



TheStandard®

Group Additional Life and Accidental Death and Dismemberment (AD&D) Insurance

FOR EMPLOYEES OF DOUGLAS COUNTY SCHOOL DISTRICT

Answers to your questions about coverage from Standard Insurance Company



STANDARD INSURANCE COMPANY

About This Booklet

This booklet is designed to answer some common questions about the group Additional Life and AD&D insurance coverage being offered by your *employer* to eligible employees. It is not intended to provide a detailed description of the coverage.

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the *group policy* issued by Standard Insurance Company. Neither the certificate nor the information presented in this booklet modifies the *group policy* or the insurance coverage in any way. If you have additional questions, please contact your employee benefits department.

Please note that defined terms and provisions from the *group policy* are italicized in this booklet. Features of the group Additional Life coverage may vary by state.



Group Additional Life and AD&D Insurance

It's not easy to think about, but what if you suddenly died? Your family could be faced with house payments, unpaid bills, childcare and other expenses just to maintain their current lifestyle. Could your family live without your income? Would your family be able to cover the medical expenses associated with a terminal illness or with burial and funeral expenses?

You make a great investment in your family. You spend time with them. You care for them. You work for them. And if you're not there for them, you want them protected. Your *employer* provides you with a basic amount of Group Life insurance to help protect your loved ones in the event of your death. Since every employee's needs are different, your *employer* also provides you with the opportunity to apply for Additional Life and AD&D insurance from The Standard.

The advantages to you and your loved ones include:

- **Choice.** You decide how much coverage you need from the range of amounts available.
- **Flexibility.** If your needs change, you can request to change the amount of coverage. Increases in coverage require *evidence of insurability*.
- **Convenience.** With premiums deducted directly from your paycheck, you don't have to worry about mailing monthly payments.
- **Peace of Mind.** You can take comfort and satisfaction in knowing that you have done something positive for your family's future.

Commonly Asked Questions

The following information provides details to give you a better understanding of group Additional Life insurance available from The Standard.

Am I eligible for this coverage?

To be eligible for this plan you must be insured for basic Group Life coverage with The Standard and an active Administrative, Professional, Technical or Certified employee of Douglas County School District with an assignment of at least .5 FTE.

Retired employees, temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible for this plan.

Your *spouse* or *children* must not be full-time members of the armed forces of any country.

When does my insurance go into effect?

The effective date of your coverage depends on when you become an eligible *member*, when you apply and whether you are required to provide *evidence of insurability*.

If you are not required to provide *evidence of insurability*, if you apply and agree to pay premiums, your Additional Life coverage becomes effective on:

- The date you become eligible if you apply on or before that date; or
- The date you apply if you apply within 31 days after you become eligible.

If you are required to provide *evidence of insurability*, if you apply and agree to pay premiums, your Additional Life coverage becomes effective on the date The Standard approves your *evidence of insurability*.

In every case, you must meet the *active work* requirement before your insurance becomes effective.

What is the active work requirement?

Active work means performing with reasonable continuity, the material duties of your own occupation at your *employer's* usual place of business. You must be capable of *active work* on the day before the scheduled effective date of your insurance or your insurance will not become effective as scheduled. If you are not *actively at work* on the day before the scheduled effective date of insurance (including Dependents Life insurance), your insurance will not become effective until the day after you complete 1 day of *active work* as an eligible employee.

How much coverage may I get for myself?

Eligible employees may elect Additional Life coverage in units of \$10,000, from \$10,000 to a maximum of \$500,000.

If you want to become insured for an amount of Additional Life in excess of the *guarantee issue amount* of \$100,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases are also subject to medical underwriting approval.

Is Accidental Death and Dismemberment (AD&D) coverage also included?

This plan also includes AD&D insurance from The Standard. With Additional Life and AD&D insurance, you or your *beneficiaries* may be eligible to receive an additional amount in the event of death or dismemberment as a result of an accident.

The amount of this *AD&D insurance benefit* for *loss of life* is equal to the amount payable for Additional Life insurance coverage on the date of the accident.

The amount of this *AD&D insurance benefit* for other covered *losses* is a percentage of the amount payable for Additional Life insurance coverage on the date of the accident, as shown below:

| <i>Loss</i> | <i>Percentage Payable</i> |
|--|---------------------------|
| One hand or one foot | 50 % |
| Sight in one eye, speech or hearing in both ears | 50 % |
| Two or more of the <i>losses</i> listed above | 100 % |
| Thumb and index finger on the same hand | 25 % |
| Quadriplegia | 100 % |
| Hemiplegia | 50 % |
| Paraplegia | 50 % |

The *loss* must occur due to an accident and independently of all other causes, within 365 days after the accident. *Loss of life* must be evidenced by a certified copy of the death certificate. All other *losses* must be certified by a *physician* in the appropriate specialty as determined by us.

How much coverage may I get for my spouse and children?

This plan also includes Dependents Life and AD&D insurance from The Standard.

