



An employee must enroll to receive this no-cost benefit. This benefit does not require re-enrollment each year.

Core Accidental Death & Dismemberment

The Core Accidental Death and Dismemberment (AD&D) Insurance Plan is administered by Voya Financial and underwritten by ReliaStar Life Insurance Company, a member of the Voya family of companies. It can pay a benefit if an employee suffers a loss as the result of a covered accident while insured under the plan. It also pays a benefit if an employee suffers certain disabling injuries while covered. The coverage is effective 24 hours a day, 365 days a year. It includes accidents on or off the job. Please refer to the Certificate of Coverage for specific exclusions and limitations. This coverage is in addition to any other coverage an employee has under any other insurance policy.

Coverage

If an employee elects coverage, the amount of insurance provided to an employee at no cost is called the Principal Sum.

Principal Sum	Cost for Employee
\$10,000	\$0.00

If an employee suffers any one of the losses listed on the chart below, as the result of a covered accident, the loss will be deemed a covered loss and paid, as listed. The maximum percentage paid for losses from any one accident is 100%.

Accident	Percentage Principal Sum
Life, loss of	100%
Sight of both eyes, loss of	100%
Speech and hearing of both ears, loss of	100%
Both hands or both feet, loss of	100%
One hand and one foot, loss of	100%
Quadriplegia	100%
Paralysis of three limbs	85%
Paraplegia/hemiplegia	75%
Paralysis of one limb	50%
Either hand or foot, loss of	50%
Sight of one eye, loss of	50%
Speech or hearing of both ears, loss of	50%
Hearing of one ear, loss of	25%
Thumb and index finger of same hand, loss of	25%

Note: Loss of hands or feet means loss by being permanently, physically severed at or above the wrist or ankle. Loss of sight means total and permanent loss of sight. Loss of speech and hearing means total and permanent loss of speech and hearing. Loss of thumb and index finger means loss by being permanently, physically, entirely severed.

Coverage After Age 75

If an employee is actively working at age 75, the amount of insurance will decrease to 50%.

What is Excluded from Coverage

Please note that coverage will not be in place during an unpaid leave of absence. A claim will not be paid for a loss that is caused by or resulting from:

- Suicide or intentionally self-inflicted injury, while sane or insane.
- Bacterial infection or bacterial poisoning.
- Any armed conflict, whether declared as war or not, involving any country or government.
- Injury suffered while in the military service for any country or government.
- Injury which occurs when an employee commits or attempts to commit a crime.
- Use of any drug, narcotic, or hallucinogenic agent which is illegal or which is not taken as directed by a doctor or manufacturer.
- An employee's intoxication. Intoxication means the blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.

Voya Travel Assistance: Worldwide Emergency Travel Assistance Services

Voya Travel Assistance offers employees and their dependents four types of services when traveling more than 100 miles from home: Pre-Trip Information, Emergency Personal Services, Medical Assistance Services, and Emergency Transportation Services. This provides peace of mind, allowing employees to relax and enjoy travel. Voya Travel Assistance services are provided by Europ Assistance USA, Bethesda, MD. Services are not available in all states. Covered services include:

- Immunization requirements
- Visa & passport requirements
- Foreign exchange rates
- Embassy/consular referral
- Travel/tourist advisories
- Temperature & weather conditions
- Cultural information
- Urgent message relay
- Interpretation/translation services
- Emergency travel arrangements
- Recovery of lost or stolen luggage or personal possessions
- Legal assistance and/or bail bond



Wellness Tip

Getting enough sleep and avoiding texting while driving can reduce our chances of causing a traffic accident.

Underwritten by ReliaStar Life Insurance Company, a Member of the Voya Family of Companies.

The information in this guide is in abbreviated form only. It is provided to give employees a general understanding of the ReliaStar insurance coverage available, but it is subject to verification by ReliaStar. An employee's actual coverage and amounts are subject to all the terms, limitations, and exclusions in the ReliaStar Certificate of Coverage. If the information in this guide differs from the group insurance policy held by the employer or plan administrator, the terms of that group insurance policy will govern.

Benefit Highlights of Core AD&D and Voluntary AD&D

	Core AD&D	Voluntary AD&D	
	Employee Only	Employee Only	Family
Cost Per Month (if elected)	\$0.00	\$1.80*	\$2.60*
Benefit Amount	\$10,000	\$100,000*	\$100,000*
Enroll During Annual Enrollment	✓	✓	✓
Accidental Death & Dismemberment	✓	✓	✓
Paralysis, Quadriplegia, Paraplegia, Hemiplegia	✓	✓	✓
Voya Travel Assistance	✓	✓	✓
Rehabilitation Benefit		✓	✓
Common Disaster Benefit		✓	✓
Coma Benefit		✓	✓
Accidental In-Hospital Indemnity		✓	✓
Safe Driver Benefit		✓	✓
Criminal Assault Benefit		✓	✓
War Risk Benefit		✓	✓
Burn Disfigurement		✓	✓
Accidental HIV Benefit		✓	✓
Custodial Care Benefit		✓	✓
Therapeutic Counseling Benefit		✓	✓
Adaptive Home & Vehicle Benefit		✓	✓
Surgical Reattachment Benefit		✓	✓
Portability		✓	✓
Coverage for Spouse			✓
Survivor's Benefit			✓
Education Benefit			✓
Spouse Training Benefit			✓
Coverage for Dependent Children			✓

See [page 33](#) for complete information about the Voluntary AD&D benefit.

