

## Supplemental Life Insurance . . . For You

- ◆ At the time of initial enrollment, you can purchase Supplemental Life coverage in an amount equal to two times your annual salary, rounded up to the next \$20,000. This amount, known as **Guaranteed Issue**, is available without providing a *Life Insurance Application*.
- ◆ You may purchase Supplemental Life in units of \$20,000. One \$20,000 unit of life insurance may be purchased during Option Period without a *Life Insurance Application* as long as you are already enrolled in Basic Life and one of the health plans offered through OSEEGIB. You cannot apply for Supplemental Life coverage that exceeds the Plan maximum of five times your annual salary or \$300,000, whichever is less. You must complete a *Life Insurance Application* to apply for coverage above \$20,000.
- ◆ The first \$20,000 unit of Supplemental Life provides an additional \$20,000 of AD&D coverage.
- ◆ A *Life Insurance Application* is available from your Insurance Coordinator.

## Dependent Life Insurance . . . For Your Family

- ◆ If you enroll in Basic Life insurance, you can purchase Dependent Life insurance for your spouse and eligible dependents during your initial enrollment, during the annual Option Period, or within 30 days of the loss of other group life insurance or other midyear qualifying event.
- ◆ Dependent Life does not include AD&D coverage.
- ◆ There are three options for Dependent Life coverage: Low, Standard, or Premier Option. Regardless of the number of dependents, the monthly premium is the same. Each dependent must be enrolled in Dependent Life.
- ◆ A *Life Insurance Application* is not required for Dependent Life coverage.

DEPENDENT	LOW OPTION	STANDARD OPTION	PREMIER OPTION
Spouse	\$6,000	\$10,000	\$20,000
Child (age 6 months to 26)	\$3,000	\$ 5,000	\$10,000
Child (live birth to 6 months)	\$1,000	\$ 1,000	\$ 1,000

## Beneficiary Designation

Benefits are paid to your beneficiary in a lump sum. You must name your beneficiary when you enroll. Your beneficiary designation can be changed at any time. For a *Beneficiary Designation Form* or more information, contact your Insurance Coordinator. These forms are also available on the HealthChoice website at [www.sib.ok.gov](http://www.sib.ok.gov) or [www.healthchoicelok.com](http://www.healthchoicelok.com). Be aware that life insurance benefits for covered dependents are always paid to the member.

# HEALTHCHOICE DISABILITY INSURANCE

Verify your employer offers HealthChoice Disability Insurance through OSEEGIB (limited county participation only).

The HealthChoice Disability Insurance Plan provides **partial** replacement income if you are unable to work due to an illness or injury. Disability coverage is not available to dependents.

## Eligibility

Enrollment in the disability plan begins the first day of the month following your employment date or the date you become eligible. You become eligible for disability benefits after 31 consecutive days of employment. During that time, you must continuously perform all of the material duties of your regular occupation. Any claim for disability benefits must be filed within one year of the date your disability began.