Madison Local Schools

Products and financial services provided by
American United Life Insurance Company®
a ONEAMERICA® *company*
One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318

ONEAMERICA®

Could your family meet its expenses if you or your spouse died unexpectedly?

24 million U.S. households (22 percent) have no life insurance protection at all.[1]

44 percent of all U.S. households (48 million) either don't own life insurance and believe they should, or own life insurance and believe they need more. Among those that already own some life insurance, 40 percent believe they don't have enough.[1]

Of households with insurance, approximately 12 percent would immediately have trouble meeting everyday living expenses, and another 15 percent would have difficulty keeping up with expenses after several months.[1]

Here is your opportunity to apply for voluntary group term life insurance coverage for you and your family, under a group life insurance policy issued to your employer by American United Life Insurance Company® (AUL), a OneAmerica® company. AUL's contract offers[2] :

- Convenience of payroll deduction
- Affordable premium rates
- Guaranteed issue amount of coverage[3]
- Accidental death and dismemberment benefits
- Waiver of premium benefit
- Accelerated life benefit
- Continuation of Insurance options and portability
- Guaranteed increase in benefit
- Family status change
- Additional AD&D benefits: Seat Belt, Air Bag, Repatriation, Child Higher Education, Child Care, Paralysis/Loss of Use, Severe Burns

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[1] LIMRA International (2005): Facts About Life 2005, (p.1)

[2] This invitation to inquire allows eligible employees an opportunity to inquire further about group insurance coverage and is limited in its description of the losses for which benefits may be payable. The contract has exclusions, limitations, reduction of benefits, and terms under which the contract may be continued in force or discontinued. The contract may contain a waiting or elimination period between the effective date of the contract and the effective date of coverage, and between the date a loss occurs and the date benefits begin to be payable for the loss. Any payable benefit is based on a percentage of an insured's coverage earnings subject to AUL's approval, contract maximums, reduction by other income benefits and according to contract terms and conditions.

[3] If an employee does not apply timely and/or applies for an amount greater than the guaranteed issue amount, coverage will not be available until after undergoing medical underwriting and receiving written approval from AUL.

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AUL's Group Voluntary Term Life and AD&D Insurance Coverage for Eligible Employees

Guaranteed issue amount: $200,000	If you are eligible and you enroll timely, you will be able to apply for coverage up to the guaranteed issue amount without providing Evidence of Insurability. Any amount of coverage requested as a late enrollee or in excess of the guaranteed issue amount will first require medical underwriting and written approval by AUL. If approved, coverage will become effective on the date identified by AUL.
Flexible choices	You may apply for a flat benefit amount of group life insurance coverage in increments of $1,000, in a minimum amount of $10,000, and up to a maximum amount of $300,000.
Accidental death and dismemberment (AD&D) benefits	If approved for this benefit, additional life insurance benefits may be payable for you or a dependent(s) who have an accident which results in death or dismemberment as defined in the contract.
Accidental death and dismemberment (AD&D) with seat belt and air bag benefit	If approved for this benefit, after the employee and or his dependent(s) suffers a loss under the contract as a result of an automobile accident while properly wearing a seat belt and an air bag deploys properly, an additional amount may be payable under the contract.
Guaranteed increase in benefit (GIB)	If eligible, you may apply for an additional amount of coverage offered by AUL at each AUL approved scheduled enrollment period without providing Evidence of Insurability. You can increase your coverage annually by the greater of of 10% or $10,000.
Family status change	If eligible and a qualifying event has occured, you may apply for an additional amount of coverage for the event.
Waiver of premium benefit	If eligible under the insurance contract and approved for this benefit, AUL will waive premium payments for your coverage while you remain totally disabled.
Accelerated life benefit	If eligible for this benefit, you or your spouse may apply for payment of 25%, 50% or 75% of the amount of life insurance coverage. A benefit is also payable due to cognitive impairment or loss of ADL.
Portability	You may be eligible to apply for continuation of coverage should your coverage terminate. Approval for this benefit will extend your coverage for an additional period of time.
Continuation of insurance	You may be eligible to request continuance of insurance should you take a temporary leave of absence or if you are on temporary layoff.
Eligible employees	An eligible employee is a full-time employee legally authorized to work and reside in the US. If you are not actively at work on the contract effective date, group insurance coverage will not exist until you return to full-time active work.
Evidence of insurability	If you do not enroll timely, or if amounts of coverage greater than the guaranteed issue amount are requested, you will be required to provide a statement or proof of medical history. AUL will then review that information to determine if coverage can be approved.
Suicide limitation	The certificate of insurance contract contains a Suicide Limitation. This limitation may vary by state.

