

# Supplemental death benefits offer your survivors extra income protection if you die.

## HOW IT WORKS

Death benefits provide a source of income to your survivors if you die. *Supplemental* death benefits provide this protection in addition to any other death benefits available to you through the Death and Disability or Term Life Plans. These benefits are not the same as the survivor's pension or salary continuation benefit from the Pension Plan. Coverage is available for you, your spouse, and your children.

## AMOUNT OF BENEFITS

You decide the amount of your supplemental death benefit that will be paid to survivors if you die. You may elect one of eight coverage levels: \$25,000, \$50,000, \$75,000, \$100,000, \$150,000, \$200,000, or \$300,000.

You may also elect coverage for your spouse (if you are married) in the amount of \$25,000, \$50,000, \$75,000, or \$100,000 and for your eligible dependent child(ren) in the amount of \$10,000 or \$20,000. You do not have to elect coverage for yourself in order to cover your spouse and/or eligible children.

## Enrollment

You can apply for, increase, or discontinue supplemental death benefits coverage

- when you first enroll in the Benefits Plan;
- within 60 days of a qualifying life event; or
- during annual enrollment, for coverage effective the first of the following year.

## **Evidence of insurability**

When you apply for supplemental death coverage for yourself and/or your spouse, the Board may ask for online health statements, called evidence of insurability.

- If you apply for coverage of \$25,000 or \$50,000 for yourself when you are first eligible, you do not need to provide evidence of insurability; however, it is required at any other time for all coverage amounts regardless of when you enroll.
- Your spouse will always need to provide evidence of insurability, regardless of the coverage amount.
- You do not need to provide evidence of insurability for any children's coverage.

## APPLYING FOR BENEFITS

Generally, when your family member or survivor reports your death to the Board of Pensions, the Board sends a Death Benefits Claim form to your spouse, beneficiary, and, when applicable, covered dependents. The Board will pay benefits once it receives a completed form, a copy of the death certificate, and any outstanding pension and/or disability overpayments, as applicable.

## Beneficiaries

It is important to designate beneficiaries when you enroll and to keep them up to date. The Board pays supplemental death benefits to your designated beneficiaries or, if no designated beneficiaries are on file, your spouse, eligible dependents, or estate. You are always the beneficiary for any spouse or child benefit.

## Cost

Either you or your employer pays the cost of supplemental death coverage, depending on the terms of your employment. The Board bills your employer, and the employer deducts the appropriate charges, if any, from your paycheck.

## LEARN MORE -

For more information about supplemental death benefits, visit pensions.org/members. If you have questions, call the Board at 800-773-7752 (800-PRESPLAN) (TTY: 711).





#### SUPPLEMENTAL DEATH BENEFITS COSTS -

Costs based on enrollee's age on date coverage begins and as of January 1 each subsequent year.

Nicotine-Free Annual Costs								
	Member or Spouse Costs			Member-Only Costs				
Age	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000
Under 29	13	26	38	51	77	102	128	153
30 - 34	16	32	48	64	96	129	161	193
35 - 39	20	41	61	82	122	163	204	245
40 - 44	26	51	77	102	153	204	255	306
45 - 49	38	77	115	153	230	306	383	459
50 - 54	59	117	176	235	352	469	587	704
55 - 59	110	219	329	439	658	877	1,097	1,316
60 - 64	168	337	505	673	1,010	1,346	1,683	2,020
65 - 69	268	536	803	1,071	1,607	2,142	2,678	3,213
70 - 74	408	816	1,224	1,632	2,448	3,264	4,080	4,896
75 - 79	497	995	1,492	1,989	2,984	3,978	4,973	5,967
80 - 84	525	1,051	1,576	2,101	3,152	4,202	5,253	6,304
85 - 89	525	1,051	1,576	2,101	3,152	4,202	5,253	6,304
90 - 94	525	1,051	1,576	2,101	3,152	4,202	5,253	6,304
95 +	525	1,051	1,576	2,101	3,152	4,202	5,253	6,304
Nicotine User Annual Costs								

Nicotine Oser Annual Costs								
		Member or S	Spouse Costs		Member-Only Costs			
Age	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000
Under 29	20	39	59	79	118	157	196	236
30 - 34	27	55	82	109	164	218	273	327
35 - 39	36	71	107	143	214	286	357	428
40 - 44	53	106	158	211	317	422	528	634
45 - 49	91	182	273	364	546	728	910	1,092
50 - 54	162	325	487	650	975	1,299	1,624	1,949
55 - 59	280	559	839	1,119	1,678	2,238	2,797	3,357
60 - 64	340	680	1,020	1,360	2,039	2,719	3,399	4,079
65 - 69	447	894	1,341	1,788	2,682	3,576	4,470	5,364
70 - 74	657	1,314	1,971	2,629	3,943	5,257	6,571	7,886
75 - 79	745	1,491	2,236	2,981	4,472	5,963	7,454	8,944
80 - 84	989	1,977	2,966	3,955	5,932	7,909	9,886	11,864
85 - 89	1,309	2,618	3,927	5,236	7,854	10,471	13,089	15,707
90 - 94	1,681	3,362	5,044	6,725	10,087	13,450	16,812	20,175
95 +	2,049	4,099	6,148	8,198	12,297	16,395	20,494	24,593

\$10,000 Coverage	\$20,000 Coverage				
\$14 annually	\$27 annually				

\* Costs are for all eligible dependent children in the family as defined by the Benefits Plan.



This is not a full description of benefits and limitations of the plan. If there is any difference between the information presented here and the provisions of the Benefits Plan of the Presbyterian Church (U.S.A.), the plan terms will govern. Visit pensions.org or call the Board at 800-773-7752 (800-PRESPLAN) (TTY: 711) for a copy of the plan document.

