

# Option to Port Group Term Life Insurance for Employees of City of St. Paul & Their Dependents

Offered by **MINNESOTA LIFE**

Employees previously insured under the City of St. Paul Term Life insurance program may elect to continue all or a portion of their in force insurance, as well as any in force insurance for dependents.

Life insurance coverage not eligible for portability may be converted to an individual policy without providing evidence of insurability. See the enclosed comparison chart to determine eligibility for portability versus conversion. Conversion is also available when ported coverage ends for an individual.

## About Portability

Portability takes place after an employee has completed their 18-Month Continuation. Portability allows employees to continue Group Term Life insurance to age 70 – no evidence of insurability required!

## Eligibility

*You have 31 days from the date your previous coverage terminated to apply for portability. You become eligible to enroll for portable coverage if you are under 70 years old and your group coverage ends because:*

- You retire or otherwise terminate employment; or
- You are laid off or are on a non-medical leave and can no longer continue coverage through your employer; or
- You otherwise lose eligibility under your employer's plan.

You are not eligible to port your coverage if:

- You were not actively at work due to sickness or injury on the day before your group eligibility ended; or
- The employer has canceled the group policy.

## Portable insurance amounts for you

You can port all or a portion of your Basic and Supplemental Term Life insurance coverage currently in force, to a maximum of \$500,000 (maximum of 65% of your current amount to \$325,000 if age 65 or older).

Your coverage reduces to 65% at age 65 and terminates at age 70.

## Portable insurance amounts for your dependents

*You may elect to continue coverage for your dependents only if you continue coverage for yourself.*

**Spouse** – You can port all or a portion of your spouse life insurance currently in force, up to a maximum of \$150,000 (maximum of 65% of current amount to \$97,500 if age 65 or older). Coverage reduces to 65% at age 65 and terminates at the earlier of spouse's or employee's age 70.

**Children** – You may continue all or a portion of your child coverage currently in force.

## Additional dependent coverage information

*All dependent coverage ends when you reach age 70 or when the dependent is no longer an eligible dependent.*

Action must be taken to terminate dependent coverage if any of the following events occur:

- Divorce or legal separation from your spouse.
- Children are no longer eligible for coverage. Children are eligible from live birth to age 26.

## Election of portable coverage

To elect portable coverage, complete the Portability Election form and send it to Minnesota Life within 31 days after the date your group coverage ends. Please fax or mail your completed form to:

Minnesota Life Insurance Company  
Group Administration Department  
400 Robert Street North  
St. Paul, MN 55101

Or fax to: 651-665-4827

## Premium payment options

Minnesota Life will bill you for the first premium payment after receiving your completed election form. On the election form, you can elect one of the following billing frequencies:

- Be billed quarterly, semi-annually or annually (a \$2.00 administrative fee is charged *per premium payment* if you choose to be billed quarterly or semi-annually).
- Have monthly premium payments automatically deducted from your checking account through Electronic Funds Transfer (EFT). No administrative fees apply.

## Questions

If you have any questions about continuing your coverage, please contact Minnesota Life at 866-293-6047.

## Portable coverage – monthly premiums

The following are monthly premium rates for portable coverage. Note that premium rates for you and your spouse are based on age and the coverage amounts you elect. **Premiums will increase with age and are subject to change.**

Term Life Employee and Spouse Monthly Rate Per \$1,000	
Age	Monthly Rate Per \$1,000
Under 30	\$0.080
30 – 34	\$0.100
35 – 39	\$0.100
40 – 44	\$0.140
45 – 49	\$0.220
50 – 54	\$0.360
55 – 59	\$0.660
60 – 64	\$1.040
65 – 69	\$1.980

Child Term Life Monthly Rate Per \$1,000	
For all eligible children	\$0.140

All rates are subject to change.

## Monthly premium calculation

Divide the amount of insurance you are electing by 1,000. This is referred to as the number of units of insurance. Multiply the units of insurance by the rate listed for your age in the table to determine your monthly premium.

For example, if you are a 44-year-old employee and elect to continue \$100,000 of insurance, the following would be the calculation for your monthly premium.

$$\begin{array}{r} \$100,000 \div 1,000 = 100 \text{ Units of insurance} \\ \quad \quad \quad \times 0.140 \text{ Rate per unit} \\ \quad \quad \quad \hline \quad \quad \quad \$14.00 \text{ Monthly premium} \end{array}$$

In this example the employee's total monthly cost for porting \$100,000 of term life insurance is \$14.00.

