

Group name: Idaho AGC Benefit Trust

Policy number: 020715 **Effective Date:** 01/01/2025

Protection for you and your loved ones

Life insurance benefit summary



The importance of Life insurance

The right life insurance coverage can help protect your loved ones and help provide financial stability when they need it most. They can use the benefit to fund a child's education, pay off a mortgage or pay for everyday expenses.



Watch this quick video to learn more

Did you know?



More than 1/3 of households would feel the financial impact in less than 6 months if the primary wage earner died.1

Today, few have the coverage they need. And 48% of households (60 million) have an average life insurance coverage gap of

\$200,000



Supplemental Life/AD&D Benefit plan and features

Class definition: Class 1 – All Active Full Time Employees

Life Benefit	EmployeeSpouseIncrements of \$25,000Increments of \$5,000		Children Live birth to \$500 14 days:		
Life Benefit Amount					
			15 days to age 26:	Increments of \$2,000	
Life Maximum Benefit	The lesser of 5 times Basic Annual Earnings or \$300,000	\$100,000, not to exceed 50% of employee coverage amount	\$10,000		
Guaranteed Issue Amount	\$100,000	\$50,000	\$10,000		
Life Age Reduction					
Age 70 but less than 75	65%	Matches Employee	None		

Life Benefit	Employee	Spouse	Children		
Age 75 or over	50%	Matches Employee	None		
Any reduction pursuant to this provision will ta	ake place on the next Policyhold	der anniversary date			
Accelerated Death Benefit	75% up to \$250,000	75% up to \$250,000	Not Applicable		
Waiver of Premium	Included	Included	Included		
Portability	Included	Included	Included		
Conversion	Included	Included	Included		
Accidental Death & Dismemberment (AD&D) Benefit Amount	Increments of \$25,000	100% of Life Insurance Benefit	100% of Life Insurance Benefit		
AD&D Maximum Benefit	The lesser of 5 times Basic Annual Earnings or \$300,000	\$100,000, not to exceed 50% of employee coverage amount	\$10,000		
AD&D Age Reduction	Matches Life	Matches Life	None		
AD&D Features	Employee	Spouse	Children		
Common Carrier Benefit	Included	Not Applicable	Not Applicable		
Rehabilitation/Physical Therapy Benefit	Included	Included	Included		
Seatbelt and Airbag Benefits	Included	Included	Included		

Understanding your benefits

Commonly Used Term	ns
Guarantee Issue Amount	This is the amount of insurance available without having to provide evidence of insurability (also known as proof of good health).
Accelerated Death Benefit	Allows you access to a portion of your Life insurance while you are alive if you have a qualifying condition, such as a terminal illness, cognitive impairment, or the inability to perform two or more activities of daily living without assistance.
Waiver of Premium	Provides for the continuation of insurance without premium payment if you become disabled (details around ages).
Basic Annual Earnings	Means your regular rate of pay from your employer in effect on the date immediately prior to the date the covered loss occurs. It includes any deductions made for pre-tax contributions to a qualified deferred compensation plans, section 125 plan, or flexible spending account. It does not include commissions, bonuses, tips, tokens, overtime pay or any other fringe benefits or extra compensation.
Portability	Allows you to take your group term Life insurance coverage with you if you leave your employer.
Conversion	Allows you convert your group term Life insurance coverage to an individual, whole life policy if your coverage is reduced or ends.

Frequently Asked Questions

When can I enroll for coverage?

You can enroll when you are initially eligible, during any annual enrollment period, or within 31 days of a family status change. Evidence of insurability (also known as proof of good health) may be required. Please see your coverage certificate for details.