Madison Local Schools

Premiums for Voluntary Term Life and matching ADD Coverage

Employee Coverage

Guarantee Issue: $200,000
Use age as of : 01/01 of the current year

Premiums will be deducted **TWICE A MONTH** for employees

	0 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 - 54	55 - 59	60 - 64	65 - 69	70+
$10,000	$0.38	$0.38	$0.48	$0.68	$0.98	$1.63	$2.63	$3.48	$5.23	$12.08
$20,000	$0.75	$0.75	$0.95	$1.35	$1.95	$3.25	$5.25	$6.95	$10.45	$24.15
$30,000	$1.13	$1.13	$1.43	$2.03	$2.93	$4.88	$7.88	$10.43	$15.68	$36.23
$40,000	$1.50	$1.50	$1.90	$2.70	$3.90	$6.50	$10.50	$13.90	$20.90	$48.30
$50,000	$1.88	$1.88	$2.38	$3.38	$4.88	$8.13	$13.13	$17.38	$26.13	$60.38
$60,000	$2.25	$2.25	$2.85	$4.05	$5.85	$9.75	$15.75	$20.85	$31.35	$72.45
$70,000	$2.63	$2.63	$3.33	$4.73	$6.83	$11.38	$18.38	$24.33	$36.58	$84.53
$80,000	$3.00	$3.00	$3.80	$5.40	$7.80	$13.00	$21.00	$27.80	$41.80	$96.60
$90,000	$3.38	$3.38	$4.28	$6.08	$8.78	$14.63	$23.63	$31.28	$47.03	$108.68
$100,000	$3.75	$3.75	$4.75	$6.75	$9.75	$16.25	$26.25	$34.75	$52.25	$120.75
$110,000	$4.13	$4.13	$5.23	$7.43	$10.73	$17.88	$28.88	$38.23	$57.48	$132.83
$120,000	$4.50	$4.50	$5.70	$8.10	$11.70	$19.50	$31.50	$41.70	$62.70	$144.90
$130,000	$4.88	$4.88	$6.18	$8.78	$12.68	$21.13	$34.13	$45.18	$67.93	$156.98
$140,000	$5.25	$5.25	$6.65	$9.45	$13.65	$22.75	$36.75	$48.65	$73.15	$169.05
$150,000	$5.63	$5.63	$7.13	$10.13	$14.63	$24.38	$39.38	$52.13	$78.38	$181.13
$200,000	$7.50	$7.50	$9.50	$13.50	$19.50	$32.50	$52.50	$69.50	$104.50	$241.50
$250,000	$9.38	$9.38	$11.88	$16.88	$24.38	$40.63	$65.63	$86.88	$130.63	$301.88
$300,000	$11.25	$11.25	$14.25	$20.25	$29.25	$48.75	$78.75	$104.25	$156.75	$362.25

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AUL's Group Voluntary Term Life Insurance Coverage Available to Eligible Dependents

Amount of Coverage Offered

The amount of coverage for eligible dependents cannot exceed 100% of the employee's voluntary life insurance amount of coverage. Spouse and child(ren) coverage must be from the same option. Coverage is only offered and available to eligible Dependents who are authorized to reside in the United States. **The voluntary insurance coverage is distinct and separate from any insurance coverage you may receive from the school board.**

Accelerated Life Benefit for Spouse
Suicide Limitation
Portability Option (If Employee continues coverage under this option)
Conversion Options

Eligible Dependents

Any coverage for a spouse or child(ren) cannot become effective before the employee's coverage is approved. If a spouse or child is confined in any medical facility, rehabilitation center, convalescent care facility, nursing home, or correctional facility on the date an employee's coverage is approved, that dependent coverage will not become effective until the spouse or child is released from such confinement and pursuant to the contract provisions.

