

# State of Florida

Group Term Life Insurance Program for Employees

Action Required

## An extra layer of protection



**MINNESOTA LIFE**

A Securian Company

Dear New Employee,

As a new employee of the State of Florida, you have the opportunity to participate in a Group Term Life insurance plan underwritten by Minnesota Life Insurance Company, at rates negotiated exclusively for employees of the State of Florida.

Basic Term Life insurance is a benefit automatically provided to all full-time active employees by the State of Florida to give you a foundation of financial security. This base coverage may be supplemented with additional Optional Term Life insurance, which you will pay for through the convenience of payroll deduction. OPS/Variable hour class employees have the option to enroll and pay premiums for Basic Term Life insurance, but are not eligible for Optional Term Life Insurance.

### **Now's a good time to evaluate your insurance needs**

Besides the Basic Term Life insurance, you may purchase from one to seven times your annual earnings in Optional Term Life insurance.

When considering the amount of life insurance coverage that's right for you and your family, it's important to think about the amount of money your family would need to maintain its lifestyle, that is, to live comfortably without depleting existing assets and compromising short- and long-term plans.

### **Here's an opportunity to add the protection you need**

During your first 60 days of initial eligibility, you may apply for Optional Term life insurance – up to the lesser of five times your annual earnings, or \$500,000 – without providing Evidence of Insurability. The plan maximum is the lesser of seven times annual earnings, or \$1,000,000.

### **Enroll**

1. Within 60 days of initial eligibility, elect coverage online at [peoplefirst.myflorida.com](http://peoplefirst.myflorida.com).
2. Complete the enclosed beneficiary designation form and submit it to Minnesota Life.

### **Questions?**

If you have any questions about enrollment, please call the People First Service Center at **1-866-663-4735**.

# Welcome

## What do I need to do?

The State of Florida is proud to partner with Minnesota Life Insurance Company to provide group life insurance benefits. The State of Florida group insurance program offers you an affordable way to provide protection for your family.

Before enrolling, there are two very important questions you need to answer: **Why do I need life insurance?** and **How much do I need?**

### Why do I need life insurance?

*Think about it. If you died, what would happen to the people who depend on you for financial support?*

**Group Term Life** insurance provides a base level of protection that can be enhanced by personal savings, individual life insurance and Social Security benefits. This coverage will help protect your family against the unexpected loss of your life and income during your working years.

Insurance proceeds may be used as supplemental income for your family to pay off debts, such as mortgage or medical expenses, or could be used to pay for your funeral/burial costs. Other popular uses of proceeds include establishing a college fund for your children or leaving funds for your favorite charities.

### How much life insurance do I need?

Visit **[LifeBenefits.com/insuranceneeds](http://LifeBenefits.com/insuranceneeds)** to estimate how much coverage you may need to meet future goals.

### How do I elect coverage?

This booklet provides information to help you answer those questions and the instructions to enroll for coverage. Enrolling is easy and can be done in four simple steps:

- Step 1:** Determine your needs
- Step 2:** Review your coverage options
- Step 3:** Calculate your costs
- Step 4:** Enroll



# Step 1

## Determine your needs

To estimate the amount of life insurance you need, you'll want to determine what you must protect in the event of your death.

### Assets and Income

What would be available to your family now, if you weren't here to provide for them?

Spouse/Registered Domestic Partner's annual income x number of years to age 65	\$ _____
Cash, savings bonds, stocks, securities (current value)	\$ _____
Company savings plan (401(k), 403(b), other)	\$ _____
Cash value of life insurance	\$ _____
Other assets* or income (other than your own)	\$ _____

\*Equity in your home, if you plan to sell or borrow against it for cash.

**A = \$** \_\_\_\_\_

### Basic Necessities

What basic needs do you and your family have?  
(multiply the items below by the number of years required, if applicable)

Home – remaining mortgage or rent (120 months is a basic rule of thumb)	\$ _____
Annual household operating expenses (utilities, food, clothing, insurance, repairs, property taxes, etc.)	\$ _____
Childcare	\$ _____
Health – health insurance premiums or medical/hospital expenses not covered by insurance	\$ _____
Debt – balances on credit cards, car loans, etc.	\$ _____

**B = \$** \_\_\_\_\_

### Comfort Zone

What kind of special or one-time expenses may come along?

