



IBEW Local 995 Summary of Rates

224-770-5305
www.uniondisability.com

Benefits are made available to full time, actively working members of the IBEW Local 995

Critical Illness

- Pays a lump sum benefit directly to the individual
- Covers the following critical health events: Heart Attack, Cancer, Stroke, Paralysis, Major Organ Transplant
- Members can elect either a \$10,000 or \$20,000 Benefit
 - Spouse can be covered at 50% of member election
 - Dependent Children are covered at 50% of member election at no additional cost
- Includes a \$50 Health Screening Benefit

Accident Coverage

- Pays a lump sum benefit directly to the individual
- Guaranteed Approved coverage
- No pre-existing limitations
- Includes a Wellness Benefit of up to \$30 for covered preventive screening
- Covers injuries including: fractures, burns, concussions, dislocations, lacerations, etc.
- Covers services including: ER visit, x-ray, MRI, anesthesia, crutches, stitches, casts, etc.

Life and Accidental Death & Dismemberment (AD&D)

- Guaranteed approved coverage for member, spouse, and children - NO pre-existing condition limitations
 - All life coverage includes an equal amount of AD&D. If death is caused by an accident, benefit doubles
- Member coverage from \$10,000-\$150,000 (in \$10,000 increments)
 - Spousal and child coverage is available when member life coverage is elected
- Spousal coverage from \$5,000-\$25,000 (in \$5,000 increments), not to exceed 100% of member election
- Child(ren) eligible for a flat \$10,000 of coverage - All eligible children are covered for \$2.60 per month
- Life coverage is convertible & portable

Please Note: Life/AD&D guaranteed amounts may be lower or not offered at future open enrollments for those members that do not enroll initially

For quick and easy enrollment, call Cornerstone at 224-770-5305 (M-F 8am-5pm CST)

This group plan has minimum participation requirements to become effective. Failure to meet participation could prevent the plan from becoming effective, or delay the effective date.

Critical Illness

\$5,000 Benefit	
Age	Monthly Premium
18-29	\$6.19
30-39	\$8.16
40-49	\$12.74
50-59	\$21.78
60+	\$38.27

\$10,000 Benefit	
Age	Monthly Premium
18-29	\$8.87
30-39	\$12.79
40-49	\$21.97
50-59	\$40.03
60+	\$73.01

\$20,000 Benefit	
Age	Monthly Premium
18-29	\$14.21
30-39	\$22.06
40-49	\$40.41
50-59	\$76.55
60+	\$142.50

* Member can elect \$20,000 or \$10,000 Benefit. Spouse can be covered at 50% of member election.
* Rates lock in at the age you enroll.

Accident Coverage

Options and Rates	
Coverage	Monthly Premium
Member	\$12.95
Member & Spouse	\$19.71
Member & Child	\$25.93
Family	\$32.69

Life and Accidental Death & Dismemberment (AD&D)

Benefit and Monthly Premium					
Benefit	0 - 29	30 - 39	40 - 49	50 - 59	60 - 69
Member Monthly Premium Can be elected in increments of \$10,000					
\$10,000	\$3.29	\$3.44	\$4.88	\$8.59	\$16.06
\$50,000	\$8.45	\$9.20	\$16.40	\$34.95	\$72.30
\$100,000	\$14.90	\$16.40	\$30.80	\$67.90	\$142.60
\$150,000	\$21.35	\$23.60	\$45.20	\$100.85	\$212.90
Spouse Monthly Premium Spouse Premiums Based on Member Age • Can't exceed 100% of Member Life					
\$5,000	\$2.63	\$2.71	\$3.43	\$5.28	\$9.02
\$25,000	\$5.15	\$5.53	\$9.13	\$18.40	\$37.08
Child(ren)/Dependent(s) Monthly Premium					
\$10,000	All children covered at one cost of \$2.60				

Calculate Your Monthly Premium

Accident:		\$
Critical Illness:	Member:	\$
	Spouse:	\$
Life/AD&D:	Member:	\$
	Spouse:	\$
	Child:	\$
Processing Fee:		\$
Total Monthly Premium:		\$

These coverages are guaranteed approved for all actively working/ dues paying members of Local 995. No medical tests, questions, or underwriting.

IMPORTANT NOTE:

If you leave the union or retire it is your responsibility to contact our office immediately at (847) 387-3555, and failure to do so within 30 days will forfeit your ability to keep coverage and receive any premium refunds. Premium is determined by your age on the coverage effective date, and life premiums will increase on the next policy anniversary date after you enter the next age band. Benefit effective dates are subject to change. The IBEW does not make any endorsement or recommendations regarding these benefits. This program is voluntary and it is solely the members' decision to enroll. This is a basic summary of benefits and makes no guarantee or warranty on the processing of claims. Other limitations may apply. It is recommended that each enrolled member obtain a copy and read the entire policy booklet. All non-banking administrative and transaction fees are included in the enclosed premiums.