Dependent Voluntary Term Life Insurance Options[1]

Dependent Type	Option 1	Option 2	Option 3	Option 4
Spouse	$5,000	$10,000	$15,000	$20,000
Dependent Child(ren) - live birth to age 26	$2,500	$5,000	$7,500	$10,000
SEMI-MONTHLY Dependent Group Voluntary Term Life Insurance Premiums[1]				
Family	$1.00	$2.00	$3.00	$4.00

* Age and Definition of Child(ren) may vary by state.

[1]Coverage for child(ren) and spouses does terminate when they are no longer classified as dependents.

Rev. 04/07

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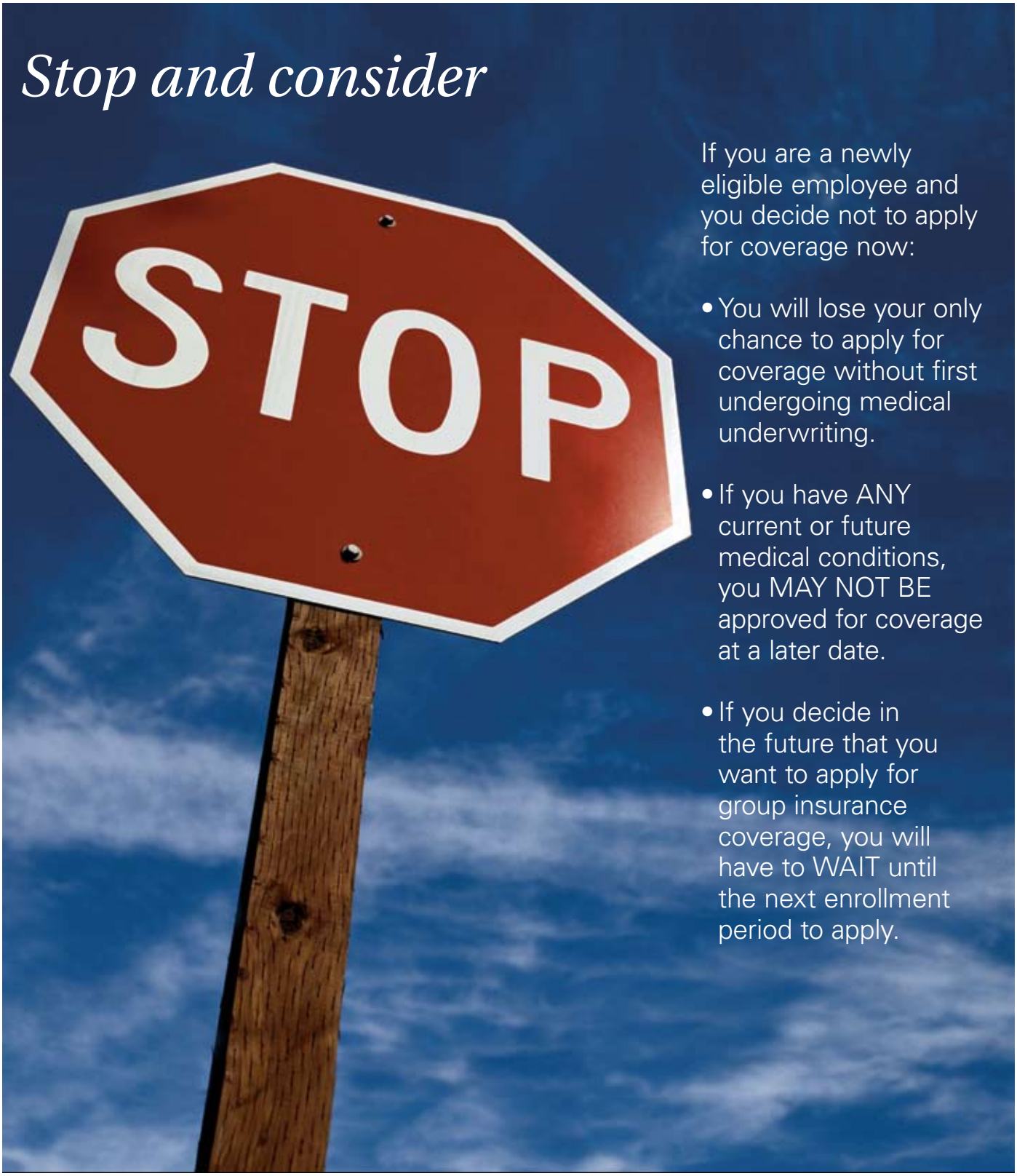
Employee Benefits

Stop and consider



If you are a newly eligible employee and you decide not to apply for coverage now:

- You will lose your only chance to apply for coverage without first undergoing medical underwriting.
- If you have ANY current or future medical conditions, you MAY NOT BE approved for coverage at a later date.
- If you decide in the future that you want to apply for group insurance coverage, you will have to WAIT until the next enrollment period to apply.