Eligible employees may elect Life and AD&D coverage for a *spouse* in units of \$5,000, minimum of \$5,000 to a maximum of \$250,000.

If you elect an amount for your *spouse* greater than the *guarantee issue amount* of \$50,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases will also require medical underwriting approval.

You may elect Dependents Life and AD&D insurance for your eligible *children* in units of \$1,000 to \$10,000. A child is *eligible* from live birth through age 26, regardless of marital or student status. All late applications and requests for coverage increases will be subject to medical underwriting approval.

How much coverage do I need?

It can be difficult to determine the amount of insurance you need. Each family has its own unique set of circumstances, combined with needs that may arise with the unexpected loss of life. Use the worksheet below in calculating the amount of life insurance coverage you may need. The final total is the amount of Additional Life insurance you might want to consider applying for to meet your obligations. Once you determine how much coverage you need, complete the Enrollment Form within your enrollment packet and submit it to your employee benefits department.

| Immediate Needs | You | Your Spouse |
|--|------------|--------------------|
| Medical and hospital expenses | \$ _____ | \$ _____ |
| Funeral/Burial expenses | _____ | _____ |
| Loans/Debts requiring payment upon death | _____ | _____ |
| Taxes: | | |
| Federal and state income taxes | _____ | _____ |
| Property taxes | _____ | _____ |
| Federal and state estate taxes | _____ | _____ |
| Long Term Needs | | |
| Mortgage | \$ _____ | \$ _____ |
| Debts (credit cards, car and student loans, etc.) | _____ | _____ |
| Educational/Vocational fund | _____ | _____ |
| Childcare expenses | _____ | _____ |
| Emergency fund for unforeseen expenses | _____ | _____ |
| Income Replacement | | |
| Consider the income needed to support your family and the number of years they will need that support. | \$ _____ | \$ _____ |
| Total Income Needs | | |
| Add together all of the above. | \$ _____ | \$ _____ |
| Available Resources | | |
| Existing life insurance coverage | \$ _____ | \$ _____ |
| Other assets such as 401(k), stocks, bonds, etc. | _____ | _____ |
| Total Additional Life Insurance Needed | | |
| Subtract the amount of your available resources from your total income needs. | \$ _____ | \$ _____ |

How much will the Additional Life coverage cost me?

Use the following rates to determine the monthly premium for your Additional Life and AD&D coverage:

| Employee age on last July 1 | Rate per \$1,000 of total coverage |
|-----------------------------|------------------------------------|
| Age 24 and under | \$0.065 |
| Age 25 to 29 | \$0.074 |
| Age 30 to 34 | \$0.092 |
| Age 35 to 39 | \$0.101 |
| Age 40 to 44 | \$0.110 |
| Age 45 to 49 | \$0.155 |
| Age 50 to 54 | \$0.236 |
| Age 55 to 59 | \$0.425 |
| Age 60 to 64 | \$0.632 |
| Age 65 to 69 | \$1.190 |
| Age 70 to 74 | \$1.946 |
| Age 75 and above | \$3.440 |

To calculate your monthly premium:

$$\frac{\$ \text{Amount of Additional Life elected for self}}{\$1,000} = \text{_____} \times \$ \text{Premium rate from above chart} = \$ \text{Your monthly cost}$$

Use the following rates to determine the monthly premium for your *spouse's* Additional Life and AD&D coverage:

| Based on Employee's age on last July 1 | Rate per \$1,000 of total coverage |
|--|------------------------------------|
| Age 24 and under | \$0.065 |
| Age 25 to 29 | \$0.074 |
| Age 30 to 34 | \$0.092 |
| Age 35 to 39 | \$0.101 |
| Age 40 to 44 | \$0.110 |
| Age 45 to 49 | \$0.155 |
| Age 50 to 54 | \$0.236 |
| Age 55 to 59 | \$0.425 |
| Age 60 to 64 | \$0.632 |
| Age 65 and above | \$1.190 |

To calculate the monthly premium for your *spouse*:

$$\frac{\$ \text{Amount of Additional Life elected for spouse}}{\$1,000} = \text{_____} \times \$ \text{Premium rate from above chart} = \$ \text{Your monthly cost}$$

Your monthly child(ren) rate is \$0.20 per \$1,000 of Dependents Life and AD&D insurance for your eligible *children* regardless of the number of eligible *children* covered.

Will I have to provide information regarding my medical history?

If you apply for Additional Life insurance within 31 days of becoming eligible to apply and meet the *active work* requirement, you will automatically qualify for up to a set amount of insurance coverage called the *guarantee issue amount*. This means that you will not have to answer medical questions to purchase coverage up to this amount.

If you apply more than 31 days after becoming eligible to apply or if you determine that you need more insurance than the *guarantee issue amount*, satisfactory *evidence of insurability* is required. You will need to complete and submit a Medical History Statement. In some cases, we may request additional medical information or a physical exam.

Evidence of insurability is also required for reinstatement of terminated coverage and for *members* eligible but not insured under prior life insurance plans.

