



Group Life Insurance

We can help provide for your family when you can't.

Group Life insurance can help protect your family's finances if something happens to you. This coverage can help provide financial support and stability to your family if you pass away.

Life insurance can help make things easier for the people you care about.

How much Life insurance do you need?

Consider your family's everyday expenses and big-ticket items. How will they manage without your income? How much help do they need to maintain their standard of living? Pay off debt? And fund your children's education?

Life insurance is an easy, responsible way to help your loved ones during a difficult time — and into the future.

What's at stake.

A death might leave your family facing expenses they couldn't pay without your income. That could include extra costs for medical care or a funeral.

This Life insurance coverage lets you take advantage of group rates. It's also convenient. Your premium payments are deducted directly from your paycheck. **Plan now to help your family cover future expenses, such as:**



Tuition



Child Care



Housing Costs



Daily Living Expenses

*For purposes of coverage information provided in the Group Voluntary Life Insurance Coverage Highlights, "Blue Valley School District" means "Unified School District No 229 Johnson County State of Kansas," who is the policyholder.

Life Insurance

How Much Can I Apply For?

Your amount may not exceed a maximum of 6 times your annual earnings, rounded up to the next multiple of \$10,000, if not already a multiple of \$10,000.

The coverage amount for your spouse cannot exceed 50% of your Life coverage.

The coverage amount for your child(ren) cannot exceed 50% of your Life coverage.

For You:

\$10,000–\$600,000 in increments of \$10,000

For Your Spouse:

\$5,000–\$250,000 in increments of \$5,000

For Your Children:

\$5,000–\$15,000 in increments of \$5,000

What Is The Guarantee Issue Amount?

Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions.

For You:

Up to \$300,000

For Your Spouse:

Up to \$50,000

See the Important Details section for more information, including requirements, exclusions, limitations, age reductions and definitions.

Annual Enrollment

During Your Employer's Annual Enrollment Period:

For You. If you are currently enrolled in Life insurance for an amount less than \$600,000 and less than 6 times your annual earnings (rounded up to the next multiple of \$10,000, if not already a multiple of \$10,000), you may elect to increase your coverage by up to 2 increments of \$10,000 up to \$600,000 or 6 times your annual earnings (rounded up to the next multiple of \$10,000, if not already a multiple of \$10,000) without having to answer health questions. If you are not currently enrolled in Life insurance, you may elect up to \$20,000 of coverage without having to answer health questions.

For Your Spouse. If your spouse is currently enrolled in Dependents Life insurance for an amount less than \$250,000, you may elect to increase coverage by up to 2 increments of \$5,000, up to the maximum coverage amount of \$250,000, without having to answer health questions. If your spouse is not currently enrolled in Dependents Life insurance, you may elect up to \$10,000 of coverage without having to answer health questions.

Additional Features

Accelerated Benefit	If you become terminally ill, you may be eligible to receive up to 75% of your Life benefit, to a maximum of \$500,000.
Travel Assistance¹	Available 24 hours a day, this service connects you to resources when you're traveling at least 100 miles from home or in a foreign country for up to 180 days.
Life Services Toolkit²	This service allows you and your beneficiaries access to online content for will preparation, identity theft support, and other tools and calculators, and provides your beneficiaries with services for grief, and legal and financial matters.

- 1 This service is provided through an arrangement with a service provider that is not affiliated with The Standard. Travel Assistance is not an insurance product in any state, except Oregon. For more information, visit standard.com/travel-info.
- 2 The Life Services Toolkit is offered through an arrangement with a service provider that is not affiliated with The Standard. For more information, visit standard.com/mytoolkit-info.

How Much Your Coverage Costs

Because this insurance is offered through Blue Valley School District, you'll have access to competitive group rates, which may be more affordable than those available through individual insurance. You'll also have the convenience of having your premium deducted directly from your paycheck.

The tables on the following pages provide the premium calculation based on your pay schedule, age and benefit amount. If you buy coverage for your spouse, use the Spouse Life table that pertains to your pay period and your spouse's age.

How Much Life Insurance Do You Need?

After a death in the family, there are many unexpected expenses. Your benefits could help your family pay for:

- Outstanding debt
- Your child(ren)'s education
- Burial expenses
- Medical bills
- Daily expenses

To estimate your insurance needs, you'll need to consider your unique circumstances. Use our online Life Insurance Needs Calculator for help finding the right amount to protect your loved ones.

