

Additional Life Insurance

Standard Insurance Company has developed this document to provide you with information about the optional coverage you may select through your *employer*. Written in non-technical language, this is not intended as a complete description of the coverage. If you have additional questions, please refer to the Additional Life Employee Brochure included in your packet, review the district's benefit website, or check with the district's Benefit Specialist.

Employer Plan Effective Date

Hillsboro School District 1J provides Basic Life coverage from The Standard. If you qualify for Basic Life, you may also apply for Additional Life coverage to supplement your Basic Life amount for you, your Spouse and Child(ren).

Eligibility

To be eligible for this plan:

- You must be insured for Basic Life.
 - You must be an **active** employee of Hillsboro School District 1J, excluding, temporary or seasonal employees, full time members of the armed forces, leased employees or independent contractors
 - *Your spouse or children must not be full-time members of the armed forces of any country.*

Employee Coverage Amount

You may elect Additional Life coverage in units of \$10,000, to a maximum of \$500,000. If you wish to become insured for an amount of Additional Life in excess of \$200,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases are also subject to medical underwriting approval.

Spouse/Domestic Partner Coverage Amount

This coverage is available in units of \$10,000 to a maximum of \$500,000, but not to exceed 100% of your Additional Life coverage. If you elect an amount for your *spouse/domestic partner* greater than \$30,000, the excess will be subject to medical underwriting approval. All late applications and requests for coverage increases will also require medical underwriting approval.

Coverage Amount for Children

You may elect units of \$1,000 of Dependents Life Insurance for your eligible *children*.. The minimum is \$2,000 to a Maximum of \$10,000. You must be enrolled in the Additional Life plan in order to elect coverage for your dependent. All late applications will be subject to medical underwriting approval.

Please Note: During the Annual Open Enrollment period you will have the option to increase Additional Life coverage for yourself and your spouse without providing Medical Evidence by \$10,000 up to the Guarantee Issue amount of \$200,000 for yourself and \$30,000 for your spouse. Medical Evidence is required for amounts exceeding the Guarantee Issue maximum.

Employee Rates

<u>Employee Age on January 1st</u>	<u>Rate (Per \$1000 of Total Coverage)</u>
<29	\$0.06
30-34	\$0.08
35-39	\$0.09
40-44	\$0.14
45-49	\$0.23
50-54	\$0.35
55-59	\$0.75
60-64	\$0.96
65-69	\$1.72
70-74	\$2.23
75+	\$2.23

To calculate your premium:

$$\frac{\text{Amount Elected}}{\div \$1,000} = \text{_____} \times \$\frac{\text{_____}}{\text{(from chart)}} = \$\frac{\text{_____}}{\text{Your monthly cost}}$$

Spouse/Domestic Partner Rates

<u>Spouse Age on January 1st</u>	<u>Rate (Per \$1000 of Total Coverage)</u>
<29	\$0.06
30-34	\$0.08
35-39	\$0.09
40-44	\$0.14
45-49	\$0.23
50-54	\$0.35
55-59	\$0.75
60-64	\$0.96
65-69	\$1.72
70-74	\$2.23
75+	\$2.23

To calculate the premium for your spouse/domestic partner:

$$\frac{\text{Amount Elected}}{\div \$1,000} = \text{_____} \times \$\frac{\text{_____}}{\text{(from chart)}} = \$\frac{\text{_____}}{\text{Your monthly cost}}$$

Child(ren) Rate:

\$0.15 per \$1,000 of elected coverage. The monthly Dependent Child premium cost covers all eligible children, live birth up to age 21, or up to age 25 if a full time student..

Employee Coverage Effective Date

Please contact your human resources representative for more information regarding the following requirements that must be satisfied for your insurance to become effective. You must satisfy:

- An *active work* requirement. This means that 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 days of *active work* as an eligible employee.

Age Reductions

Under this plan, coverage reduces 35% at age 70, 50% at age 75. If you or your *spouse* are age 70 or over, ask your human resources representative for the amount of coverage available.

Suicide Exclusion

This plan includes an exclusion for death resulting from suicide or other intentionally self-inflicted injury. The amount payable will exclude amounts that have not been continuously in effect for at least two years on the date of death. This is subject to state variations.

Waiver of Premium Provision

The Standard may continue your 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*
- give us satisfactory proof of loss

Portability

If your insurance ends because your employment terminates, you may be eligible to buy portable group insurance coverage. Please see your human resources representative for additional information. This is subject to state variations.

When Spouse and Child Coverage Ends

Your brochure includes information about when your insurance ends. Any *spouse* and *child* coverage will automatically end on the earliest of the following:

- five months after the date you die
- the date your Life Insurance ends
- the date Dependents Life Insurance terminates under the *group policy*
- the date your *employer's* coverage under the *group policy* for Dependents Life Insurance terminates
- 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*
- for your *spouse* the date of your divorce or legal separation
- for a *child* who is *disabled*, 90 days after we mail you a proof of disability request, if proof is not given.

If you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage. The information presented above is controlled by the *group policy* and does not modify it in any way. The controlling provisions are in the *group policy* issued by Standard Insurance Company.