When can I change my amount of You can change your amount of coverage during any annual enrollment period or within 31 coverage? days of a family status change. Evidence of insurability (also known as proof of good health) may be required. Please see your coverage certificate for details. Are my spouse and dependent children Yes, your spouse, domestic partner, or civil union partner and your dependent children are eligible for coverage? eligible for coverage. Your dependent children are eligible for coverage up to the date on which they turn 26 years old. Does the coverage decrease as I get older? Yes, the age reductions are shown in the "Benefit Plan & Features" section. The coverage on you and your spouse will reduce on the next Policyholder anniversary date following your attainment of the ages shown. The percentages referenced are what the coverage reduces to and are all based on the original amount of coverage. For example, if you are covered for \$50,000 and the coverage reduces to 65% at age 65, your coverage will reduce to \$32,500 on the policy anniversary following your 65th birthday. Is the accidental death benefit in addition Yes, if the insured dies as a result of a covered accident, the beneficiary will receive both the to the life benefit? life and accidental death benefits. Can I elect AD&D insurance only? No, you must elect Life insurance in order to be eligible to elect AD&D insurance. How do I port or convert my coverage? Contact your employer's HR department for the applicable portability and/or conversion forms. You can also call Equitable customer service at (866)274-9887 or access the forms at https://equitable.com/employee-benefits/customer-service/forms. How much does the portability coverage The rate for portability coverage is the same as the rate under your employer's plan. cost? How do I name a beneficiary? Your employer will provide you with a form that will allow you to name primary and contingent beneficiaries. Or you can add in the SIMON benefit administration system. Can I change my beneficiary? Yes, you just need to complete a new beneficiary form and be sure to provide a copy to your employer. What happens if I die and didn't name a The insurance proceeds may be paid out to a specific family member or your estate, check beneficiary? your insurance certificate for the language applicable to your plan.

Monthly Premiums -- Employee

Face Amount	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+	AD&D
\$25,000	\$1.68	\$1.75	\$2.35	\$2.98	\$3.55	\$5.28	\$8.78	\$15.63	\$21.95	\$40.40	\$65.43	\$65.43	\$65.45	\$1.75
\$50,000	\$3.35	\$3.50	\$4.70	\$5.95	\$7.10	\$10.55	\$17.55	\$31.25	\$43.90	\$80.80	\$130.85	\$130.85	\$130.90	\$3.50
\$75,000	\$5.03	\$5.25	\$7.05	\$8.93	\$10.65	\$15.83	\$26.33	\$46.88	\$65.85	\$121.20	\$196.28	\$196.28	\$196.35	\$5.25
\$100,000	\$6.70	\$7.00	\$9.40	\$11.90	\$14.20	\$21.10	\$35.10	\$62.50	\$87.80	\$161.60	\$261.70	\$261.70	\$261.80	\$7.00
\$125,000	\$8.38	\$8.75	\$11.75	\$14.88	\$17.75	\$26.38	\$43.88	\$78.13	\$109.75	\$202.00	\$327.13	\$327.13	\$327.25	\$8.75
\$150,000	\$10.05	\$10.50	\$14.10	\$17.85	\$21.30	\$31.65	\$52.65	\$93.75	\$131.70	\$242.40	\$392.55	\$392.55	\$392.70	\$10.50
\$175,000	\$11.73	\$12.25	\$16.45	\$20.83	\$24.85	\$36.93	\$61.43	\$109.38	\$153.65	\$282.80	\$457.98	\$457.98	\$458.15	\$12.25
\$200,000	\$13.40	\$14.00	\$18.80	\$23.80	\$28.40	\$42.20	\$70.20	\$125.00	\$175.60	\$323.20	\$523.40	\$523.40	\$523.60	\$14.00
\$225,000	\$15.08	\$15.75	\$21.15	\$26.78	\$31.95	\$47.48	\$78.98	\$140.63	\$197.55	\$363.60	\$588.83	\$588.83	\$589.05	\$15.75
\$250,000	\$16.75	\$17.50	\$23.50	\$29.75	\$35.50	\$52.75	\$87.75	\$156.25	\$219.50	\$404.00	\$654.25	\$654.25	\$654.50	\$17.50
\$275,000	\$18.43	\$19.25	\$25.85	\$32.73	\$39.05	\$58.03	\$96.53	\$171.88	\$241.45	\$444.40	\$719.68	\$719.68	\$719.95	\$19.25
\$300,000	\$20.10	\$21.00	\$28.20	\$35.70	\$42.60	\$63.30	\$105.30	\$187.50	\$263.40	\$484.80	\$785.10	\$785.10	\$785.40	\$21.00