How do I apply for Additional Life insurance coverage?

To apply for Additional Life insurance, complete the Enrollment Form in your enrollment packet, place it in a confidential envelope and submit it to your human resources department. You can apply at any time, but remember if you apply more than 31 days after becoming eligible, satisfactory *evidence of insurability* is required. Coverage subject to *evidence of insurability* is not effective until approved by The Standard.

How are benefits paid?

For amounts of less than \$25,000, The Standard issues a check to each designated *beneficiary*. The Standard pays amounts of \$25,000 or more to each designated *beneficiary* by depositing funds into Standard Secure Access — a convenient, no fee, interest-bearing draft account.

With Standard Secure Access, each *beneficiary* receives a personalized checkbook and has complete control of the account. *Beneficiaries* can write checks as needed or for the full amount. This arrangement allows *beneficiaries* to earn competitive interest rates on their benefits while they take the necessary time to consider financial decisions and evaluate their choices.

Will insurance benefits be reduced as I grow older?

Under this plan, coverage reduces 50 percent at age 70. Dependents Life Insurance for your *spouse* terminates on the date you reach age 70. If you are age 70 or over, ask your employee benefits department for the amount of coverage available.

What happens if I become totally disabled and can't work?

The Standard will continue your Additional Life insurance without premium payments if you:

- Become *totally disabled* while insured under the *group policy*
- Are under the age of 60
- Complete the *waiting period* of 180 days
- Provide The Standard with satisfactory proof of *total disability*

The *Waiver of Premium* provision does not apply to AD&D insurance.

What happens if I become terminally ill?

Under the *Accelerated Benefit* provision, you may be eligible to receive up to 75 percent, or a maximum of \$500,000, of your Additional Life insurance coverage if you become terminally ill, have a life expectancy of less than 12 months and meet other eligibility requirements.

This benefit allows you to use the proceeds as you desire — whether to cover medical expenses or to maintain your quality of life. The amount of Additional Life insurance payable upon your death is reduced by the *Accelerated Benefit* paid and an interest charge. However, to help protect your *beneficiaries*, The Standard will pay at least 10 percent of the original Additional Life coverage amount at that time even if interest charges on the accelerated amount would have exhausted the remaining benefits over time.

Are there any other benefits with Additional Life coverage from The Standard?

The Standard pays an additional benefit, the *Repatriation Benefit*, if you die more than 200 miles from your primary place of residence. The Standard will pay for expenses, up to a benefit maximum, incurred to transport your body to a mortuary near your primary place of residence.

The Standard includes a travel assistance program that provides a full range of 24-hour medical, legal and travel assistance services to you and your dependents when you travel more than 100 miles from home or in a foreign country.¹

The AD&D coverage includes the following additional benefits when an *AD&D insurance benefit* is payable:

- **Seat Belt Benefit for you and your dependents.** The *Seat Belt Benefit* provision provides an additional benefit in the event you die as a result of an *automobile* accident and you were properly wearing and using a *seat belt system*.
- **Air Bag Benefit for you and your dependents.** The *Air Bag Benefit* provides an additional benefit in the event you die as a result of an *automobile* accident for which a *Seat Belt Benefit* is payable and the *automobile* is equipped with an *air bag system* which deployed as evidenced by a police accident report and you were seated in the driver's or passenger's seat intended to be protected by the *air bag system*.
- **Family Benefits Package for you.** The Family Benefits Package includes the *Child Care Benefit*, *Higher Education Benefit* and *Career Adjustment Benefit*. It provides your eligible family members with additional financial help for childcare, college or career training.
- **Occupational Assault for you.** The *Occupational Assault* provision provides an additional benefit if you suffer death or dismemberment as a result of an act of workplace physical violence that is punishable by law.
- **Public Transportation for you.** The *Public Transportation* provision provides an additional benefit in the event of death as a result of an accident that occurs while you are riding as a fare-paying passenger on *public transportation*.

¹ Provided through an agreement with MEDEX® Assistance Corporation.

What are the exclusions?

Additional Life includes an exclusion for death resulting from suicide or other intentionally self-inflicted injury while sane or insane. The amount payable will exclude amounts that have not been continuously in effect for at least one year on the date of death.

AD&D insurance benefits are not payable for death or dismemberment caused or contributed to by:

- *War* or act of *war*, declared or undeclared, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Suicide or other intentionally self-inflicted *injury* while sane or insane
- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a *physician*
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

When does coverage end?