Tuition	\$ _____
Wedding	\$ _____
New residence	\$ _____
Elder care x number of years	\$ _____
Estate taxes, probate fees, attorney fees	\$ _____
Emergency fund	\$ _____
Funeral expenses (average is \$5,000 - \$10,000)	\$ _____
Golden years (money put aside for survivor's retirement)	\$ _____

### Complete the Equation

Complete the equation that most closely reflects your particular needs:

**Basic Necessities**

**B - A = \$** \_\_\_\_\_

(Compare to current Life Insurance amount)

**Comfort Zone**

**(B + C) - A = \$** \_\_\_\_\_

(Compare to current Life Insurance amount)

**Remember,** your calculation is based on today's costs and doesn't account for inflation or changes in annual earnings. Review your needs periodically to ensure that your needs will be met now and in the future.



# Step 2

## Review your coverage options

Now that you understand your need for life insurance and know how much may be enough, you're ready to consider the options available to you under the State of Florida's group life insurance plan.

The State of Florida offers a basic amount of protection to all full-time active employees. You can purchase additional coverage and pay premiums conveniently through payroll deduction.

When you experience a life event, such as getting married or having a baby, you may increase your coverage if you apply within 60 days. Some requests require proof of good health. Amounts based on your salary will automatically change as your salary changes.

### What coverage is available?

If eligible, you are automatically enrolled for Basic coverage, and may elect Optional coverage. OPS/Variable hour class employees are not automatically enrolled for any coverage and must elect Basic coverage.



Coverage type	Coverage options	Coverage amount
<b>Basic Group Term Life</b>	<ul style="list-style-type: none"><li>• All full-time active employees (automatically enrolled)</li><li>• OPS/Variable hour class employees (employee-elected and employee-paid)</li></ul>	<ul style="list-style-type: none"><li>• \$25,000</li><li>• \$25,000</li></ul>
<b>Retiree Group Term Life</b>	<ul style="list-style-type: none"><li>• Retirees who are not Vested Legislators</li></ul>	<ul style="list-style-type: none"><li>• \$2,500 or \$10,000</li></ul>
<b>Optional Group Term Life</b> <i>Employee-elected</i>	<ul style="list-style-type: none"><li>• Active employees enrolled in Basic Term Life</li><li>• OPS/Variable hour class employees are not eligible</li></ul>	<ul style="list-style-type: none"><li>• One to seven times annual earnings</li><li>• Maximum coverage is \$1,000,000</li></ul>

### Guaranteed coverage

- Basic coverage is guaranteed if automatically enrolled or elected within 60 days of initial eligibility for OPS/Variable hour class employees – no proof of good health required.
- Optional coverage is guaranteed if elected within 60 days of initial eligibility, up to the lesser of five times annual earnings, or \$500,000.
- Existing Optional coverage may be increased by one level of annual earnings, up to the guaranteed issue limit (lesser of five times annual earnings, or \$500,000), during each annual enrollment or within 60 days of a qualified status change.



# Step 3

## Calculate your costs

### What are my rates?

#### Optional Term Life and AD&D

Rates increase with age.

Age	Rate/\$1,000/month
Under 30	\$0.072
30-34	0.092
35-39	0.103
40-44	0.112
45-49	0.155
50-54	0.222
55-59	0.335
60-64	0.613
65-69	0.933
70 and over	1.780

All rates are subject to change.

#### Basic Term Life for OPS/Variable hour class employees

Coverage amount	Rate per month
\$25,000	\$4.54

#### Retiree Term Life

(excludes Vested Legislators)

Coverage amount	Rate per month
\$2,500	\$7.41
\$10,000	\$29.65

### Calculate monthly cost

Determine the coverage desired and the monthly cost of coverage per thousand based on your age from the rate table above. Divide the elected coverage amount by 1,000 to identify the number of coverage units. Multiply the coverage units by the monthly cost of insurance identified above.

### Rate calculation example

A 35-year-old making \$29,700 annually who elects two times annual earnings in Optional Term Life insurance:

#### Example:

\$29,700	x	2	=	\$59,400
Annual Earnings		Increments (1x, 2x or 3x)		Coverage Amount
Round to the next \$1,000 = \$60,000	÷	\$1,000	=	60
Coverage Amount			Coverage Units	
			x	0.103
				Monthly Rate
			=	\$6.18
				Monthly Premium

#### Now calculate your rate:

\$	x		=	\$
Annual Earnings		Increments (1x, 2x or 3x)		Coverage Amount
\$	÷	\$1,000	=	
Coverage Amount			Coverage Units	
			x	
				Monthly Rate
			=	
				Monthly Premium

## Enroll

1. Within 60 days of initial eligibility, elect coverage online at **peoplefirst.myflorida.com**.
2. Complete the enclosed beneficiary designation form and submit it to Minnesota Life.



