

# Summary Of Group Life Benefits

Prepared for Employers and Employees of

*Participating organizations of the*  
General Conference Corporation of Seventh-day Adventist



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**Important Note:** This Handbook has been adapted for use by **General Conference Corporation of Seventh-Day Adventist** employers and employees. The Insurer's Cover Note and Policy shall always prevail if there is a difference in terms and conditions between this Handbook and the Cover Note and Policy.

# INTRODUCTION

This summary document is not a contract of insurance. Its sole purpose is to provide employees with a summary of the group insurance coverage provided under the employer's policy. If any dispute arises as to the interpretation of this document, the Cover Note shall be deemed to be conclusive and will take precedent over any other any other document.

The following provides a highlight of the coverage, which is provided on a worldwide basis.

## LIFE COVERAGE

### 1.0 ELIGIBILITY CRITERIA

Mandatory plan for all full-time employees of the participating organizations working a minimum of 30 hours per week. Mandatory for spouse of eligible employee.

### 2.0 BENEFITS

<i>GROUP LIFE INSURANCE</i>	
<i>Insurer Policy Number</i>	MGENIB1100558NNP
<i>Guaranteed Issue Amount</i>	USD 150,000 up to age of 65. New Employees 65 and older are required to complete a health questionnaire.
<i>Maximum Coverage Age</i>	Employee - 80 <sup>th</sup> birthday Spouse - 65 <sup>th</sup> birthday
<i>Spouse Coverage Limit</i>	50% of Employee Limit
<i>Excluded Countries</i>	Cuba, Iran, Libya, North Korea, Russia, Syria, Yemen, Afghanistan, Central African Republic, Democratic Republic of Congo, Iraq, Lebanon, Myanmar, Somalia, South Sudan, Venezuela, Zimbabwe and Ukraine regions of : Belarus, Crimea, Donetsk, Sevastopol, and Luhansk,

### 3.0 BENEFICIARY DESIGNATION

At the time of enrollment, you should have named a beneficiary. At any time, you can request a change to designate a different person and/or organization. If you would like to make a change, please request a form from your Employer Benefits administrator. \* Employees should complete a new MGEN Beneficiary Form **if you did not do so in 2025** . All Beneficiary Designation forms are kept by the employer.

## 4.0 EXCLUSIONS AND LIMITATIONS

Unless otherwise specified in a Benefit Rider included under this Policy and referenced on the Policy Face Page, the losses shown below or expenses resulting from or in connection with any of the following are excluded from coverage under this Policy.

**4.1 Illegal Activities:** Losses resulting or arising from or occurring during the commission or perpetration of a violation of law.

**4.2 Professional Sports:** Any loss sustained while participating in or training for any sport or activity performed for financial gain.

**4.3 Sports and Hazardous Activities:** The losses shown below or expenses resulting from participation or training or in connection with any of the following are excluded from coverage under this Policy.

- Practice of ultralight powered aircraft, hang-glide, paragliding, parachuting, bunch jumping, and all other forms of free flight;
- Participation in competitions or trials, races, matches, sports competitions, when this participation involves the use of vehicles, motor boats or means of air flight
- Practices of any sports activity not represented by a sports federation
- Practice of any sports activity without complying with the basic safety rules recommended by the public authorities or by the sports federation corresponding to the activity,
- Practices of sports on a professional basis.

**4.4 Substance Abuse:** Any loss directly or indirectly resulting from alcohol or illegal drug abuse or other addiction, or any drugs or medicines that are not taken in the dosage or for the purpose prescribed.

**4.5 War and Terrorism:**

a) Any loss sustained while participating in, or training for, or as a consequence of war (declared or not), or Warlike Operations.

b) Terrorist activity including the use of armaments, the detonation of any form of explosive or nuclear devices, the emission, discharge, dispersal, release or escape of any solid, liquid, or gaseous Chemical Agent and/or Biological agent, including the poisoning via the air or water supplies or food products and deliberate destruction of buildings and transportation. This exclusion extends to any action taken in controlling, preventing, suppressing or in any way relating to any terrorist activity.

c) Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel, or the radioactive, toxic, explosive, or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

## 5.0 TERMINATION OF COVERAGE

Coverage terminates for an Insured Person on the earliest of:

- The attainment of the age specified on the Policy Face Page,
- The date on which the Insured Person no longer meets the Eligibility definition,
- The date of termination of employment with the Policyholder,
- 30 days after the date of temporary lay-off, unpaid leave of absence, or work stoppage including strike or lockout,
- Non-payment of Premium by the Policyholder in accordance with the section titled, "Premium Provisions",
- The date of death of the Insured Person.

## 6.0 CLAIM SUBMISSION PROCEDURE

### *Initial Notice of Claim*

In event of death, the employer, or the deceased's dependents, will notify ARM of a potential claim within 90 days.

### *Filing a Claim for Benefits*

### *Submit Claim Form and Documents To:*

Adventist Risk Management, Inc.

[Claims@AdventistRisk.org](mailto:Claims@AdventistRisk.org)

or by calling 1-888-951-4ARM (276).

With the completed claim form, the following documents will also be required.

- Certificate of Death
- Other documentation can and will be requested if the death is due to an accident.

## 7.0 FREQUENTLY ASKED QUESTIONS

### **What is Life insurance and why is it an important benefit?**

Life insurance is designed to replace a portion of income in the event of death (accidental or natural cause).

### **When is an employee eligible for Life insurance coverage?**

Admission to the group plan occurs on the first day in which the eligibility conditions specified in Section 1.0 are satisfied.

**Once enrolled for coverage, how long can an employee remain on the Life insurance plan?**

Employees remain on the plan until employment with the Employer terminates or attains 80. A spouse may remain on the plan as long as the employee has coverage, or the spouse reaches age 65.

**When can I increase my benefit limit?**

Increases to limits are available at renewal only by Class Groups (Eg. All Pastors, All Administrators, All Teachers).

Maximum increment annual enrollment is \$5,000 within the same job title/class

**When can I decrease my benefit limit?**

Decrease to limits are available at renewal only by Class Groups (Eg. All Pastors, All Administrators, All Teachers).

**Are Mid-Term change allowed?**

Mid-term changes include:

- Addition of Newly Hired Employees
- Deletion of a Terminating Employee
- Addition or Deletion of Employee due to change in Eligibility.

**What happens when the employee leaves employment?**

This plan only covers current employees. If you leave the employment of the employer or retire, coverage terminates. There is no continuation option.

**What is a Guaranteed Issue Amount/Free Cover Limit?**

The amount of coverage under this Policy without undergoing medical underwriting.

**Can an employee be covered as a spouse?**

No. Only one benefit will is paid per death under this policy.

**What does Mandatory Plan mean?**

A Mandatory Plan is paid for by the employer and must be given to all employees who meet the eligibility criteria. If the employer covers spouses, the employer must cover all spouses.

**Who can I contact if I have questions?**

Please contact your Adventist Risk Management, Inc. (ARM) Account Executive.

**Who is the Insuring Company?**

MGEN, registered under the number SIREN 775 685 399, regulated by the provisions of Tome II of Code de la mutualité (the French Mutual Insurance Companies Code) and whose head office is located at 3 Square Max-Hymans 75 748 Paris Cedex 15 France.

MGEN is represented through an underwriting authority by VYV International Benefits, French Société par actions simplifiée (joint-stock company) with a share capital of EUR 1,000,000, registered at the Registre des commerces et des sociétés (the French Commercial and Company Registry) RCS PARIS under the number 813 361 441 and registered as an insurance intermediary with ORIAS under the number 16002500 and whose head office is located 3 Square Max Hymans 75748 Paris