Additional Life coverage ends automatically on the earliest of the following: The date the last period ends for which a premium was paid for your Additional Life insurance (except if premiums are waived while *totally disabled*, if applicable)

- The date your employment terminates
- The date your Group Life insurance ends
- The date the *group policy* terminates
- The date Additional Life insurance terminates under the *group policy*
- The date you cease to be a *member*; however, insurance may continue for limited periods under certain circumstances
- If applicable, the date your *employer* ceases to participate under the *group policy*

Dependents Life coverage for your *spouse* and *children* ends automatically on the earliest of the following:

- Five months after the date you die
- The date your Group Life insurance ends
- The date the Dependents Life insurance terminates under the *group policy*
- The date the last period ends for which a premium was paid for your Dependents Life insurance
- When the *dependent* ceases to be an eligible *dependent*
- The date you reach age 70.
- For your *spouse*, the date of your divorce or legal separation
- For a *child* who is *disabled*, 90 days after we mail you a request for proof of *disability*, if proof is not given

AD&D insurance for you and your *dependents* will automatically end on the earliest of the following:

- The date your Group Life insurance ends
- The date your *Waiver of Premium* begins
- The date the AD&D insurance terminates under the *group policy*
- The date the last period ends for which a premium was paid for your AD&D insurance
- For your *dependents*, the date your Dependents Life insurance ends
- The date your employment terminates

If my Additional Life insurance ends or is reduced, may I convert to an individual policy?

If your Additional Life insurance from The Standard ends or is reduced for any reason other than failure to pay premiums, you may be able to convert the terminated coverage to certain types of individual life insurance policies without providing *evidence of insurability*. You must apply for conversion and pay the required premium within 31 days after group coverage ends or is reduced. AD&D coverage may not be converted under this provision.

May I buy group life coverage after I leave my employer?

If your insurance ends because your employment terminates, you may be eligible to buy group life insurance from The Standard through the *Portability* provision, assuming you meet the eligibility requirements. Please see your employee benefits department for additional information. This option is not available in all states and is subject to state variations.

What if I have additional questions?

If you have any additional questions, please contact your employee benefits department.