Source: Life Insurance and Market Research Association (LIMRA), 2013



**Don't forget to sign your completed form!**

<b>Beneficiary Designation and Change Request</b>				<b>MINNESOTA LIFE</b>
Minneapolis Life Insurance Company - Equal Opportunity P.O. Box 1000 • Minneapolis, MN 55402-1000 • 1-800-622-7766 • Fax 1-800-222-0040				
Policy number: <b>20000</b>	Insured			
Primary beneficiary number	Secondary beneficiary number	Tertiary beneficiary number	Medical info	
Print owner's name and address below. No e-address <input type="checkbox"/>				
<b>INSTRUCTIONS:</b>				
1. Print or typewrite in the space below, the full name, address, relationship to beneficiary and share % of each beneficiary to be named.				
2. Sign and date the completed form and return it to Minnesota Life.				
3. The designation applies to your basic and any optional coverage.				
4. Amend Minnesota Life using the above address and fax numbers.				
<b>CHOOSE BENEFICIARY TYPE(S) AND PERCENTAGE(S)</b>				
The primary and contingent beneficiaries determine the order in which benefits become eligible for payment death proceeds. Surviving benefit(s) in all categories eventually will inherit benefits in the event category shares otherwise specified. Use of the word "child" without modifiers includes only one biological child of first generation and subsequent generations by category. To make designations, a beneficiary must give the insured, in the event a term contract needed to borrow, a change designation under this policy. If other documents are required and substantiated by category. To make designations, a beneficiary must give the insured, in the event a term contract needed to borrow, a change designation under this policy. If other documents are required and substantiated by category. If there is a very significant source of the insured and a beneficiary, the death proceeds will pass to the estate unless stated otherwise.				
The same person cannot be named as a primary and a contingent beneficiary.				
<b>PRIMARY BENEFICARY(IES)</b> - The person or persons named will receive the proceeds				
Beneficiary #1 Name & Address	Relationship to Insured	Share % of primary benefit (add up to 100%)	Total = 100%	
<b>CONTINGENT BENEFICIARY(IES)</b> - If the primary beneficiary(ies) is no longer living, the benefit is paid to this person(s).				
Beneficiary #1 Name & Address	Relationship to Insured	Benefit percentage (add up to 100%)	Total = 100%	
<b>SIGNATURE REQUIRED</b> Policyowner's signature _____ X			Date _____	
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## Frequently asked questions

### What is Term Life insurance?

Group Term Life insurance provides affordable protection that is available for a specified period of time. The benefit would be paid if the insured were to die during that “term.”

You can buy large amounts of insurance at a reasonable cost. There is no cash value build-up. This coverage can be enhanced by your personal savings, individual life insurance, and Social Security benefits. All full-time active employees are automatically enrolled in Basic Life coverage and must enroll in Optional Life coverage. OPS/Variable hour class employees must enroll and pay the premium for Basic Term Life coverage.

### Who is eligible?

You are eligible for coverage under the group life insurance plan if you are a regular full-time or part-time employee actively at work at the employer’s normal place of business when coverage becomes effective or an OPS/Variable hour class employee. If you aren’t actively at work on the effective date of your coverage, any new insurance or increases in coverage go into effect when you return to active employment.

### When is coverage effective?

- **Basic Term Life** – All full-time active employees are automatically enrolled and coverage is effective on your first day of work. OPS/Variable hour class employees must enroll and pay the premium for Basic Life coverage. Coverage will be effective the date you enroll.
- **Optional Term Life** – Coverage is effective the date you elect coverage, unless it requires proof of good health.

Coverage requiring proof of good health will not become effective until it has been approved by Minnesota Life.

### What is included in my life insurance plan?

Beyond paying a benefit in the event of your death, your group life insurance plan has other important features.

- **Accidental Death and Dismemberment** – Your current life insurance is matched by an equal amount if death is the result of a covered accident. Dismemberment benefits are paid according to the schedule in the policy.
- **Portability** – If you leave State employment, other than by retiring, you may continue your Optional coverage to age 70 by paying premiums directly to Minnesota Life. Retirement is not an event that allows portability. Premiums may be higher than those paid by active employees.
- **Waiver of Premium** – If you become disabled before age 60, your life insurance premiums may be waived.
- **Accelerated Death Benefit** – If an insured employee becomes terminally ill with a life expectancy of 12 months or less, he/she may request early payment of up to 100 percent of the life insurance amount (up to \$1,000,000, Basic and Optional combined).