## Differences between porting and converting your Group Coverage

	Portability	Conversion
<b>Eligible coverage</b>	<ul style="list-style-type: none"> <li>▪ Basic and Supplemental Term Life coverage can be ported.</li> <li>▪ Dependent coverage can only be ported if employee coverage is ported.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Basic and Supplemental Term Life coverage can be converted.</li> <li>▪ Dependent Term Life coverage can be converted even if employee coverage is not converted.</li> </ul>
<b>Type of insurance following election</b>	Group Term Life	Individual Life policy
<b>Eligibility timing</b>	Must be elected within 31 days of event below	Must be elected within 31 days of event below
<b>Events allowing portability/conversion</b>	Coverage is lost due to: <ul style="list-style-type: none"> <li>▪ Retirement</li> <li>▪ Termination of employment</li> <li>▪ Layoff or non-medical leave</li> <li>▪ Other loss of eligibility</li> </ul>	Coverage is lost due to: <ul style="list-style-type: none"> <li>▪ Retirement</li> <li>▪ Termination of employment</li> <li>▪ Layoff or leave</li> <li>▪ Loss of eligibility</li> <li>▪ Termination of group policy</li> </ul>
<b>Not allowed for</b>	Coverage is lost due to: <ul style="list-style-type: none"> <li>▪ Termination of group policy</li> <li>▪ Employee not actively at work due to sickness or injury</li> <li>▪ Nonpayment of premium</li> </ul>	Coverage is lost due to: <ul style="list-style-type: none"> <li>▪ Nonpayment of premium</li> </ul>
<b>Guaranteed issue</b>	All guaranteed issue	All guaranteed issue
<b>Maximum age to elect</b>	Employee: Age 69 Spouse: Employee's or spouse's age 69 Child: Qualifying age or employee's age 69	No maximum age
<b>Minimum amount allowed</b>	Employee: \$10,000 Spouse: \$1,000 Child: \$1,000	No minimum
<b>Maximum amount allowed</b>	Employee: Previous amount in force to maximum of \$500,000 (65% of previous amount to maximum of \$325,000 if 65 or older) Spouse: Previous amount in force up to a maximum of \$150,000 (65% of previous amount to a maximum of \$97,500 if age 65 or older) Child: Previous amount in force	Previous amount in force unless conversion is due to policy or class termination. If conversion is due to policy or class termination, there may be a limitation, depending on applicable state law.
<b>Age reductions</b>	Employee and spouse coverage reduces to 65% at age 65.	No age reductions
<b>Termination age</b>	Employee: Age 70 Spouse: Employee's or spouse's age 70 Child: Qualifying age limit or employee's age 70	No termination age

# Portability Election

**MINNESOTA LIFE**

Minnesota Life Insurance Company - A Securian Company  
 Group Administration Department • 400 Robert Street North • St. Paul, Minnesota 55101-2098

Employer name <b>City of St. Paul</b>	Policy number <b>27216</b>
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**Employee Information**

Name	Date of birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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Address (street, city, state, zip)	Telephone number
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Date leaving employer's active plan	Reason for leaving the employer's active plan (retirement, termination of employment, etc.)
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Were you actively at work on the day before your retirement or termination? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered no, was your absence due to illness or injury? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Current term life amount \$	Term life amount to be continued \$
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Primary beneficiary designation (include full name and address) <i>The person or persons named will receive the benefit.</i>	Relationship	Share % (Primary beneficiaries <i>must</i> total 100%)
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Contingent beneficiary designation (include full name and address) <i>If the primary beneficiary(ies) is no longer living, the benefit is paid to this person(s).</i>	Relationship	Share % (Contingent beneficiaries <i>must</i> total 100%)
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**Dependent Information**

Current spouse term life amount \$	Amount to be continued \$
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Name of spouse	Date of birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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Current child term life amount \$	Amount to be continued \$
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Please fill out the information below for each eligible child.

Name of child	Date of birth	Name of child	Date of birth
Name of child	Date of birth	Name of child	Date of birth

Please indicate how you would like to be billed:

- Quarterly  Semi-Annually  Annually

**Do not send a premium payment in with this completed form.** Minnesota Life will bill you for the first premium payment after receiving your completed election form. Future premiums may be billed quarterly, semi-annually or annually. Or, you may elect monthly premium payments through Electronic Funds Transfer (EFT) and you will not be billed; premiums will be deducted automatically from your checking account.

A \$2.00 fee is charged *per premium payment* for administrative fees, unless billed annually or EFT is being used.

- Monthly (EFT only) **ACTION NEEDED:** You will need to send a voided check along with this application.

**IMPORTANT NOTE:** By selecting the monthly EFT payment option, you are authorizing Minnesota Life Insurance Company to make charges equal to the monthly premium against your bank account at the financial institution noted on the attached voided check, and to withdraw that premium from your account.

**To be eligible to port coverage you must apply within 31 days of the date your previous coverage terminated.**

Applicant signature <b>X</b>	Date signed
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