To calculate Employee premium:							
Age =	Amount of Coverage =	Monthly Premium = \$					
Examples:							
Age = <u>43</u>	Amount of Coverage = \$100,000	Monthly Premium = \$14.20					
Age = <u>68</u>	Amount of Coverage = \$250,000	Monthly Premium = \$421.50					
Age = <u>29</u>	Amount of Coverage = \$300,000	Monthly Premium = \$21.00					

If electing AD&D, be sure to add the AD&D monthly premium.

Monthly Premiums -- Spouse

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Face Amount	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+	AD&D
\$5,000	\$0.34	\$0.35	\$0.47	\$0.60	\$0.71	\$1.06	\$1.76	\$3.13	\$4.39	\$8.08	\$13.09	\$13.09	\$13.09	\$0.35
\$10,000	\$0.67	\$0.70	\$0.94	\$1.19	\$1.42	\$2.11	\$3.51	\$6.25	\$8.78	\$16.16	\$26.17	\$26.17	\$26.18	\$0.70
\$15,000	\$1.01	\$1.05	\$1.41	\$1.79	\$2.13	\$3.17	\$5.27	\$9.38	\$13.17	\$24.24	\$39.26	\$39.26	\$39.27	\$1.05
\$20,000	\$1.34	\$1.40	\$1.88	\$2.38	\$2.84	\$4.22	\$7.02	\$12.50	\$17.56	\$32.32	\$52.34	\$52.34	\$52.36	\$1.40
\$25,000	\$1.68	\$1.75	\$2.35	\$2.98	\$3.55	\$5.28	\$8.78	\$15.63	\$21.95	\$40.40	\$65.43	\$65.43	\$65.45	\$1.75
\$30,000	\$2.01	\$2.10	\$2.82	\$3.57	\$4.26	\$6.33	\$10.53	\$18.75	\$26.34	\$48.48	\$78.51	\$78.51	\$78.54	\$2.10
\$35,000	\$2.35	\$2.45	\$3.29	\$4.17	\$4.97	\$7.39	\$12.29	\$21.88	\$30.73	\$56.56	\$91.60	\$91.60	\$91.63	\$2.45
\$40,000	\$2.68	\$2.80	\$3.76	\$4.76	\$5.68	\$8.44	\$14.04	\$25.00	\$35.12	\$64.64	\$104.68	\$104.68	\$104.72	\$2.80
\$45,000	\$3.02	\$3.15	\$4.23	\$5.36	\$6.39	\$9.50	\$15.80	\$28.13	\$39.51	\$72.72	\$117.77	\$117.77	\$117.81	\$3.15
\$50,000	\$3.35	\$3.50	\$4.70	\$5.95	\$7.10	\$10.55	\$17.55	\$31.25	\$43.90	\$80.80	\$130.85	\$130.85	\$130.90	\$3.50
\$55,000	\$3.69	\$3.85	\$5.17	\$6.55	\$7.81	\$11.61	\$19.31	\$34.38	\$48.29	\$88.88	\$143.94	\$143.94	\$143.99	\$3.85
\$60,000	\$4.02	\$4.20	\$5.64	\$7.14	\$8.52	\$12.66	\$21.06	\$37.50	\$52.68	\$96.96	\$157.02	\$157.02	\$157.08	\$4.20
\$65,000	\$4.36	\$4.55	\$6.11	\$7.74	\$9.23	\$13.72	\$22.82	\$40.63	\$57.07	\$105.04	\$170.11	\$170.11	\$170.17	\$4.55
\$70,000	\$4.69	\$4.90	\$6.58	\$8.33	\$9.94	\$14.77	\$24.57	\$43.75	\$61.46	\$113.12	\$183.19	\$183.19	\$183.26	\$4.90
\$75,000	\$5.03	\$5.25	\$7.05	\$8.93	\$10.65	\$15.83	\$26.33	\$46.88	\$65.85	\$121.20	\$196.28	\$196.28	\$196.35	\$5.25
\$80,000	\$5.36	\$5.60	\$7.52	\$9.52	\$11.36	\$16.88	\$28.08	\$50.00	\$70.24	\$129.28	\$209.36	\$209.36	\$209.44	\$5.60
\$85,000	\$5.70	\$5.95	\$7.99	\$10.12	\$12.07	\$17.94	\$29.84	\$53.13	\$74.63	\$137.36	\$222.45	\$222.45	\$222.53	\$5.95
\$90,000	\$6.03	\$6.30	\$8.46	\$10.71	\$12.78	\$18.99	\$31.59	\$56.25	\$79.02	\$145.44	\$235.53	\$235.53	\$235.62	\$6.30
\$95,000	\$6.37	\$6.65	\$8.93	\$11.31	\$13.49	\$20.05	\$33.35	\$59.38	\$83.41	\$153.52	\$248.62	\$248.62	\$248.71	\$6.65
\$100,000	\$6.70	\$7.00	\$9.40	\$11.90	\$14.20	\$21.10	\$35.10	\$62.50	\$87.80	\$161.60	\$261.70	\$261.70	\$261.80	\$7.00