Employee Rates per Month - Additional Life Coverage

| Coverage Amount | Employee Age as of January 1 st | | | | | | | | | | | |
|-----------------|--|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|--------|
| | < 25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70-74 | 75+* |
| \$10,000 | 0.65 | 0.74 | 0.92 | 1.01 | 1.10 | 1.55 | 2.36 | 4.25 | 6.32 | 11.90 | 9.73 | 17.20 |
| \$20,000 | 1.30 | 1.48 | 1.84 | 2.02 | 2.20 | 3.10 | 4.72 | 8.50 | 12.64 | 23.80 | 19.46 | 34.40 |
| \$30,000 | 1.95 | 2.22 | 2.76 | 3.03 | 3.30 | 4.65 | 7.08 | 12.75 | 18.96 | 35.70 | 29.19 | 51.60 |
| \$40,000 | 2.60 | 2.96 | 3.68 | 4.04 | 4.40 | 6.20 | 9.44 | 17.00 | 25.28 | 47.60 | 38.92 | 68.80 |
| \$50,000 | 3.25 | 3.70 | 4.60 | 5.05 | 5.50 | 7.75 | 11.80 | 21.25 | 31.60 | 59.50 | 48.65 | 86.00 |
| \$60,000 | 3.90 | 4.44 | 5.52 | 6.06 | 6.60 | 9.30 | 14.16 | 25.50 | 37.92 | 71.40 | 58.38 | 103.20 |
| \$70,000 | 4.55 | 5.18 | 6.44 | 7.07 | 7.70 | 10.85 | 16.52 | 29.75 | 44.24 | 83.30 | 68.11 | 120.40 |
| \$80,000 | 5.20 | 5.92 | 7.36 | 8.08 | 8.80 | 12.40 | 18.88 | 34.00 | 50.56 | 95.20 | 77.84 | 137.60 |
| \$90,000 | 5.85 | 6.66 | 8.28 | 9.09 | 9.90 | 13.95 | 21.24 | 38.25 | 56.88 | 107.10 | 87.57 | 154.80 |
| \$100,000 | 6.50 | 7.40 | 9.20 | 10.10 | 11.00 | 15.50 | 23.60 | 42.50 | 63.20 | 119.00 | 97.30 | 172.00 |
| \$110,000 | 7.15 | 8.14 | 10.12 | 11.11 | 12.10 | 17.05 | 25.96 | 46.75 | 69.52 | 130.90 | 107.03 | 189.20 |
| \$120,000 | 7.80 | 8.88 | 11.04 | 12.12 | 13.20 | 18.60 | 28.32 | 51.00 | 75.84 | 142.80 | 116.76 | 206.40 |
| \$130,000 | 8.45 | 9.62 | 11.96 | 13.13 | 14.30 | 20.15 | 30.68 | 55.25 | 82.16 | 154.70 | 126.49 | 223.60 |
| \$140,000 | 9.10 | 10.36 | 12.88 | 14.14 | 15.40 | 21.70 | 33.04 | 59.50 | 88.48 | 166.60 | 136.22 | 240.80 |
| \$150,000 | 9.75 | 11.10 | 13.80 | 15.15 | 16.50 | 23.25 | 35.40 | 63.75 | 94.80 | 178.50 | 145.95 | 258.00 |
| \$160,000 | 10.40 | 11.84 | 14.72 | 16.16 | 17.60 | 24.80 | 37.76 | 68.00 | 101.12 | 190.40 | 155.68 | 275.20 |
| \$170,000 | 11.05 | 12.58 | 15.64 | 17.17 | 18.70 | 26.35 | 40.12 | 72.25 | 107.44 | 202.30 | 165.41 | 292.40 |
| \$180,000 | 11.70 | 13.32 | 16.56 | 18.18 | 19.80 | 27.90 | 42.48 | 76.50 | 113.76 | 214.20 | 175.14 | 309.60 |
| \$190,000 | 12.35 | 14.06 | 17.48 | 19.19 | 20.90 | 29.45 | 44.84 | 80.75 | 120.08 | 226.10 | 184.87 | 326.80 |
| \$200,000 | 13.00 | 14.80 | 18.40 | 20.20 | 22.00 | 31.00 | 47.20 | 85.00 | 126.40 | 238.00 | 194.60 | 344.00 |
| \$210,000 | 13.65 | 15.54 | 19.32 | 21.21 | 23.10 | 32.55 | 49.56 | 89.25 | 132.72 | 249.90 | 204.33 | 361.20 |
| \$220,000 | 14.30 | 16.28 | 20.24 | 22.22 | 24.20 | 34.10 | 51.92 | 93.50 | 139.04 | 261.80 | 214.06 | 378.40 |
| \$230,000 | 14.95 | 17.02 | 21.16 | 23.23 | 25.30 | 35.65 | 54.28 | 97.75 | 145.36 | 273.70 | 223.79 | 395.60 |
| \$240,000 | 15.60 | 17.76 | 22.08 | 24.24 | 26.40 | 37.20 | 56.64 | 102.00 | 151.68 | 285.60 | 233.52 | 412.80 |