Products and financial services provided by

AMERICAN UNITED LIFE INSURANCE COMPANY® | *a* ONEAMERICA® *company*

One American Square, P.O. Box 368 | Indianapolis, IN 46206-0368 | (317) 285-1877 | www.oneamerica.com

G-17963 11/2/07

Group Enrollment Form

Products and financial services provided by
American United Life Insurance Company®
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One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318

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Applicant's Full Legal Name:			Employment Status: ☒ Active ☐Retired
Applicant's Address:	Applicant's State of Residence:	Applicant's Residential Zip Code:	Gender: ☐ Male ☐Female
Date of Birth:	Marital Status: ☐Single ☐ Married	Employer: **Madison Local Schools**	
Employed Full-Time: ☒ Yes ☐ No	Hours worked per week:	Employer's City:	State:
		Are you authorized to work and reside in the US? ☐ Yes ☐ No	
Name of Primary Beneficiary		Relationship	SSN/Date of Birth
Name of Contingent Beneficiary		Relationship	SSN/Date of Birth

COVERAGE BEING APPLIED FOR: Apply for or decline each coverage listed below. Not checking either box will be considered a declination of that coverage.

Request	Decline	
[X]	[ ]	Term Life/AD&D
[ ]	[ ]	Voluntary Term Life/AD&D $_____
	[ ]	*Voluntary Term Dependent Life Coverage

	[ ] Option 1	[ ] Option 2	[ ] Option 3	[ ] Option 4
Spouse	$5,000	$10,000	$15,000	$20,000
Child	$2,500	$ 5,000	$ 7,500	$10,000

*If spouse is included in dependent coverage:
Name _____Date of birth _____

NOTE: Coverage is only offered and available to eligible Dependents who are authorized to reside in the United States.

- I hereby apply for the group insurance coverage for which I and my dependents, if any, are eligible and available under AUL's policy. I understand receipt of any coverage greater than the guaranteed issue amount or application for coverage after the approved enrollment period first requires medical underwriting and written approval by AUL.
- I authorize my employer to deduct from my wages the amount of premium required for the amount of coverage approved by AUL, including any premium increases due to age bracket or salary changes when applicable. Premium payments greater than the amount of premium owed will not result in additional coverage under AUL's policy.
- The undersigned represents any information or documents provided to AUL by the undersigned prior to and after the date of the application for insurance and the facts and other matters contained in the foregoing are true and accurate to the best of the undersigned's knowledge and belief.

The undersigned understands and agrees 1. Any insurance coverage or benefits are contingent upon any statements made to AUL as being complete and correct and 2. Benefits under any policy will be paid only if AUL decides in its discretion the applicant is entitled to them. The undersigned have read, understand, and retained the notices, limitations, and exclusions for his/her records.

- **Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.**

Date: _____**Signature of Applicant:** _____

MUST BE COMPLETED BY THE EMPLOYER

Group Policy: 00610712-0	Class # :	FT Hired Date:	Occupation:
Salary	Mode: [ ] Hourly [ ] Weekly [ ] Bi-Weekly [ ] Semi-Monthly [ ] Monthly [X] Annually		

Notices and Limitations for Group Life and Disability Insurance Products

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One American Square, P.O. Box 6123
Indianapolis, IN 46206-6123
(800) 553-5318
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Eligibility for Coverage [1]:

An eligible Employee is a full-time Employee legally authorized to work and reside in the United States. Eligible Employees cannot be considered a part-time, temporary or seasonal Employee. If any eligible Employee is not Actively at Work on the contract Effective Date, group insurance coverage for that Employee will not exist until he/she returns to full-time active work. After the initial enrollment period, an Employee may apply for coverage under another available AUL coverage option during an AUL approved scheduled enrollment period. However, any amount of coverage requested will then require satisfactory Evidence of Insurability prior to approval.

(The Following Paragraph Applies to Life Coverages Only.)

