACCIDENT	COVERAGE			
Life	100%			
Both Hands or Both Feet or Sight of Both Eyes	100%			
One Hand and One Foot	100%			
Speech and Hearing in Both Ears	100%			
Either Hand or Foot and Sight of One Eye	100%			
Movement of Both Upper and Lower Limbs (Quadriplegia)	100%			
Movement of Both Lower Limbs (Paraplegia)	75%			
Movement of Three Limbs (Triplegia)	75%			
Movement of the Upper and Lower Limbs of One Side of the Body (Hemiplegia)	50%			
Either Hand or Foot	50%			
Sight of One Eye	50%			
Speech or Hearing in Both Ears	50%			
Movement of One Limb (Uniplegia)	25%			
Thumb and Index Finger of Either Hand	25%			

# **ASKED & ANSWERED**

# WHO IS ELIGIBLE?

You are eligible if you are an active full or part time faculty or administrator employee who works at least 25 hours per week on a regularly scheduled basis.

### **AM I GUARANTEED COVERAGE?**

This insurance is guaranteed issue coverage - it is available without having to provide information about your health.

AD&D is available without having to provide information about your health.

#### WHEN CAN I ENROLL?

Your employer will automatically enroll you for this coverage. If you have not already done so, you must designate a beneficiary.

### WHEN DOES THIS INSURANCE BEGIN?

This insurance will become effective for you on the date you become eligible.

You must be actively at work with your employer on the day your coverage takes effect.

## WHEN DOES THIS INSURANCE END?

This insurance will end when you no longer satisfy the applicable eligibility conditions, premium is unpaid, you are no longer are actively working, you leave your employer, or the coverage is no longer offered.

# CAN I KEEP THIS INSURANCE IF I LEAVE MY EMPLOYER OR AM NO LONGER A MEMBER OF THIS GROUP?

Yes, you can take this life coverage with you. Coverage may be continued for you under an individual conversion life certificate. The specific terms and qualifying events for conversion are described in the certificate. Conversion is not available for AD&D coverage.

LIMRA, Facts About Life 2016. Web. 30 June 2017. <a href="https://www.limra.com/uploadedFiles/limra.com/LIMRA\_Root/Posts/PR/\_Media/PDFs/Facts-of-Life-2016.pdf">https://www.limra.com/uploadedFiles/limra.com/LIMRA\_Root/Posts/PR/\_Media/PDFs/Facts-of-Life-2016.pdf</a>

### Prepare. Protect. Prevail. With The Hartford. ®

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home Office is Hartford, CT. 5962a and 5962b NS 08/16 © 2016 The Hartford Financial Services Group, Inc. All rights reserved.

This Benefit Highlights document explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this document and the policy, the terms of the policy apply. Benefits are subject to state availability. Policy terms and conditions vary by state. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy as issued to the policyholder. The Hartford compensates both internal and external producers, as well as others, for the sale and service of our products. For additional information regarding Hartford's compensation practices, please review our website http://thehartford.com/group-benefits-producer-compensation. Life Form Series includes GBD-1000, GBD-1100, or state equivalent.

# **VOLUNTARY GROUP TERM LIFE INSURANCE BENEFIT HIGHLIGHTS**





Approximately 50 million households recognize they need more life insurance (40 percent of households).<sup>1</sup>

# **Seton Hall University - Class 2**

The group term life insurance available through your employer is a smart, affordable way to purchase the extra protection that you and your family may need. Life insurance offers financial protection by providing you coverage in case of an untimely death. Life insurance is disbursed to your beneficiaries in a lump sum in the event of your death.



To learn more about Life insurance, visit thehartford.com/employeebenefits

# **COVERAGE INFORMATION**

APPLICANT	LIFE COVERAGE
Employee	Benefit <sup>2</sup> : 1x earnings; 2x earnings; or 3x earnings Maximum: the lesser of 3x earnings or \$200,000
Spouse Benefit <sup>2</sup> : in the amount(s) of \$5,000.  Maximum: 100% of your supplemental coverage	
Child(ren)	Benefit: \$5,000

<sup>&</sup>lt;sup>2</sup>Your benefit will be reduced by 35% at age 65, 70 and 75, and 25% at age 80, 85, 90 and 95. Reductions will be applied to the current amount (after all previous reductions).