### Why do I need to designate a beneficiary?

By naming a beneficiary, you are able to ensure that your life insurance benefit is being passed on to those you want to help the most.

Events such as marriage, birth/adoption of children, divorce, or death may dramatically change the intent of how you would want your life insurance benefit paid.

Some common beneficiary choices are:

- **Primary beneficiary** – The person or persons named will receive the benefit.
- **Contingent beneficiary** – If the primary beneficiary is no longer living, the benefit is paid to this person.
- **Default beneficiary** – If you do not name a beneficiary, policy benefits will be paid in order of the policy’s default beneficiary definition, as follows – spouse, children, parents, your estate.

### Online management of your beneficiary

You may use the secure website, [www.LifeBenefits.com/florida](http://www.LifeBenefits.com/florida), to view and make changes to your beneficiary.



## What additional services are available?

As an insured under the Basic Term Life plan, you have access to the following basic tools and resources.

### LifeSuite services

- **Beneficiary Financial Counseling** – Beneficiaries who receive at least \$25,000 in policy benefits may choose to use independent beneficiary counseling services from PricewaterhouseCoopers LLP.
- **Legal Services** – Ceridian provides employees and their dependents telephone access to a national network of 22,000+ accredited attorneys for consultation on simple wills, estate planning documents and other legal issues. Discounts are available for participating attorneys. Contact Ceridian at **1-877-849-6034** or visit **LifeWorks.com** (user name: *will* password: *preparation*).
- **Legacy Planning Services** – Active and retired employees, spouses and dependents can access resources designed to help individuals and families work through end-of-life issues when dealing with the loss of a loved one or planning for their own passing. These resources are available at **LegacyPlanningServices.com**.



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## Evidence of Insurability process

### How does the Evidence of Insurability (EOI) process work?

- If EOI is required, the applicant will fill out the EOI form and fax/mail to Minnesota Life.
- Underwriting may approve the coverage without needing additional information. Or
- If additional underwriting is required, the applicant may be asked to complete a questionnaire, provide access to medical records, take a medical exam, etc. Minnesota Life will directly notify the applicant of any additional medical requirements and will incur all of the costs associated with the entire underwriting process.

If it's determined that an exam is necessary, the applicant is able to schedule an exam over the phone using the instructions provided by Minnesota Life.

- Once all medical underwriting is complete, you will receive written notification from Minnesota Life regarding the underwriting decision.

Tip: To complete the EOI process in less time, you should first gather your medical records, including the name and address of physicians, hospitals and clinics you've visited in the past three years, as well as any details regarding diagnosis and treatment.

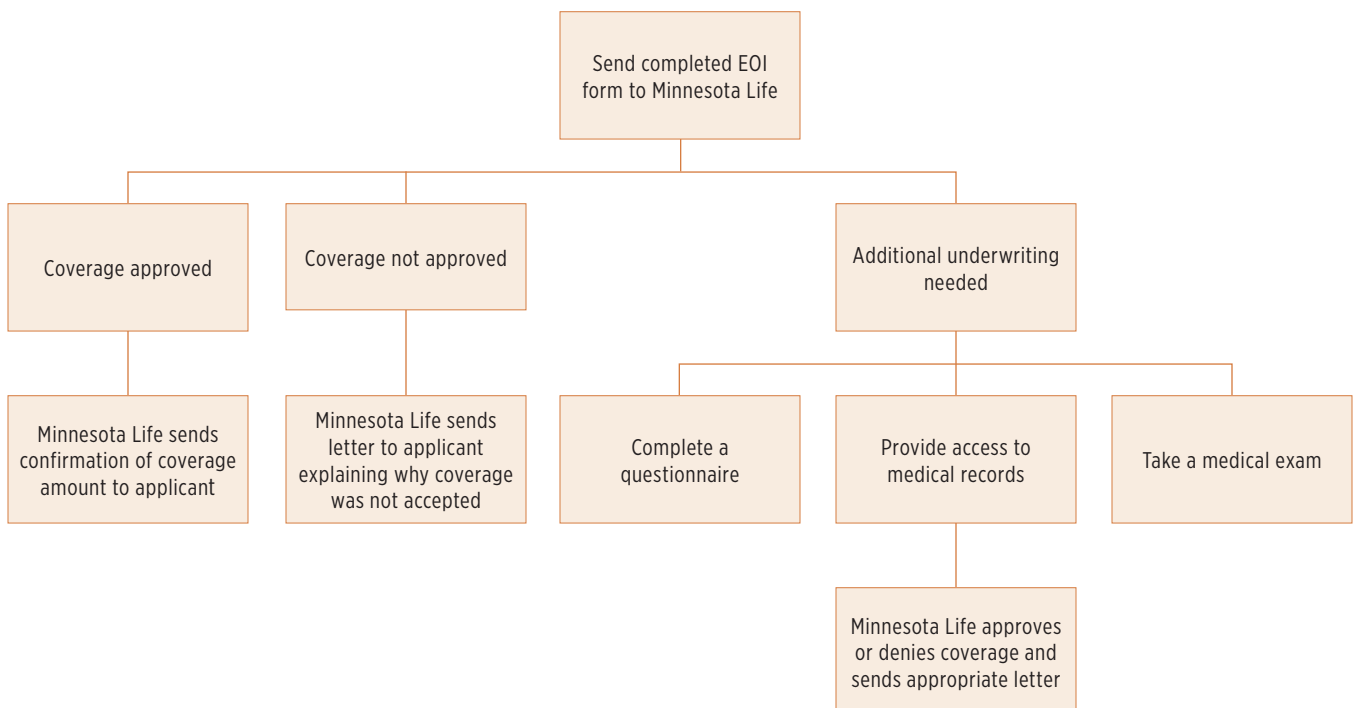
### What is Evidence of Insurability?

