

BENEFIT PROGRAM SUMMARY ILLINOIS INSTITUTE OF TECHNOLOGY - #F011088

A simple, economical way to plan for your and your family's future. The voluntary coverage is payroll deducted and sponsored by your employer at a conveniently cost effective rate. Most families depend upon each paycheck to pay expenses and plan for the future. In the unexpected event of death, life insurance provides immediate financial assistance for you and your family when it is most needed.

VOLUNTARY GROUP TERM LIFE / AD&D

Eligibility	All Eligible Active Full Time Employees
Voluntary Group Term Life Benefit: Employee	Choice of 1, 2, 3, 4, 5, 6, or 7 times annual salary, rounded to the next higher \$1,000, to a maximum of \$1,000,000.
Voluntary Group Term Life Benefit: Spouse	\$10,000 - \$100,000 in \$10,000 increments, not to exceed 50% of the employee benefit.
Voluntary Group Term Life Benefit: Child(ren)	\$5,000 or \$10,000 (Age 15 days to 6 months - \$100; 6 months to age 19, 23 if full time student – Full Benefit)

Important 2015 Open Enrollment Information

Employee

- This is a LIMITED Open Enrollment for Employees.
- All previous coverage will remain in place UNLESS you are applying for an increased amount.
- Employees may increase current Voluntary coverage amount to \$500,000 (not to exceed 2x your salary) at this time with no Evidence of Insurability (E of I) required.
- If you have not applied for coverage in the past or have been denied, you may do so now with no Evidence of Insurability (E of I) required. The new guarantee issue is the lessor of 2x basic annual salary or \$500,000.

Spouse

- This is a LIMITED Open Enrollment for Spouses.
- All current coverage will remain in place UNLESS spouse is applying for an increase amount.
- Spouse may increase current coverage up to \$50,000, with no Evidence of Insurability (E of I) required. Spouses adding new coverage will require satisfactory evidence of insurability.

Child(ren)

- All current coverage will remain in place. Coverage can be added with no Evidence of Insurability (E of I) required.

If you wish to provide coverage for your children you may, however the employee must be covered under the voluntary life coverage.

Voluntary AD&D

You have the option of purchasing Voluntary AD&D coverage. However, Voluntary AD&D may not be purchased separately. You must apply for Voluntary Group Life insurance if you wish to select Voluntary AD&D coverage. Satisfactory Evidence of Insurability may be required for Voluntary Group Life insurance. If your application for life insurance is declined, no AD&D coverage will be issued.

Individual Plan – allows you to choose 1, 2, or 3 times your basic annual salary to a maximum of \$500,000.

Family Plan – allows you to choose 1, 2, or 3 times your basic annual salary to a maximum of \$500,000. Spouse benefit is equal to 50% of the employee amount, and the dependent child benefit is equal to 10% of the employee amount.

Age Reduction Schedule - Life and AD&D benefits reduce to 65% of the original amount upon attainment of age 65, to 45% of the original amount upon attainment of age 70, to 30% of the original amount upon attainment of age 75, and to 15% of the original amount upon attainment of age 80.

Waiver of Premium (Employee Only)	If an employee is unable to engage in any occupation as a result of injury or sickness for a minimum of 6 months, prior to age 60, premium will be waived for the employee's life insurance benefit until the employee is no longer disabled or reaches age 65, whichever occurs first.
Accelerated Death Benefit (ADB)	Upon the employee's request, this benefit pays a lump sum up to 75% of the employee's Life insurance, if diagnosed with a terminal illness and has a life expectancy of 12 months or less. Minimum: \$10,000. Maximum: \$250,000. The amount of group term life insurance otherwise payable upon the employee's death will be reduced by the ADB.
Portability Feature; Conversion Privilege	Included.
Exclusions	A one-year suicide exclusion applies to Voluntary Group Term Life.

Refer to your certificate for complete details and limitations of coverage. This information is only a product highlight. Life benefits may be subject to medical underwriting. Coverage for a medically underwritten benefit is not effective until the date the insurer has approved the employee's application. The policy has exclusions, limitations, and reduction of benefits and/or terms under which the policy may be continued or discontinued. The policy may be cancelled by the insurer at any time. The insurer reserves the right to change premium rates, but not more than once in a 12-month period. Refer to your certificate for complete details and limitations of coverage. (For Internal Use Only: FDL Policy number FDL1-2230-999).

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VOLUNTARY GROUP ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) PROGRAM SUMMARY

Group AD&D is an additional death benefit that pays in the event a covered employee dies or is dismembered in a covered accident. AD&D benefit is 24-hour coverage.

AD&D Schedule of Loss*	Principal Sum
Loss of Life	100%
Loss of Both Hands or Both Feet	100%
Loss of One Hand and One Foot	100%
Loss of Speech and Hearing	100%
Loss of Sight of Both Eyes	100%
Loss of One Hand and the Sight of One Eye	100%
Loss of One Foot and the Sight of One Eye	100%
Loss of Sight of One Eye	50%
Loss of One Hand or One Foot	50%
Loss of Speech or Hearing	50%
Loss of Thumb and Index Finger on Same Hand	25%

* Loss must occur within 365 days of the accident.

AD&D Product Features Included:

- Seatbelt and Airbag Benefits
- Common Disaster Benefit
- Repatriation Benefit
- Education Benefit

Exclusions - We will not pay any benefit for any loss that, directly or indirectly, results in any way from or is contributed to by:

1. any disease or infirmity of mind or body, and any medical or surgical treatment thereof; or
2. any infection, except a pus-forming infection of an accidental cut or wound; or
3. suicide or attempted suicide, while sane or insane; or
4. any intentionally self-inflicted Accident; or
5. war, declared or undeclared, whether or not the Employee is a member of any armed forces; or
6. travel or flight in an aircraft while a member of the crew, or while engaged in the operation of the aircraft, or giving or receiving training or instruction in such aircraft; or
7. commission of, participation in, or an attempt to commit an assault or felony; or
8. being under the influence of any narcotic, hallucinogen, barbiturate, amphetamine, gas or fumes, poison or any other controlled substance as defined in Title II of the comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless as prescribed by the Employee's licensed physician and used in the manner prescribed. Conviction is not necessary for a determination of being under the influence; or
9. intoxication as defined by the laws of the jurisdiction in which the accident occurred. Conviction is not necessary for a determination of being intoxicated;
10. active participation in a riot. "Riot" means all forms of public violence, disorder, or disturbance of the public peace, by three or more persons assembled together, whether with or without a common intent and whether or not damage to person or property or unlawful act is the intent or the consequence of such disorder.

This information is only a product highlight. Life benefits may be subject to medical underwriting. Coverage for a medically underwritten benefit is not effective until the date the insurer has approved the employee's application. The policy has exclusions, limitations, and reduction of benefits and/or terms under which the policy may be continued or discontinued. The policy may be cancelled by the insurer at any time. The insurer reserves the right to change premium rates, but not more than once in a 12-month period. Refer to your certificate for complete details and limitations of coverage. (For Internal Use Only: FDL Policy number FDL1-2230-999)

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