# **ASKED & ANSWERED**

# WHO IS ELIGIBLE?

You are eligible if you are an active full or part time faculty or administrator employee who works at least 25 hours per week on a regularly scheduled basis.

Your spouse and child(ren) are also eligible for coverage. Any child(ren) must be under age 19 (or under age 23 if a full-time student).

### **AM I GUARANTEED COVERAGE?**

This coverage is offered without requiring you to provide evidence of insurability.

This coverage is offered without requiring your spouse to provide evidence of insurability.

This insurance is guaranteed issue coverage – it is available without having to provide information about your child(ren)'s health.

## WHEN CAN I ENROLL?

You may enroll during any scheduled enrollment periodwithin 31 days of the date you have a change in family status, or within The first day of the month coinciding with or next days of the completion of any eligibility waiting period established by your employer.

## WHEN DOES THIS INSURANCE BEGIN?

Subject to any eligibility waiting period established by your employer, insurance will become effective in accordance with the terms of the certificate (usually the first day of the month following the date you elect coverage).

You must be actively at work with your employer on the day your coverage takes effect.

Your spouse and child(ren) must be performing normal activities and not be confined (at home or in a hospital/care facility).

### WHEN DOES THIS INSURANCE END?

This insurance will end when you (or your dependent(s)) no longer satisfy the applicable eligibility conditions, premium is unpaid, or the coverage is no longer offered.

### CAN I KEEP THIS INSURANCE IF I LEAVE MY EMPLOYER OR AM NO LONGER A MEMBER OF THIS GROUP?

Yes, you can take this life coverage with you. Coverage may be continued for you and your dependent(s) under a group portability certificate or an individual conversion life certificate. Your spouse may also continue insurance in certain circumstances. The specific terms and qualifying events for conversion and portability are described in the certificate.

LIMRA, Facts About Life 2016. Web. 30 June 2017. <a href="https://www.limra.com/uploadedFiles/limra.com/LIMRA\_Root/Posts/PR/\_Media/PDFs/Facts-of-Life-2016.pdf">https://www.limra.com/uploadedFiles/limra.com/LIMRA\_Root/Posts/PR/\_Media/PDFs/Facts-of-Life-2016.pdf</a>

# Prepare. Protect. Prevail. With The Hartford. ®

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home Office is Hartford, CT. 5962a and 5962b NS 08/16 © 2016 The Hartford Financial Services Group, Inc. All rights reserved.

This Benefit Highlights document explains the general purpose of the insurance described, but in no way changes or affects the policy, as actually issued. In the event of a discrepancy between this document and the policy,

In is benefit Highlights document explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy petween this document and the policy the terms of the policy as plot, Benefits are subject to state availability. Policy terms and conditions vary by state. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy as issued to the policyholder. The Hartford compensates both internal and external producers, as well as others, for the sale and service of our products. For additional information regarding Hartford's compensation practices, please review our website http://thehartford.com/group-benefits-producer-compensation. Life Form Series includes GBD-1000, GBD-1100, or state equivalent.

# GROUP VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE BENEFIT HIGHLIGHTS





In the U.S., a disabling injury occurs every second, and an accidental death occurs every 4 minutes.1

# **Seton Hall University - Class 2**

Group Voluntary Accidental Death & Dismemberment (AD&D) insurance pays your beneficiary a death benefit if you die due to a covered accident or pays you if you are unexpectedly injured in a covered accident. The benefits are paid in lump sum amounts to you (or your beneficiary), and can be used to pay for health care expenses not covered by your major medical insurance, help replace income lost while not working, funeral expenses, or however you choose. Accidental death benefits are paid in addition to any life insurance.



To learn more about AD&D insurance, visit thehartford.com/employeebenefits

# **COVERAGE INFORMATION**

You (the primary insured) may enroll for one of the following AD&D coverage amounts<sup>2</sup>: increments of \$25,000. The maximum amount you can elect is \$500,000.