Any coverage for a spouse or children cannot become effective before the Employee's coverage is approved. If a spouse or child is confined in a medical facility, rehabilitation center, convalescent care facility, nursing home or correctional facility on the date an employee's coverage is approved, that dependent coverage will not become effective until the spouse or child is released from such confinement and pursuant to the contract provisions. Before coverage for any incapacitated Dependent child older than the normal termination age can be considered, the Employee must apply in writing to AUL before or on the Employee's Effective Date of coverage.

Community Property Notice:

The laws of some community property states may not allow an Employee to name a beneficiary other than his/her spouse without the spouse's written consent. Community property states currently include Arizona, California, Idaho, Louisiana, New Mexico, Nevada, Texas, Washington, and Wisconsin. If AUL has not previously received written notice of a community property interest, then AUL shall be entitled to rely upon its good faith that no such interest exists. AUL assumes no responsibility of inquiry regarding such interest and, in consideration of acknowledgement of this designation, the insured person, for himself/herself and his/her estate, heirs, successors and assigns, agrees to indemnify AUL and hold it harmless from the consequences of acknowledging this beneficiary designation.

Effective Date and Claims Payment Notice:

No insurance coverage shall exist or become effective until approved in writing by American United Life Insurance Company® (AUL) at its Indianapolis, Indiana home office. Coverage continues while required premiums are paid and the Employer receives coverage under the AUL group insurance contract. Premium rates do increase upon reaching certain age brackets, according to contract terms, and are subject to change. AUL shall not be liable or responsible for any loss incurred prior to the effective date of coverage for any insured. Any benefit payable under the contract is based on a percentage of an Employee's covered earnings subject to AUL's approval, contract maximums, contract reductions, and according to contract terms and conditions.

Arbitration Notice, if Applicable [2]:

Coverage under the group insurance contract for which you have applied may include a binding or nonbinding arbitration agreement. The arbitration agreement requires that any disagreement related to this contract must first be resolved by arbitration and not in a court of law. The results of the arbitration can be final and binding on you and the insurance company. In an arbitration, an arbitrator, who is an independent, neutral party, gives a decision after hearing the positions of the parties. When you accept coverage under this insurance contract you agree to first resolve any disagreement related to the contract by arbitration instead of a trial in court including a trial by jury (note that some states may not allow mandatory arbitration). Arbitration takes the place of resolving disputes by a judge and jury and the decision of the arbitrator often cannot be reviewed in court by a judge and jury.

Required Notices Regarding Certain Contract Limitations[3] and Exclusions [4]

Life Limitations/Exclusions:

Suicide Limitation, if Applicable, Except for Washington Residents:

If any insured approved for coverage, commits suicide, while sane or insane:[5] 1) within two years[6] from the effective date of this policy, the benefits payable will be limited to the premiums paid; or 2) two or more years after the effective date of this policy, but within two years of the effective date of an increase in the amount of coverage previously obtained, the benefits payable will be limited to the coverage obtained prior to the effective date of the increase, if any, plus the premiums paid for the increased coverage.

1 Any coverage offered by AUL prior to and after the Effective Date of coverage is contingent upon information and documents received by AUL being accurate and reliable.
2 Contracts covering insureds residing in KS, LA, MO, MT, NE, OK and SD do not have arbitration provisions. Contracts covering insureds residing in AR, CA, CT, FL, ME, NJ, NM, VA, WA, WV and WY do not have binding arbitration provisions. Contracts covering insureds in KY and NH do not allow any type of arbitration in Life Insurance and Annuity contracts. Contracts in TX do not include an arbitration provision.
3 Limitations may vary by state.
4 The policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. The policy may contain a waiting or elimination period between the effective date of the policy and the effective date of coverage, and a time period between the date a loss occurs and the date benefits begin to be payable for the loss.
5 In Colorado suicide/attempted suicide while insane does not apply.
6 1 year for insureds residing in Colorado and North Dakota; 1 year suicide for insureds in Missouri may apply.

Accelerated Life Benefit, if Applicable:

Certain insured individuals diagnosed with a terminal condition may be eligible to request payment of an Accelerated Life Benefit under the group life insurance contract. A terminal condition is an injury or sickness that despite appropriate medical care is reasonably expected to result in the Person's death within a specified time frame following the date of the Accelerated Life Benefit payment, as determined by AUL. After payment of Accelerated Life Benefits, the amount of the Person's life insurance payable at death to the Person's beneficiary will equal the amount of the Person's life insurance if no Accelerated Life Benefit payment had been made minus the amount of the Accelerated Life Benefit payment minus an interest charge.