Evidence of Insurability (EOI), or proof of good health, is the medical underwriting process an employee must go through if he or she is:

- a) electing an insurance amount that exceeds the guaranteed issue limit; or
- b) applying after the guaranteed issue window; or
- c) increasing Optional Term Life by more than one level at annual enrollment or a qualified status change.

### EOI flow chart

The following flow chart provides an overview of the EOI process.



# Beneficiary Designation and Change Request

MINNESOTA LIFE

Minnesota Life Insurance Company - A Securian Company  
PO Box 14289 • Tallahassee, FL 32317-4289 • 1-888-826-2756 • Fax 1-850-878-0048

Policy number <b>33503</b>	Insured		
Insured's telephone number	Six or seven-digit People First ID number	Social Security number	Date of birth

Print owner's name and address below. New address ☐

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Call 1-888-826-2756  
with questions.

## INSTRUCTIONS:

1. Print or type in the space below, the full name, address, relationship to the employee and share % of each beneficiary to be named.
2. Sign and date the completed form and return it to Minnesota Life.
3. This designation applies to your Basic and any Optional coverage.
4. Return to Minnesota Life using the above address or fax number.

## CHANGE BENEFICIARY REVOKING ALL PRIOR DESIGNATIONS

The primary and contingent beneficiary(ies) determines the order in which beneficiaries become eligible to receive death proceeds. Surviving beneficiaries in any category share equally with beneficiaries in the same category unless otherwise specified. Use of the word "Children", without modification, includes only your biological children of first generation and adopted children. For revocable designations, this signed beneficiary designation, when accepted by Minnesota Life, is the only form needed to elect or change a designation under this policy. No other documents are required.

Name beneficiaries by category. To receive death proceeds, a beneficiary must survive the insured. In the event a beneficiary does not survive the insured, that beneficiary's portion shall be equally distributed to the remaining beneficiaries within that category. In the event of simultaneous death of the insured and a beneficiary, the death proceeds will be paid as if the insured survived the beneficiary.

*The same person cannot be named as a primary and a contingent beneficiary.*

## PRIMARY BENEFICIARY(IES) - The person or persons named will receive the proceeds

Beneficiary Full Name & Address	Relationship	Share % (for primary beneficiaries must total 100%)

Total = 100%

## CONTINGENT BENEFICIARY(IES) - If the primary beneficiary(ies) is no longer living, the benefit is paid to this person(s)

Beneficiary Full Name & Address	Relationship	Share % (for contingent beneficiaries must total 100%)

Total = 100%

## SIGNATURE REQUIRED

Policyowner's signature <b>X</b>	Date
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This product is offered under policy form series 07-30978.

## MINNESOTA LIFE

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### **Minnesota Life Insurance Company**

A Securian Company

### **Group Insurance - Tallahassee Office**

1909 Hillbrooke Trail, Suite 2, Tallahassee, FL 32311-4289

1-888-826-2756 • 850-878-0048 Fax • [www.LifeBenefits.com/florida](http://www.LifeBenefits.com/florida)

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