* \$100,000 benefit amount is one example. Other benefit amounts are available from \$50,000 to \$500,000.

Voluntary Accidental Death & Dismemberment



This benefit does not require re-enrollment each year.

The Voluntary Accidental Death and Dismemberment (AD&D) Insurance Plan is administered by Voya Financial and underwritten by ReliaStar Life Insurance Company, a member of the Voya family of companies. The plan pays a benefit if an employee (or his/her covered dependents) dies or has certain disabling injuries as the result of an accident.

The coverage is effective 24 hours a day, 365 days a year. It includes accidents on or off the job. Please refer to the Certificate of Coverage for specific exclusions and limitations. This coverage is in addition to any other coverage the employee may have under any other insurance policy.

The benefit amounts are shown below. **If the employee and his/her spouse are both eligible to elect this coverage as state agency, university, select community college, or select charter school employees, both may elect to participate as employees, but only one may enroll for employee and family coverage.**

The spouse who elects employee and family coverage will not have coverage for his or her spouse, only children. An employee may not be covered as both an employee and a dependent and children may not be dually enrolled.

Monthly Cost and Principal Sum

The amount of insurance an employee purchases is called the Principal Sum. An employee may select one of the following Principal Sums:

Principal Sum	Cost for Employee Only	Cost for Employee and Family	Principal Sum	Cost for Employee Only	Cost for Employee and Family
\$50,000	\$0.90	\$1.30	\$300,000	\$5.40	\$7.80
\$100,000	\$1.80	\$2.60	\$350,000	\$6.30	\$9.10
\$150,000	\$2.70	\$3.90	\$400,000	\$7.20	\$10.40
\$200,000	\$3.60	\$5.20	\$450,000	\$8.10	\$11.70
\$250,000	\$4.50	\$6.50	\$500,000	\$9.00	\$13.00

Family Principal Sum

An employee may also elect insurance for his/her spouse and unmarried dependent children. (See *Dependent Eligibility*, page 4 for details.) If family coverage is elected, the family members' Principal Sum will be a percentage of the employee's Principal Sum.

Family Members	Percentage of Benefit Payable
Spouse	50%
Children	10% each child

Coverage

If the employee or covered dependents suffers any one of the losses listed on the chart below, as the result of a covered accident, the loss will be deemed a covered loss and a benefit will be paid, based on the applicable Principal Sum. The maximum percentage paid for losses from any one accident is 100%.

Accident	Percentage Principal Sum
Life, loss of	100%
Sight of both eyes, loss of	100%
Speech and hearing of both ears, loss of	100%
Both hands or both feet, loss of	100%
One hand and one foot, loss of	100%
Quadriplegia	100%
Paralysis of three limbs	85%
Paraplegia/hemiplegia	75%
Paralysis of one limb	50%
Either hand or foot, loss of	50%
Sight of one eye, loss of	50%
Speech or hearing of both ears, loss of	50%
Hearing of one ear, loss of	25%
Thumb and index finger of same hand, loss of	25%

Note: Loss of hands or feet means loss by being permanently, physically severed at or above the wrist or ankle. Loss of sight means total and permanent loss of sight. Loss of speech and hearing means total and permanent loss of speech and hearing. Loss of thumb and index finger means loss by being permanently, physically, entirely severed.

Coverage After Age 75

The amount of insurance will decrease to 50% when an employee turns age 75. Coverage cannot be increased once coverage is reduced due to age.

Additional Benefits

If insured under the plan, the following benefits are available to employees as part of Voluntary AD&D coverage:

- Enhancement for Child(ren)*
(family option only)
- Surgical Reattachment Benefit
- Coma Benefit
- Accidental HIV Benefit
- Burn Disfigurement Benefit
- Rehabilitation Benefit*
- Therapeutic Counseling Benefit*
- Adaptive Home & Vehicle Benefit*
- Accidental In-Hospital Indemnity Benefit*
- Custodial Care Benefit*
- Seat Belt Benefit*
- Air Bag Benefit*
- Criminal Assault Benefit*
- Common Disaster Benefit*
- Survivor's Benefit* *(family option only)*
- Education Benefit* *(family option only)*
- Spouse Training Benefit* *(family option only)*
- Child Care Benefit* *(family option only)*
- Disability Waiver of Premium
- Worldwide Emergency Travel Assistance Services (extends to enrolled family members; see **page 32** for detailed description)

For more information, please visit www.ncflex.org and view the Voluntary AD&D certificate.

Additional benefits apply only if there has been a covered loss as shown on **page 33.*

What is Excluded from Coverage

The plan will not pay a claim for a loss that is contributed to, caused by, or resulting from:

- Suicide or intentionally self-inflicted injury, while sane or insane.
- Bacterial infection or bacterial poisoning.
- Any armed conflict, whether declared as war or not, involving any country or government.
- Injury suffered while in the military service for any country or government.
- Injury which occurs when committing or attempting to commit a crime.
- Use of any drug, narcotic, or hallucinogenic agent which is illegal or which is not taken as directed by a doctor or manufacturer.
- Intoxication when an employee's blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.

Continuation Options

Portability of Voluntary AD&D services are available. For details and rates, employees may contact Voya at **1-877-464-5111**.

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