You may also enroll your dependent(s) for AD&D coverage. Your dependent(s) will be covered at a percentage of your coverage amount.2

COVERAGE TIER	SPOUSE PERCENTAGE	CHILD(REN) PERCENTAGE
Spouse	60%	0%
Child(ren)	0%	15%
Spouse & Child(ren)	50%	10%

# AD&D BENEFITS - PERCENT OF COVERAGE AMOUNT PER ACCIDENT

Covered accidents or death can occur up to 365 days after the accident. The total benefit for all losses due to the same accident will not exceed 100% of your coverage amount.

coverage amount.				
LOSS FROM ACCIDENT	COVERAGE AMOUNT			
Life	100%			
Both Hands or Both Feet or Sight of Both Eyes	100%			
One Hand and One Foot	100%			
Speech and Hearing in Both Ears	100%			
Either Hand or Foot and Sight of One Eye	100%			
Movement of Both Upper and Lower Limbs (Quadriplegia)	100%			
Movement of Both Lower Limbs (Paraplegia)	75%			
Movement of Three Limbs (Triplegia)	75%			
Movement of the Upper and Lower Limbs of One Side of the Body (Hemiplegia)	50%			
Either Hand or Foot	50%			
Sight of One Eye	50%			
Speech or Hearing in Both Ears	50%			
Movement of One Limb (Uniplegia)	25%			
Thumb and Index Finger of Either Hand	25%			

# **ASKED & ANSWERED**

#### WHO IS ELIGIBLE?

You are eligible if you are an active full or part time faculty or administrator employee who works at least 30 hours per week on a regularly scheduled basis.

Your spouse and child(ren) are also eligible for coverage. Any child(ren) must be under age 19 (or under age 23 if a full-time student).

### **CAN I INSURE MY DOMESTIC OR CIVIL UNION PARTNER?**

Yes. Any reference to "spouse" in this document includes your domestic partner, civil union partner or equivalent, as recognized and allowed by applicable law.

# **AM I GUARANTEED COVERAGE?**

This insurance is guaranteed issue coverage – it is available without having to provide information about your or your family's health.

### WHEN CAN I ENROLL?

You may enroll during any scheduled enrollment period, within 31 days of the date you have a change in family status, or within The first day of the month coinciding with or next days of the completion of any eligibility waiting period established by your employer.

#### WHEN DOES THIS INSURANCE BEGIN?

Subject to any eligibility waiting period established by your employer, insurance will become effective in accordance with the terms of the certificate (usually the first day of the month following the date you elect coverage).

You must be actively at work with your employer on the day your coverage takes effect. Your spouse and child(ren) must be performing normal activities and not be confined (at home or in a hospital/care facility).

# WHEN DOES THIS INSURANCE END?

This insurance will end when you (or your dependent(s)) no longer satisfy the applicable eligibility conditions, premium is unpaid, you are no longer are actively working, you leave your employer, or the coverage is no longer offered.

# CAN I KEEP THIS INSURANCE IF I LEAVE MY EMPLOYER OR AM NO LONGER A MEMBER OF THIS GROUP?

Yes, you can take this coverage with you. Coverage may be continued for you and your dependent(s) under an individual conversion certificate. Your spouse may also continue insurance in certain circumstances. The specific terms and qualifying events for conversion are described in the certificate.

<sup>1</sup>Injury Facts. National Safety Council. 2015 Edition. P. 37. Web. 30 June 2017.

#### Prepare. Protect. Prevail. With The Hartford.®

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home Office is Hartford, CT. 5962c NS 08/16 © 2016 The Hartford Financial Services Group, Inc. All rights reserved.

This Benefit Highlights document explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this document and the policy, the terms of the policy apply. Benefits are subject to state availability. Policy terms and conditions vary by state. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy as issued to the policyholder. The Hartford compensates both internal and external producers, as well as others, for the sale and service of our products. For additional information regarding Hartford's compensation practices, please review our website <a href="http://thehartford.com/group-benefits-producer-compensation">http://thehartford.com/group-benefits-producer-compensation</a>. Accidental Death & Dismemberment Form Series includes GBD-1000, GBD-1300, or state equivalent.