| \$250,000 | 16.25 | 18.50 | 23.00 | 25.25 | 27.50 | 38.75 | 59.00 | 106.25 | 158.00 | 297.50 | 243.25 | 430.00 |
| \$260,000 | 16.90 | 19.24 | 23.92 | 26.26 | 28.60 | 40.30 | 61.36 | 110.50 | 164.32 | 309.40 | 252.98 | 447.20 |
| \$270,000 | 17.55 | 19.98 | 24.84 | 27.27 | 29.70 | 41.85 | 63.72 | 114.75 | 170.64 | 321.30 | 262.71 | 464.40 |
| \$280,000 | 18.20 | 20.72 | 25.76 | 28.28 | 30.80 | 43.40 | 66.08 | 119.00 | 176.96 | 333.20 | 272.44 | 481.60 |
| \$290,000 | 18.85 | 21.46 | 26.68 | 29.29 | 31.90 | 44.95 | 68.44 | 123.25 | 183.28 | 345.10 | 282.17 | 498.80 |
| \$300,000 | 19.50 | 22.20 | 27.60 | 30.30 | 33.00 | 46.50 | 70.80 | 127.50 | 189.60 | 357.00 | 291.90 | 516.00 |
| \$310,000 | 20.15 | 22.94 | 28.52 | 31.31 | 34.10 | 48.05 | 73.16 | 131.75 | 195.92 | 368.90 | 301.63 | 533.20 |
| \$320,000 | 20.80 | 23.68 | 29.44 | 32.32 | 35.20 | 49.60 | 75.52 | 136.00 | 202.24 | 380.80 | 311.36 | 550.40 |
| \$330,000 | 21.45 | 24.42 | 30.36 | 33.33 | 36.30 | 51.15 | 77.88 | 140.25 | 208.56 | 392.70 | 321.09 | 567.60 |
| \$340,000 | 22.10 | 25.16 | 31.28 | 34.34 | 37.40 | 52.70 | 80.24 | 144.50 | 214.88 | 404.60 | 330.82 | 584.80 |
| \$350,000 | 22.75 | 25.90 | 32.20 | 35.35 | 38.50 | 54.25 | 82.60 | 148.75 | 221.20 | 416.50 | 340.55 | 602.00 |
| \$360,000 | 23.40 | 26.64 | 33.12 | 36.36 | 39.60 | 55.80 | 84.96 | 153.00 | 227.52 | 428.40 | 350.28 | 619.20 |
| \$370,000 | 24.05 | 27.38 | 34.04 | 37.37 | 40.70 | 57.35 | 87.32 | 157.25 | 233.84 | 440.30 | 360.01 | 636.40 |
| \$380,000 | 24.70 | 28.12 | 34.96 | 38.38 | 41.80 | 58.90 | 89.68 | 161.50 | 240.16 | 452.20 | 369.74 | 653.60 |
| \$390,000 | 25.35 | 28.86 | 35.88 | 39.39 | 42.90 | 60.45 | 92.04 | 165.75 | 246.48 | 464.10 | 379.47 | 670.80 |
| \$400,000 | 26.00 | 29.60 | 36.80 | 40.40 | 44.00 | 62.00 | 94.40 | 170.00 | 252.80 | 476.00 | 389.20 | 688.00 |
| \$410,000 | 26.65 | 30.34 | 37.72 | 41.41 | 45.10 | 63.55 | 96.76 | 174.25 | 259.12 | 487.90 | 398.93 | 705.20 |
| \$420,000 | 27.30 | 31.08 | 38.64 | 42.42 | 46.20 | 65.10 | 99.12 | 178.50 | 265.44 | 499.80 | 408.66 | 722.40 |
| \$430,000 | 27.95 | 31.82 | 39.56 | 43.43 | 47.30 | 66.65 | 101.48 | 182.75 | 271.76 | 511.70 | 418.39 | 739.60 |
| \$440,000 | 28.60 | 32.56 | 40.48 | 44.44 | 48.40 | 68.20 | 103.84 | 187.00 | 278.08 | 523.60 | 428.12 | 756.80 |
| \$450,000 | 29.25 | 33.30 | 41.40 | 45.45 | 49.50 | 69.75 | 106.20 | 191.25 | 284.40 | 535.50 | 437.85 | 774.00 |
| \$460,000 | 29.90 | 34.04 | 42.32 | 46.46 | 50.60 | 71.30 | 108.56 | 195.50 | 290.72 | 547.40 | 447.58 | 791.20 |
| \$470,000 | 30.55 | 34.78 | 43.24 | 47.47 | 51.70 | 72.85 | 110.92 | 199.75 | 297.04 | 559.30 | 457.31 | 808.40 |
| \$480,000 | 31.20 | 35.52 | 44.16 | 48.48 | 52.80 | 74.40 | 113.28 | 204.00 | 303.36 | 571.20 | 467.04 | 825.60 |
| \$490,000 | 31.85 | 36.26 | 45.08 | 49.49 | 53.90 | 75.95 | 115.64 | 208.25 | 309.68 | 583.10 | 476.77 | 842.80 |
| \$500,000 | 32.50 | 37.00 | 46.00 | 50.50 | 55.00 | 77.50 | 118.00 | 212.50 | 316.00 | 595.00 | 486.50 | 860.00 |

