



Thermal Mechanics, Inc. #602022

Voluntary Life and AD&D

- This is your time to make elections without having to answer any medical questions or have a physical. After this enrollment period, elections will require medical data.
- **NO MEDICAL QUESTIONS ASKED COVERAGE**
 - \$100,000 guaranteed issue coverage available for employees.
 - \$25,000 guaranteed issue coverage available for spouses.
 - \$10,000 guaranteed issue coverage available for children.
 - If you elect over these amounts, please complete the Evidence of Insurability form.
- Employees can elect up to 5 times your annual salary (max of \$500,000).
 - Up to \$100,000 without answering any medical questions/physical.
- Spouses can have up to 100% of the employee election.
 - Up to \$25,000 without answering any medical questions/physical.
 - Employee must elect coverage in order for a spouse to obtain coverage.
- Children have a \$10,000 benefit.
 - Employee must elect coverage in order for a child to obtain coverage.
 - **One child rate covers all of an employee's children.**
- A rate chart can be found on the back of this page.
- Pay through the convenience of payroll deduction.
- Term Life Insurance at affordable group rates.
- This is coverage that can be taken with you if you leave employment.
 - The cost of taking the coverage with you is the same as what you pay as an employee.

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Life & AD&D Monthly Rates

Age Band	Employee per \$10,000	Spouse per \$5,000	Child per \$10,000
15- 24	1.150	0.580	\$1.990
25-29	1.150	0.580	NOTE: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have.
30-34	1.250	0.630	
35-39	1.450	0.730	
40-44	2.050	1.030	
45-49	3.250	1.630	
50-54	5.750	2.880	
55-59	8.950	4.480	
60-64	10.450	5.230	
65-69	18.550	9.280	
70-74	35.850	9.280	
75+	95.640	9.280	

Term Life & AD&D Calculation	Coverage Amount	Increment	Rate	Monthly Cost
Employee	\$ ____ /	\$10,000 x	\$ ____ =	\$ _____
Spouse	\$ ____ /	\$5,000 x	\$ ____ =	\$ _____
Child	\$ ____ /	\$10,000 x	\$ ____ =	\$ _____
YOUR MONTHLY COST				\$ _____