



All Full-Time Employees of Care Providers Insurance Services, LLC

Benefits At-A-Glance

Voluntary AD&D Insurance

The Lincoln AD&D Insurance Plan:

- Provides a cash benefit to your loved ones if you die in an accident
- Provides a cash benefit to you if you suffer a covered loss in an accident
- Features group rates for Care Providers Insurance Services, LLC employees
- Includes *LifeKeys*[®] services, which provide access to counseling, financial, and legal support
- Also includes *TravelConnect*SM services, which give you and your family access to emergency medical assistance when you're on a trip 100+ miles from home

Employee	
Maximum coverage amount	5 times your annual salary (\$500,000 maximum) in \$10,000 increments
Minimum coverage amount	\$10,000

Your employee AD&D coverage amount will reduce by 35% when you reach age 65 and an additional 15% of the original amount when you reach age 70. Benefits end when you retire.

Spouse	
Maximum coverage amount	50% of the employee coverage amount (\$100,000 maximum) in \$5,000 increments
Minimum coverage amount	\$5,000

You can secure AD&D insurance for your spouse if you select coverage for yourself.

The spouse AD&D coverage amount will reduce by 35% when the spouse reaches age 65. Benefits end when you reach age 70.

Dependent Children	
6 months to age 19 (to age 25 if full-time student) Maximum coverage amount	Up to \$10,000 in \$1,000 increments
Minimum coverage amount	\$1,000
Age 15 Days to 6 months Maximum coverage amount	\$500

You can secure AD&D insurance for your dependent children when you choose coverage for yourself.

Additional Plan Benefits	
Safe Driver Benefit	Included
Education Benefit	Included
Spouse Training Benefit	Included
Felonious Assault	Included
Child Care Benefit	Included
Coma Benefit	Included
Common Disaster Benefit	Included
Exposure Benefit	Included
Disappearance Benefit	Included
Common Carrier Benefit	Included
Repatriation Benefit	Included

Note: See the policy for details and specific requirements for each of these benefits

Benefit Exclusions

Like any insurance, this AD&D insurance policy does have exclusions. Benefits will not be paid if death results from suicide, or death/dismemberment occurs while:

- Intentionally inflicting or attempting to inflict injury to one's self
- Participating in a war, act of war, or riot
- Serving on full-time active duty in the armed forces of any state or country (this does not include duty of 30 days or less training in the Reserves or National Guard)
- Flying on any non-commercial airplane or aircraft, such as a hot air balloon or glider (see the contract for details and exceptions)
- Flying on a commercial airline or aircraft as a pilot or crewmember
- Committing or attempting to commit a felony
- Deliberately inhaling gas (such as carbon monoxide) or using drugs other than those taken as prescribed by a licensed physician
- Driving while intoxicated, impaired, or under the influence of drugs

In addition, this AD&D insurance policy does not cover sickness or disease, including the medical and surgical treatment of a disease.

A complete list of benefit exclusions is included in the policy. State variations apply.

Questions? Call 800-423-2765 and mention Group ID: NSMINS.

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the contract, the contract will govern.

LifeKeys® services are provided by ComPsych® Corporation, Chicago, IL. *TravelConnect*® travel assistance services are provided by On Call International, Salem NH. On Call International must coordinate and provide all arrangements in order for eligible services to be covered. ComPsych® and On Call International are not Lincoln Financial Group companies and Lincoln Financial Group does not administer these Services. Each independent company is solely responsible for its own obligations. Coverage is subject to contract language that contains specific terms, conditions, and limitations.

Insurance products (policy series GL1101) are issued by The Lincoln National Life Insurance Company (Fort Wayne, IN), which does not solicit business in New York, nor is it licensed to do so. Product availability and/or features may vary by state. Limitations and exclusions apply.



Voluntary Accidental Death & Dismemberment Insurance

Here's how little you pay with group rates.

Monthly Premium Calculation for You

The estimated monthly premium for AD&D insurance is determined by multiplying the desired amount of coverage (in increments of \$10,000) by the premium rate. **See table at right for select coverage amounts.**

$$\begin{array}{ccccccc} \$ & \underline{\hspace{2cm}} & \times & \underline{0.0000200} & = & \$ & \underline{\hspace{2cm}} \\ \text{coverage amount} & & & \text{premium rate} & & & \text{monthly premium} \end{array}$$

Note: Rates are subject to change and can vary over time.

Coverage Amount	Monthly Premium
\$10,000	\$0.20
\$20,000	\$0.40
\$50,000	\$1.00
\$100,000	\$2.00
\$500,000	\$10.00

Monthly Premium Calculation for Your Spouse

The estimated monthly premium for AD&D insurance is determined by multiplying the desired amount of coverage (in increments of \$5,000) by the premium rate. **See table at right for select coverage amounts.**

$$\begin{array}{ccccccc} \$ & \underline{\hspace{2cm}} & \times & \underline{0.0000200} & = & \$ & \underline{\hspace{2cm}} \\ \text{coverage amount} & & & \text{premium rate} & & & \text{monthly premium} \end{array}$$

Note: Rates are subject to change and can vary over time.

Coverage Amount	Monthly Premium
\$5,000	\$0.10
\$10,000	\$0.20
\$25,000	\$0.50
\$50,000	\$1.00
\$100,000	\$2.00

Monthly Premium Calculation for Your Dependent Children

The estimated monthly premium for AD&D insurance is determined by multiplying the desired amount of coverage (in increments of \$10,000) by the premium rate. **See table at right for select coverage amounts.**

$$\begin{array}{ccccccc} \$ & \underline{\hspace{2cm}} & \times & \underline{0.0000200} & = & \$ & \underline{\hspace{2cm}} \\ \text{coverage amount} & & & \text{premium rate} & & & \text{monthly premium} \end{array}$$

Note: Rates are subject to change and can vary over time.

Coverage Amount	Monthly Premium
\$1000	\$0.02
\$2000	\$0.04
\$3000	\$0.06
\$4000	\$0.08
\$5000	\$0.10
\$6000	\$0.12
\$7000	\$0.14
\$8000	\$0.16
\$9000	\$0.18
\$10000	\$0.20

Note: You must be an active Care Providers Insurance Services, LLC employee to select coverage for a spouse and/or dependent children. To be eligible for coverage, a spouse or dependent child cannot be confined to a health care facility or unable to perform the typical activities of a healthy person of the same age and gender.

The Lincoln National Life Insurance Company
Please see prior page for product information.

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