The Accelerated Life Benefit offered under the contract may or may not qualify for favorable tax treatment under the Internal Revenue Code of 1986. Whether such benefits qualify depends on factors such as the Person's life expectancy at the time benefits are accelerated or whether the Person uses the benefits to pay for necessary long-term care expenses, such as nursing home care. If the Accelerated Life Benefits qualify for favorable tax treatment, the benefits will be excludable from the Person's income and not subject to federal taxation. Tax laws relating to Accelerated Life Benefits are complex. The Person is advised to consult with a qualified tax advisor about circumstances under which he/she could receive Accelerated Life Benefits excludable from income under federal law.

Receipt of Accelerated Life Benefits may affect a Person's, his/her spouse's, or his/her family's eligibility for public assistance programs such as medical assistance (Medicaid), Aid to Families with Dependent Children (AFDC), supplementary social security income (SSI), and drug assistance programs. The Person is advised to consult with a qualified tax advisor and with social service agencies concerning how receipt of such a payment will affect a Person's, his/her spouse's, or his/her family's eligibility for public assistance.

Disability Limitations/Exclusions:

Pre-existing Condition Limitation:

Certain disabilities are not covered if the cause of the disability is traceable to a condition existing prior to the insured's effective date of coverage. A pre-existing condition is any condition for which an ordinarily prudent person would ordinarily have done any of the following at any time, during the period of time stated in the contract, whether or not that condition is diagnosed at all or is misdiagnosed during that period of time: a) received medical treatment or consultation; b) taken or were prescribed drugs or medicine; or c) received care or services, including diagnostic measures. Insureds must also be treatment-free for a time-frame specified in some contracts following the individual effective date of coverage.

Fraud Notice:

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

In OHIO any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Call Your ComPsych® GuidanceResources® program anytime for confidential assistance.

Call: **855.387.9727**
Go online: **guidanceresources.com**

TDD: 800.697.0353
Your company Web ID: **ONEAMERICA3**

Personal issues, planning for life events or simply managing daily life can affect your work, health and family. Your GuidanceResources program provides support, resources and information for personal and work-life issues. The program is company-sponsored, confidential and provided at no charge to you and your dependents. This flyer explains how GuidanceResources can help you and your family deal with everyday challenges.

Confidential Counseling

3 Session Plan

This no-cost counseling service helps you address stress, relationship and other personal issues you and your family may face. It is staffed by GuidanceConsultants℠—highly trained master's and doctoral level clinicians who will listen to your concerns and quickly refer you to in-person counseling (up to 3 sessions per issue per year) and other resources for:

- Stress, anxiety and depression
- Relationship/marital conflicts
- Problems with children
- Job pressures
- Grief and loss
- Substance abuse

Financial Information and Resources

Discover your best options.

Speak by phone with our Certified Public Accountants and Certified Financial Planners on a wide range of financial issues, including:

- Getting out of debt
- Credit card or loan problems
- Tax questions
- Retirement planning
- Estate planning
- Saving for college

Legal Support and Resources

Expert info when you need it.

Talk to our attorneys by phone. If you require representation, we'll refer you to a qualified attorney in your area for a free 30-minute consultation with a 25% reduction in customary legal fees thereafter. Call about:

- Divorce and family law
- Debt and bankruptcy
- Landlord/tenant issues
- Real estate transactions
- Civil and criminal actions
- Contracts

Work-Life Solutions

Delegate your "to-do" list.

Our Work-Life specialists will do the research for you, providing qualified referrals and customized resources for:

- Child and elder care
- Moving and relocation
- Making major purchases
- College planning
- Pet care
- Home repair

GuidanceResources® Online

Knowledge at your fingertips.

GuidanceResources Online is your one stop for expert information on the issues that matter most to you...relationships, work, school, children, wellness, legal, financial, free time and more.

- Timely articles, HelpSheets℠, tutorials, streaming videos and self-assessments
- "Ask the Expert" personal responses to your questions
- Child care, elder care, attorney and financial planner searches

Free Online Will Preparation

Get peace of mind.

