STANDARD INSURANCE COMPANY

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CERTIFICATE:

GROUP ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

Policyholder

ichita State University

Policy N mber

Effective Date

C A A Jan ary Å

A Gro p Policy has been iss ed to the Policyholder e certify that yo will be ins red as provided by the terms of the Gro p Policy If yo r coverage is changed by an amendment to the Gro p Policy we will provide the Policyholder with a revised Certificate or other notice to be given to yo

Possession of this Certificate does not necessarily mean yo are ins red Yo are ins red only if yo meet the req irements set o t in this Certificate

e s and o r mean Standard Ins rance Company Yo and yo r mean the Member All other defined terms appear with the initial letter capitalized Section headings and references to them appear in boldface type

Jui Z

President

GC , ADD S ,,

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ADD D Ins rance , Ann al Earnings ,

Beneficiary ⁴

Child Class Definition

Dependent Disabled Child

Eligibility aiting Period Employer s

Gro p Policy Gro p Policy Effective Date Gro p Policy N mber L L C Owner Employee Loss

Member

P C Partner Policyholder Pregnancy Proof Of Loss

Recipient 🕅

Sickness Spo se

ar

COVERAGE FEATURES

This section contains many of the feat res of yo r vol ntary accidental death and dismemberment ins rance ADD Ins rance Other provisions incl ding excl sions and limitations appear in other sections Please refer to the text of each section for f ll details The Table of Contents and the Index of Defined Terms help locate sections and definitions

GENERAL POLICY INFORMATION

Gro p Policy N mber	C R A
Policyholder	ichita State University
Employers	ichita State University
Gro p Policy Effective Date	Jan ary 🍂
State of Iss e	Kansas

BECOMING INSURED

To become ins red yo m st a Be a Member b Complete yo r Eligibility aiting Period c Apply in writing for ins rance and d Agree to pay premi ms See When AD&D Insurance Becomes Effective

Definition of Member

Yo are a Member if yo are
An active employee of the Employer and
Reg larly working at least hors per week
Yo are not a Member if yo are
A temporary or seasonal employee
A leased employee
An independent contractor

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SCHEDULE OF ADD D INSURANCE										
Yo may apply for ADD D Ins rance in m 1 in excess of 7 may not exceed ten ti						to	þ	Any amo nt		
Yo may also elect to ins re yo r Dependents The amont of ADD D Ins rance for yo r Dependents is eq al to a percentage of yo r ADD D Ins rance as follows										
Spo se only	Þ									
Children only		for eac	ch Ch	ild not	to exc	ceed	5			
Spo se and Children	4	for yo	r Spo	o se						
	þ	for each	ı Chil	d						

The amo $\,$ nt payable for certain Losses will differ $\,$ See Accidental Death and Dc $\,$





ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

A Ins ring Cla se

If a person has an accident while ins red for ADD D Ins rance and the accident res lts in a Loss we will pay benefits according to the terms of the Gro p Policy after we receive satisfactory Proof of Loss

B Definition Of Loss

Loss means loss of life hand foot or sight which

Is ca sed solely and directly by an accident

Occ rs independently of all other ca ses and

Occ rs within C^{\bullet} days after the accident

ith respect to a hand or foot Loss means act al and permanent severance from the body at or above the wrist or ankle joint

ith respect to sight Loss means entire and irrecoverable loss of sight

C Amo nt Payable

The amont payable is equal to a percentage of the ADD D Insurance in effect on the insure red person

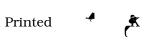


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- ^A Medical or s rgical treatment for any of the above
- Boarding leaving or being in or on any kind of aircraft However this excl sion will apply only to
 - a A pilot or crew member of the aircraft or
 - b A passenger in an aircraft operated by or for the Employer
- F Benefit For Loss D e To Expos re

If yo or yo r Dependent s ffers a Loss ca sed by expos re to the nat ral elements we will pay the amont of ADDD Ins rance in effect for that Los







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The Gro p Policy does not provide vol ntary alternative disp te resol tion options

ASSIGNMENT

The rights and benefits nder the Gro p Policy cannot be assigned

BENEFIT PAYMENT AND BENEFICIARY PROVISIONS

A Payment of Benefits

Benefits payable beca se of yo r death will be paid



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E Methods of Payment

Recipient means a person who is entitled to benefits nder this **Benefit Payment and Beneficiary Provisions** section

L mp S m

If the amont payable to a Recipient is less than $\frac{1}{2}$ we will pay it in a 1 mp s m

Standard Sec re Access Checking Acco nt

If the amo nt payable to a Recipient is $\frac{5}{7}$ or





Spo se means a person to whom yo are legally married

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