* Coverage amounts for ages 70 and over reduce due to Age Reduction (see Age Reduction Table).

Spouse Rates per Month - Additional Life Coverage

| Coverage Amount | Employee Age as of January 1 st | | | | | | | | | |
|-----------------|--|-------|-------|-------|-------|-------|-------|--------|--------|--------|
| | < 25 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 |
| \$5,000 | 0.33 | 0.37 | 0.46 | 0.51 | 0.55 | 0.78 | 1.18 | 2.13 | 3.16 | 5.95 |
| \$10,000 | 0.65 | 0.74 | 0.92 | 1.01 | 1.10 | 1.55 | 2.36 | 4.25 | 6.32 | 11.90 |
| \$15,000 | 0.98 | 1.11 | 1.38 | 1.52 | 1.65 | 2.33 | 3.54 | 6.38 | 9.48 | 17.85 |
| \$20,000 | 1.30 | 1.48 | 1.84 | 2.02 | 2.20 | 3.10 | 4.72 | 8.50 | 12.64 | 23.80 |
| \$25,000 | 1.63 | 1.85 | 2.30 | 2.53 | 2.75 | 3.88 | 5.90 | 10.63 | 15.80 | 29.75 |
| \$30,000 | 1.95 | 2.22 | 2.76 | 3.03 | 3.30 | 4.65 | 7.08 | 12.75 | 18.96 | 35.70 |
| \$35,000 | 2.28 | 2.59 | 3.22 | 3.54 | 3.85 | 5.43 | 8.26 | 14.88 | 22.12 | 41.65 |
| \$40,000 | 2.60 | 2.96 | 3.68 | 4.04 | 4.40 | 6.20 | 9.44 | 17.00 | 25.28 | 47.60 |
| \$45,000 | 2.93 | 3.33 | 4.14 | 4.55 | 4.95 | 6.98 | 10.62 | 19.13 | 28.44 | 53.55 |
| \$50,000 | 3.25 | 3.70 | 4.60 | 5.05 | 5.50 | 7.75 | 11.80 | 21.25 | 31.60 | 59.50 |
| \$55,000 | 3.58 | 4.07 | 5.06 | 5.56 | 6.05 | 8.53 | 12.98 | 23.38 | 34.76 | 65.45 |
| \$60,000 | 3.90 | 4.44 | 5.52 | 6.06 | 6.60 | 9.30 | 14.16 | 25.50 | 37.92 | 71.40 |
| \$65,000 | 4.23 | 4.81 | 5.98 | 6.57 | 7.15 | 10.08 | 15.34 | 27.63 | 41.08 | 77.35 |
| \$70,000 | 4.55 | 5.18 | 6.44 | 7.07 | 7.70 | 10.85 | 16.52 | 29.75 | 44.24 | 83.30 |
| \$75,000 | 4.88 | 5.55 | 6.90 | 7.58 | 8.25 | 11.63 | 17.70 | 31.88 | 47.40 | 89.25 |
| \$80,000 | 5.20 | 5.92 | 7.36 | 8.08 | 8.80 | 12.40 | 18.88 | 34.00 | 50.56 | 95.20 |
| \$85,000 | 5.53 | 6.29 | 7.82 | 8.59 | 9.35 | 13.18 | 20.06 | 36.13 | 53.72 | 101.15 |
| \$90,000 | 5.85 | 6.66 | 8.28 | 9.09 | 9.90 | 13.95 | 21.24 | 38.25 | 56.88 | 107.10 |
| \$95,000 | 6.18 | 7.03 | 8.74 | 9.60 | 10.45 | 14.73 | 22.42 | 40.38 | 60.04 | 113.05 |
| \$100,000 | 6.50 | 7.40 | 9.20 | 10.10 | 11.00 | 15.50 | 23.60 | 42.50 | 63.20 | 119.00 |
| \$105,000 | 6.83 | 7.77 | 9.66 | 10.61 | 11.55 | 16.28 | 24.78 | 44.63 | 66.36 | 124.95 |
| \$110,000 | 7.15 | 8.14 | 10.12 | 11.11 | 12.10 | 17.05 | 25.96 | 46.75 | 69.52 | 130.90 |
| \$115,000 | 7.48 | 8.51 | 10.58 | 11.62 | 12.65 | 17.83 | 27.14 | 48.88 | 72.68 | 136.85 |
| \$120,000 | 7.80 | 8.88 | 11.04 | 12.12 | 13.20 | 18.60 | 28.32 | 51.00 | 75.84 | 142.80 |
| \$125,000 | 8.13 | 9.25 | 11.50 | 12.63 | 13.75 | 19.38 | 29.50 | 53.13 | 79.00 | 148.75 |
| \$130,000 | 8.45 | 9.62 | 11.96 | 13.13 | 14.30 | 20.15 | 30.68 | 55.25 | 82.16 | 154.70 |
| \$135,000 | 8.78 | 9.99 | 12.42 | 13.64 | 14.85 | 20.93 | 31.86 | 57.38 | 85.32 | 160.65 |
| \$140,000 | 9.10 | 10.36 | 12.88 | 14.14 | 15.40 | 21.70 | 33.04 | 59.50 | 88.48 | 166.60 |
| \$145,000 | 9.43 | 10.73 | 13.34 | 14.65 | 15.95 | 22.48 | 34.22 | 61.63 | 91.64 | 172.55 |
| \$150,000 | 9.75 | 11.10 | 13.80 | 15.15 | 16.50 | 23.25 | 35.40 | 63.75 | 94.80 | 178.50 |
| \$155,000 | 10.08 | 11.47 | 14.26 | 15.66 | 17.05 | 24.03 | 36.58 | 65.88 | 97.96 | 184.45 |
| \$160,000 | 10.40 | 11.84 | 14.72 | 16.16 | 17.60 | 24.80 | 37.76 | 68.00 | 101.12 | 190.40 |
| \$165,000 | 10.73 | 12.21 | 15.18 | 16.67 | 18.15 | 25.58 | 38.94 | 70.13 | 104.28 | 196.35 |
| \$170,000 | 11.05 | 12.58 | 15.64 | 17.17 | 18.70 | 26.35 | 40.12 | 72.25 | 107.44 | 202.30 |
| \$175,000 | 11.38 | 12.95 | 16.10 | 17.68 | 19.25 | 27.13 | 41.30 | 74.38 | 110.60 | 208.25 |
| \$180,000 | 11.70 | 13.32 | 16.56 | 18.18 | 19.80 | 27.90 | 42.48 | 76.50 | 113.76 | 214.20 |
| \$185,000 | 12.03 | 13.69 | 17.02 | 18.69 | 20.35 | 28.68 | 43.66 | 78.63 | 116.92 | 220.15 |
| \$190,000 | 12.35 | 14.06 | 17.48 | 19.19 | 20.90 | 29.45 | 44.84 | 80.75 | 120.08 | 226.10 |
| \$195,000 | 12.68 | 14.43 | 17.94 | 19.70 | 21.45 | 30.23 | 46.02 | 82.88 | 123.24 | 232.05 |
| \$200,000 | 13.00 | 14.80 | 18.40 | 20.20 | 22.00 | 31.00 | 47.20 | 85.00 | 126.40 | 238.00 |
| \$205,000 | 13.33 | 15.17 | 18.86 | 20.71 | 22.55 | 31.78 | 48.38 | 87.13 | 129.56 | 243.95 |
| \$210,000 | 13.65 | 15.54 | 19.32 | 21.21 | 23.10 | 32.55 | 49.56 | 89.25 | 132.72 | 249.90 |
| \$215,000 | 13.98 | 15.91 | 19.78 | 21.72 | 23.65 | 33.33 | 50.74 | 91.38 | 135.88 | 255.85 |
| \$220,000 | 14.30 | 16.28 | 20.24 | 22.22 | 24.20 | 34.10 | 51.92 | 93.50 | 139.04 | 261.80 |
| \$225,000 | 14.63 | 16.65 | 20.70 | 22.73 | 24.75 | 34.88 | 53.10 | 95.63 | 142.20 | 267.75 |
| \$230,000 | 14.95 | 17.02 | 21.16 | 23.23 | 25.30 | 35.65 | 54.28 | 97.75 | 145.36 | 273.70 |
| \$235,000 | 15.28 | 17.39 | 21.62 | 23.74 | 25.85 | 36.43 | 55.46 | 99.88 | 148.52 | 279.65 |
| \$240,000 | 15.60 | 17.76 | 22.08 | 24.24 | 26.40 | 37.20 | 56.64 | 102.00 | 151.68 | 285.60 |
| \$245,000 | 15.93 | 18.13 | 22.54 | 24.75 | 26.95 | 37.98 | 57.82 | 104.13 | 154.84 | 291.55 |
| \$250,000 | 16.25 | 18.50 | 23.00 | 25.25 | 27.50 | 38.75 | 59.00 | 106.25 | 158.00 | 297.50 |