If electing AD&D, be sure to add the AD&D monthly premium.

Monthly Premiums -- Child(ren)

Face Amount	Life Premium	Total	
\$2,000	\$0.22	\$0.14	\$0.36
\$4,000 \$0.44		\$0.28	\$0.72
\$6,000	\$0.66	\$0.42	\$1.08
\$8,000 \$0.88		\$0.56	\$1.44
\$10,000	\$1.10	\$0.70	\$1.80

	To calcula Child(ren) premium:				
Amount of Coverage =		Monthly Premium = \$			
	Examples:				
	Amount of Coverage = \$2,000	Monthly Premium = \$.22			
	Amount of Coverage = \$10,000	Monthly Premium = \$1.10			
If electing AD&D, be sure to add the AD&D monthly premium.					
	One monthly premium for all children, re	egardless of the number of children covered.			



Contact us at (866) 274-9887 with any questions you may have.

This includes questions on how we can provide language translation services at no cost to you and how we can assist the visually impaired with form completion and other information.

Email: Customer Service at EBCustomerService@equitable.com.



Members requiring assistance with hearing impairment can contact our TDD line directly at (800) 877-8973.

Visit equitable.com/employeebenefits and log on to EB360® to view your account details.

Important Information

Limitations and exclusions: The following is a summary. A complete list of applicable exclusions and limitations are included in the policy and certificate. State variations may apply. If an Insured Person dies by suicide within two years from their coverage issue date, we will only pay the amount of premiums paid. AD&D Benefits may not be payable for injuries caused or contributed to by or incurred: physical or mental illness or disease or related medical treatment, infection not occurring as a direct result of accidental bodily injury, suicide or intentionally self-inflicted injury, war or act of war, while incarcerated, participating in a felony or illegal activity, intoxication, voluntary drug use unless administered by and used as instructed by a physician or for over-the-counter drugs in accordance with manufacturer's instructions, participation in certain activities involving an increased risk of injury as listed in the policy and certificate (ex: mountain climbing, sky diving).

This policy provides limited benefits: The policy has limitations and exclusions. Optional riders and/or features may incur additional costs. For costs and complete details of the coverage, please see the actual policy or contact your benefits representative. Benefits payable are subject to all terms and conditions of the certificate. Plan documents are the final arbiter of coverage. Policy contract forms: ICC18 MOEBPLI; ICC18 AXEBPLI; MOEBP0618 LI; AXEBP0618 LI; and state variations.

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¹ 2022 Insurance Barometer Study, Life Happens and LIMRA.

² limra.com/en/newsroom/news-releases/2021/industry-associations-unite-to-help-address-the-life-insurance-coverage-gap-in-the-united-states/, accessed August 2022.

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