SETON HALL UNIVERSITY - CLASS 2 ADD BHS\_PUBLICATION DATE: 10/17/2018 CLASS 2 - FACULTY OR ADMINISTRATOR 00087950 ACTIVE FULL-TIME EMPLOYEE PAGE 6 OF 8

# **LIMITATIONS & EXCLUSIONS**



This insurance coverage includes certain limitations and exclusions. The certificate details all provisions, limitations, and exclusions for this insurance coverage. A copy of the certificate can be obtained from your employer.

### **GROUP LIFE INSURANCE**

GENERAL LIMITATIONS AND EXCLUSIONS

- Your benefit will be reduced by 35% at age 65, 70 and 75, and 25% at age 80, 85, 90 and 95. Reductions will be applied to the current amount (after all previous reductions).
- A benefit will not be paid if death occurs by suicide within two years (or as allowed by state law) of purchasing this coverage.
- You and your dependent(s) must be citizens or legal residents of the United States, its territories and protectorates.

DEPENDENT LIMITATIONS AND EXCLUSIONS

- Coverage may only be elected for dependents when you elect and are approved for coverage for yourself.
- Coverage may not be elected for a dependent who has employee coverage under this certificate.
- Coverage may not be elected for a dependent who is in active full-time military service.
- Child(ren) may only be covered as a dependent of one employee.
- Infant's may receive a reduced benefit prior to the age of six months.

5962a NS 08/16 © 2016. The Hartford Financial Services Group, Inc. All rights reserved. Life Form Series includes GBD-1000, GBD-1100, or state equivalent.

## **GROUP ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE**

GENERAL LIMITATIONS AND EXCLUSIONS

- Your benefit will be reduced by 35% at age 65, 70 and 75, and 25% at age 80, 85, 90 and 95. Reductions will be applied to the current amount (after all previous reductions). Your benefit will be reduced by 35% at age 65, 70 and 75, and 25% at age 80, 85, 90 and 95. Reductions will be applied to the current amount (after all previous reductions).
- This insurance does not cover losses caused by:
  - Sickness; disease; or any treatment for either
  - Any infection, except certain ones caused by an accidental cut or wound
  - Intentionally self-inflicted injury, suicide or suicide attempt
  - War or act of war, whether declared or not
  - Injury sustained while in the armed forces of any country or international authority
  - Injury sustained on aircraft in certain circumstances
- Taking prescription or illegal drugs unless prescribed by or administered by a licensed physician
- Injury sustained while riding, driving, or testing any motor vehicle for racing Injury sustained while committing or attempting to commit a felony Injury sustained while driving while intoxicated

- You and your dependent(s) must be citizens or legal residents of the United States, its territories and protectorates.

  DEPENDENT LIMITATIONS AND EXCLUSIONS

- Coverage may only be elected for dependents when you elect and are approved for coverage for yourself.
- Coverage may not be elected for a dependent who has employee coverage under this certificate.
- Child(ren) may only be covered as a dependent of one employee.

# **DEFINITIONS**

- Loss means, with regard to hands and feet, actual severance through or above wrist or ankle joints; with regard to sight, speech or hearing, entire and irrecoverable loss thereof; with regard to thumb and index finger, actual severance through or above the metacarpophalangeal joints; with regard to movement, complete and irreversible paralysis of such
- Injury means bodily injury resulting directly from an accident, independent of all other causes, which occurs while you or your dependent(s) have coverage.

5962c NS 08/16 © 2016. The Hartford Financial Services Group, Inc. All rights reserved. Accident Form Series includes GBD-1000, GBD-1300, or state equivalent.

# Prepare. Protect. Prevail. With The Hartford.®

irtford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home Office is

This Benefit Highlights document explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this document and the policy, the terms of the policy apply. Benefits are subject to state availability. Policy terms and conditions vary by state. Complete details are in the Certificate of Insurance issued to each insured individual and the Master