EstateGuidance® lets you quickly and easily write a will on your computer. Just go to www.guidanceresources.com and click on the EstateGuidance link. Follow the prompts to create and download your will at no cost. Online support and instructions for executing and filing your will are included. You can:

- Name an executor to manage your estate
- Choose a guardian for your children
- Specify your wishes for your property
- Provide funeral and burial instructions

Just call or click to access your services.

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EMPLOYEE BENEFITS

TRAVEL ASSISTANCE

Providing you peace of mind when traveling

Emergencies happen, but help is now only a phone call or email away. Generali Global Assistance® offers a suite of services to help you in your time of need — from small inconveniences like losing your medication to life-threatening situations — all delivered with a caring, human touch.

Find comfort in knowing you and your loved ones are protected by the Travel Assistance benefit when traveling more than 100 miles from home on a trip that lasts 90 days or less for business or pleasure. The Travel Assistance benefit protects you when covered under a OneAmerica® group life insurance contract. It also extends coverage to your spouse, domestic partner and children, even when they are traveling without you. The Travel Assistance benefit requires no additional premium; however, exclusions do apply.

Medical assistance services

Medical and dental referral to assist in finding physicians, dentists and medical facilities.

Replacement of medication or eyeglasses that have been lost or stolen, with guarantee of reimbursement by you.

Medical monitoring and review of documentation utilizing professional case managers and medical professionals to ensure appropriate care is received.

Visitation with a family member or a friend if you are traveling alone and must be hospitalized for at least seven days or are listed as in critical condition.

Dependent children assistance in the event you are hospitalized, including payment for their trip home and a qualified escort to accompany them.

Traveling companion assistance in the event they must cancel their travel arrangements due to medical emergencies.

Emergency evacuation in the event you must be transported to a medical facility or home under medical supervision.

Repatriation or cremation of remains in the event of death while traveling.

Trip interruption to arrange alternate transportation and accommodations necessary due to a medical emergency.

Emergency medical payment to cover medical and dental care expenses in the case of sudden, unexpected illness or injury during your trip, with guarantee of reimbursement by you.

For assistance call:
1-866-294-2469 (US/Canada)
+**1-240-330-1509** (call collect from other locations)
or email **ops@europassistance-usa.com**

GENERALI GLOBAL ASSISTANCE

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Personal assistance services

Pre-trip informational services including: visa, passport, immunization requirements, weather conditions, travel advisories and more.

Language interpretation for all major languages.

Location or replacement of lost or stolen items such as luggage, documents and personal possessions.

Emergency cash advance subject to guarantee of reimbursement by you.

Emergency travel arrangements when appropriate, such as airline changes or hotel and car rental reservations.

Legal assistance and advanced bail bond will be arranged, where permitted by law, with guarantee of reimbursement by you.

Emergency message relay via toll-free, direct or collect access.

Vehicle return arranged and paid for if you become physically unable to operate a non-commercial vehicle due to a medical emergency.

Pet return home coordinated if covered traveler is hospitalized.

Upon verification of coverage, Generali Global Assistance will arrange and cover the cost of the following services, subject to policy limits and eligibility:

- **Emergency evacuation:** $1,000,000 Combined Single Limit (CSL)
- **Medically necessary repatriation:** Included in CSL
- **Repatriation or cremation of remains:** Up to $25,000

If traveling alone:

- **Visit of family member or friend:** Up to $5,000
- **Return of minor children:** Up to $5,000
- **Traveling companion transportation:** Up to $5,000
- **Vehicle return:** Up to $2,500
- **Bereavement transportation:** Up to $2,500
- **Pet return:** Up to $1,000

Note: Group life products are issued and underwritten by American United Life Insurance Company® (AUL), Indianapolis, In., a OneAmerica company. Not available in all states or may vary by state. Travel assistance provided by Generali Global Assistance. Generali Global Assistance is not an affiliate of AUL, and is not a OneAmerica Company. Generali Global Assistance provides noted services worldwide for covered individuals. Services may be unavailable in countries currently under U.S. economic or trade sanctions. A list of affected counties is available at treasury.gov/resource-center/sanctions/Programs/Pages/Programs.aspx. Please refer to your policy for covered limits and eligibility details.

When contacting Generali Global Assistance, be prepared to provide:

- The name of your employer
- A phone number where you can be reached

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