Mark all boxes and complete all sections that apply. Return completed form to your Human Resources Department.

| | | | | | | |
|--|--|---------------------|---|--|---|---------------------------|
| APPLICANT | Your Name (Last, First, Middle) | | Group Name Douglas County School District | | Group Number(s) 645797 | |
| | Your Address | | City | | State | ZIP |
| | Your Soc. Sec. No. | Date of Birth | <input type="checkbox"/> Male <input type="checkbox"/> Female | | Job Title/Occupation | |
| LIFE | Check with your coverage highlight about coverage options available to you and Evidence Of Insurability requirements. Additional/Optional Life <input type="checkbox"/> Additional/Optional Life with AD&D Your requested amount \$ _____ | | | | | |
| | Dependents Life Insurance with AD&D <input type="checkbox"/> Spouse requested amount \$ _____ <input type="checkbox"/> Eligible Child(ren) requested amount \$ _____ | | | | | |
| BENEFICIARY | This designation applies to Life/Life with AD&D Insurance available through your Employer, if any. Designations are not valid unless signed, dated, and delivered to the Employer during your lifetime. See page 2 for further information. | | | | | |
| | Primary - Full Name | | Address | | Soc. Sec. No. | Relationship % of Benefit |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Contingent - Full Name | | Address | | Soc. Sec. No. | Relationship % of Benefit |
| | | | | | | |
| CHANGE | Use this section only when you wish to make a change after insurance becomes effective. Complete all boxes and sections that apply. | | | | | |
| | <input type="checkbox"/> Add Dependent <input type="checkbox"/> Delete Dependent | | <input type="checkbox"/> Name Change | | <input type="checkbox"/> Beneficiary Change | |
| Date of add/delete _____ | | Former name _____ | | <input type="checkbox"/> Other _____ | | |
| SIGNATURE | I wish to make the choices indicated on this form. If electing coverage, I authorize deductions from my wages to cover my contribution, if required, toward the cost of insurance. I understand that my deduction amount will change if my coverage or costs change. | | | | | |
| | Member/Employee Signature Required | | | | Date (Mo/Day/Yr) | |
| Human Resources Department - Complete this section. Retain form for your records. | | | | | | |
| Date of Hire/Rehire | | Hrs. Worked Per Wk. | | Earnings \$ _____ Per: <input type="checkbox"/> Hour <input type="checkbox"/> Wk <input type="checkbox"/> Mo <input type="checkbox"/> Yr | | |

Beneficiary Information

- Your designation revokes all prior designations.
- Benefits are only payable to a contingent Beneficiary if you are not survived by one or more primary Beneficiary(ies).
- If you name two or more Beneficiaries in a class:
 1. Two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.
 2. If you provide for unequal shares in a class, and two or more Beneficiaries in that class survive, we will pay each surviving Beneficiary his or her designated share. Unless you provide otherwise, we will then pay the share(s) otherwise due to any deceased Beneficiary(ies) to the surviving Beneficiaries pro rata based on the relationship that the designated percentage or fractional share of each surviving Beneficiary bears to the total shares of all surviving Beneficiaries.
 3. If only one Beneficiary in a class survives, we will pay the total death benefits to that Beneficiary.
- If a minor (a person not of legal age), or your estate, is the Beneficiary, it may be necessary to have a guardian or a legal representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, the written trust must be identified in the Beneficiary designation. For example, “Dorothy Q. Smith, Trustee under the trust agreement dated _____.”
- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have any questions, consult your legal advisor.
- Dependents Insurance, if any, is payable to you, if living, or as provided under your Employer’s coverage under the Group Policy.

About Standard Insurance Company

Standard Insurance Company has earned a solid reputation for its quality products, expert resources, superior service, steady growth, innovation and strong financial performance. Founded in 1906, The Standard is a leader in the group disability and life insurance market, while also offering individual disability, group dental and retirement plans for groups and individuals.



Standard Insurance Company
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