

Plan Highlights

Voluntary Group Accidental Death & Dismemberment Insurance



Boot Barn

ELIGIBILITY

Employees: Active full-time employees working 30 hours or more per week, except if you are working on a temporary or seasonal basis.

Dependents: You must be insured for your Dependents to be covered.

Dependents are:

- ▶ Your legal spouse who is not legally separated or divorced from you
- ▶ Your legally-recognized domestic or civil union partner
- ▶ Your unmarried financially dependent children* birth to 26 years.

*Natural and adopted children; stepchildren and foster children in your custody.

Also included are your children beyond the limiting age incapable of self-sustaining employment by reason of intellectual disability or physical handicap and chiefly dependent on you for support and maintenance (may vary by state).

For dependents who are confined in a hospital or at home on the date on which they would otherwise become insured, insurance will be effective as of the date the confinement ends.

- ▶ A person may not have coverage as both an Employee and Dependent.
- ▶ Only one insured spouse may cover Dependent children.

BENEFIT AMOUNT

Employee:

Choose from a minimum of \$10,000 to a maximum of \$250,000 in \$10,000 increments (not to exceed 5 times salary).

Dependent:

Spouse: Choose from a minimum of \$5,000, a maximum of \$125,000 in \$5,000 increments (not to exceed 50% of employee amount)

Dependent Child(ren):

Birth to age 26 years: \$5,000 to \$25,000 in increments of \$5,000

CONTRIBUTION REQUIREMENTS

Employee:

Coverage is 100% employee paid.

Dependent:

Spouse: Coverage is 100% employee paid.

Dependent Child(ren): Coverage is 100% employee paid.

AD&D SCHEDULE

For Accidental Loss of	Amount Payable
Life	100%
Two or More Members*	100%
Speech and Hearing	100%
One Member*	50%
Speech or Hearing	50%
Thumb and Index Finger of Same Hand	25%

* "Member" refers to a hand, foot or eye

FEATURES

- ▶ COMA Benefit
- ▶ Conversion Privilege
- ▶ Day Care Benefit
- ▶ Education Benefit
- ▶ Exposure and Disappearance
- ▶ Seat Belt and Air Bag Benefit
- ▶ Total Loss of Use Benefit

VALUE-ADDED SERVICES

- ▶ Travel Assistance Services

EXCLUSIONS

LIMITATIONS:

If you or your insured dependent die by suicide, while sane or insane, within two (2) years of your effective date for True VAR and/or Dependent insurance coverage, our payment will be limited to a refund of all life insurance premiums paid prior to the date of death.

AD&D EXCLUSIONS:

AD&D benefits will not be payable for a loss: caused or contributed by suicide or intentionally self-inflicted injuries; caused by or resulting from war or any act of war, declared or undeclared; to which sickness, disease or myocardial infarction, including medical or surgical treatment thereof, is a contributing factor.

For a comprehensive list of exclusions and specific limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for coverage and benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-6422, et al.