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**Northeastern University  
Policy # 570537**

Please read carefully the following description of your Unum Term Life insurance plan.

**Your Plan**

**Eligibility**

**Faculty:** All active faculty employed in a benefits eligible position with an annual appointment of 2/3 time or more

**Staff:** All active staff employed in a benefits eligible position with a work schedule of at least 24 hours each week or full-time for at least 8 months per year

**Coverage Amounts**

**Employee:** Your employer is paying for a base Life plan of 2 times annual earnings to a maximum of \$500,000.

You may purchase additional Life coverage equal to 1,2,3 or 4 times your annual earnings. Overall Life maximum is \$1,000,000 (base and additional combined).

**Spouse:** \$25,000 increments to the lesser of 100% of the employee coverage amount of \$100,000

**Child:**

Option A

Live birth to 6 months: \$1,000

6 months to age 19 or to 25 if a full-time student: \$10,000

Option B

Live birth to 6 months: \$1,000

6 months to age 19 or to 25 if a full-time student: \$20,000

**Note:** You must be insured under the plan in order to elect coverage for your dependents.

Coverage amount(s) will reduce according to the following schedule:

Age:	Insurance Amount Reduces to:
65	65% of original amount
70	50% of original amount

Coverage may not be increased after a reduction

**Guarantee Issue**

The amount of coverage that is "Guarantee Issue" is the amount of coverage you can have without completing Evidence of Insurability (medical questionnaire).

If you elect coverage within 30 days of first becoming eligible, the following rules apply :

- Elections of 1x or 2x base salary do not require Evidence of Insurability
- Elections of 3x or 4x require Evidence of Insurability (medical questionnaire)
- Dependent coverage of \$25000 or less do not require Evidence of Insurability

## ***Term Life Insurance Flex Coverage Highlights (Continued)***

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Your medical questionnaire must be approved in order for you to qualify for these higher levels of coverage.

Note: if you decide to increase your or your dependents coverage level at any other time, Evidence of Insurability (medical questionnaire) will apply to the entire amount of coverage.

### **Additional Benefits**

#### ***Work/Life Balance Employee Assistance Program***

Work-life balance is a comprehensive resource providing access to professional assistance for a wide range of personal and work-related issues. The service is available to you and your family members twenty-four hours a day, 365 days a year, and provides resources to help employees find solutions to everyday issues such as financing a car or selecting child care, as well as more serious problems such as alcohol or drug addiction, divorce, or relationship problems.

Services include: toll-free phone access to master's-level consultants, up to three face-to-face sessions to help with more serious issues; and online resources. There is no additional charge for utilizing the program. Participation is confidential and strictly voluntary.

Will preparation is offered to a terminally ill insured who exercises the Accelerated Benefit Option.

#### ***Survivor Financial Counseling Services***

This personalized financial counseling service provides expert, objective financial counseling to survivors and terminally ill employees at no cost to them. This service is also extended to employees upon the death or terminal illness of their covered spouse. The financial counselors, all highly trained attorneys, help develop strategies needed to protect resources, preserve current lifestyles, and build future security. At no time will the counselor offer or sell any product or service.

#### ***Portability/Conversion***

If you retire, reduce your hours or leave your employer, you can take this coverage with you according to the terms outlined in the contract. However, if you have a medical condition which has a material effect on life expectancy, you will be ineligible to port your coverage. You may also have the option to convert your Term life coverage to an individual life insurance policy.

#### ***Accelerated Benefit***

If you become terminally ill and are not expected to live beyond a certain time period as stated in your certificate booklet, you may request up to 100% of your life insurance amount up to \$250,000, without fees or present value adjustments. A doctor must certify your condition in order to qualify for this benefit. Upon your death, the remaining benefit will be paid to your designated beneficiary(ies). This feature also applies to your covered dependents.

#### ***Retained Asset Account***

Benefits of \$10,000 or more are paid through the Unum Retained Asset Account. This interest bearing account will be established in the beneficiary's name. He or she can then write a check for the full amount or for \$250 or more, as needed.

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## ***Term Life Insurance Flex Coverage Highlights (Continued)***

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### ***Worldwide Emergency Travel Assistance Services***

Whether your travel is for business or pleasure, our worldwide emergency travel assistance program is there to help you when an unexpected emergency occurs. With one phone call anytime of the day or night, you, your spouse and dependent children can get immediate assistance anywhere in the world. Emergency travel assistance is available to you when you travel to any foreign country, including neighboring Canada or Mexico. It is also available anywhere in the United States for those traveling more than 100 miles from home. Your spouse and dependent children do not have to be traveling with you to be eligible. However, spouses traveling on business for their employer are not covered by this program.

### **Limitations/Exclusions/ Termination of Coverage**

#### ***Suicide Exclusion***

Life benefits for additional life coverage will not be paid for deaths caused by suicide in the first twenty-four months after your effective date of coverage.

No increased or additional benefits will be payable for deaths caused by suicide occurring within 24 months after the day such increased or additional insurance is effective.

#### ***Termination of Coverage***

Your coverage and your dependents' coverage under the Summary of Benefits ends on the earliest of:

- The date the policy or plan is cancelled;
- The date you no longer are in an eligible group;
- The date your eligible group is no longer covered;
- The last day of the period for which you made any required contributions;
- The last day you are in active employment unless continued due to a covered layoff or leave of absence or due to an injury or sickness, as described in the certificate of coverage;
- For dependent's coverage, the date of your death.

In addition, coverage for any one dependent will end on the earliest of:

- The date your coverage under a plan ends;
- The date your dependent ceases to be an eligible dependent;
- For a spouse/same sex spousal equivalent, the date of divorce or annulment; or
- For a same sex spousal equivalent, the date your same sex spousal equivalent relationship ends.

Unum will provide coverage for a payable claim which occurs while you and your dependents are covered under the policy or plan.

### **Next Steps**

#### ***Delayed Effective Date of Coverage***

Employee: Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Dependent: Insurance coverage will be delayed if that dependent is totally disabled on the date that insurance would otherwise be effective. Exception: infants are

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## ***Term Life Insurance Flex Coverage Highlights (Continued)***

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insured from live birth.

“Totally disabled” means that, as a result of an injury, a sickness or a disorder, your dependent is confined in a hospital or similar institution; is unable to perform two or more activities of daily living (ADLs) because of a physical or mental incapacity resulting from an injury or a sickness; is cognitively impaired; or has a life threatening condition.

### ***Changes to Coverage***

At each annual enrollment period or within 31 days of a change in status, you will be given the opportunity to change your coverage. You will be required to provide evidence of insurability and be approved to increase your coverage amounts. Your eligible dependents will be required to provide evidence of insurability and be approved to increase their coverage amounts by more than one level.

### ***Questions***

If you should have any questions about your coverage or how to enroll, please contact your Plan Administrator.

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Some provisions may vary or not be available in all states. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern. For complete details of coverage, please refer to policy form number C.FP-1, et al.

All worldwide emergency travel assistance must be arranged by Assist America, which pays for all services it provides. Medical expenses such as prescriptions or physician, lab or medical facility fees are paid by the employee or the employee's health insurance.

Survivor financial counseling services are provided exclusively by The Ayco Company, L.P. The services are subject to availability and may be withdrawn by Unum without prior notice

Work-life balance employee assistance program services are provided by Ceridian Corporation. Worldwide emergency travel assistance services are provided by Assist America, Inc. Services are available with selected Unum insurance offerings. Exclusions, limitations and prior notice requirements may apply, and service features, terms and eligibility criteria are subject to change. The services are not valid after termination of coverage and may be withdrawn at any time. Please contact your Unum representative for full details.

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