Scan the QR code below with your mobile device to access the online calculator.



Coverage Amount	Employee Life: 18 Pay Period Premiums (Employee's Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$10,000	0.23	0.29	0.29	0.39	0.57	0.67	1.08	1.98	2.66	4.80	7.73
\$20,000	0.45	0.59	0.59	0.77	1.13	1.35	2.16	3.96	5.32	9.60	15.45
\$30,000	0.68	0.88	0.88	1.16	1.70	2.02	3.24	5.94	7.98	14.40	23.18
\$40,000	0.91	1.17	1.17	1.55	2.27	2.69	4.32	7.92	10.64	19.20	30.91
\$50,000	1.13	1.47	1.47	1.93	2.83	3.37	5.40	9.90	13.30	24.00	38.63
\$60,000	1.36	1.76	1.76	2.32	3.40	4.04	6.48	11.88	15.96	28.80	46.36
\$70,000	1.59	2.05	2.05	2.71	3.97	4.71	7.56	13.86	18.62	33.60	54.09
\$80,000	1.81	2.35	2.35	3.09	4.53	5.39	8.64	15.84	21.28	38.40	61.81
\$90,000	2.04	2.64	2.64	3.48	5.10	6.06	9.72	17.82	23.94	43.20	69.54
\$100,000	2.27	2.93	2.93	3.87	5.67	6.73	10.80	19.80	26.60	48.00	77.27
\$110,000	2.49	3.23	3.23	4.25	6.23	7.41	11.88	21.78	29.26	52.80	84.99
\$120,000	2.72	3.52	3.52	4.64	6.80	8.08	12.96	23.76	31.92	57.60	92.72
\$130,000	2.95	3.81	3.81	5.03	7.37	8.75	14.04	25.74	34.58	62.40	100.45
\$140,000	3.17	4.11	4.11	5.41	7.93	9.43	15.12	27.72	37.24	67.20	108.17
\$150,000	3.40	4.40	4.40	5.80	8.50	10.10	16.20	29.70	39.90	72.00	115.90
\$160,000	3.63	4.69	4.69	6.19	9.07	10.77	17.28	31.68	42.56	76.80	123.63
\$170,000	3.85	4.99	4.99	6.57	9.63	11.45	18.36	33.66	45.22	81.60	131.35
\$180,000	4.08	5.28	5.28	6.96	10.20	12.12	19.44	35.64	47.88	86.40	139.08
\$190,000	4.31	5.57	5.57	7.35	10.77	12.79	20.52	37.62	50.54	91.20	146.81
\$200,000	4.53	5.87	5.87	7.73	11.33	13.47	21.60	39.60	53.20	96.00	154.53
\$210,000	4.76	6.16	6.16	8.12	11.90	14.14	22.68	41.58	55.86	100.80	162.26
\$220,000	4.99	6.45	6.45	8.51	12.47	14.81	23.76	43.56	58.52	105.60	169.99
\$230,000	5.21	6.75	6.75	8.89	13.03	15.49	24.84	45.54	61.18	110.40	177.71
\$240,000	5.44	7.04	7.04	9.28	13.60	16.16	25.92	47.52	63.84	115.20	185.44
\$250,000	5.67	7.33	7.33	9.67	14.17	16.83	27.00	49.50	66.50	120.00	193.17
\$260,000	5.89	7.63	7.63	10.05	14.73	17.51	28.08	51.48	69.16	124.80	200.89
\$270,000	6.12	7.92	7.92	10.44	15.30	18.18	29.16	53.46	71.82	129.60	208.62
\$280,000	6.35	8.21	8.21	10.83	15.87	18.85	30.24	55.44	74.48	134.40	216.35
\$290,000	6.57	8.51	8.51	11.21	16.43	19.53	31.32	57.42	77.14	139.20	224.07
\$300,000	6.80	8.80	8.80	11.60	17.00	20.20	32.40	59.40	79.80	144.00	231.80
\$310,000	7.03	9.09	9.09	11.99	17.57	20.87	33.48	61.38	82.46	148.80	239.53
\$320,000	7.25	9.39	9.39	12.37	18.13	21.55	34.56	63.36	85.12	153.60	247.25
\$330,000	7.48	9.68	9.68	12.76	18.70	22.22	35.64	65.34	87.78	158.40	254.98
\$340,000	7.71	9.97	9.97	13.15	19.27	22.89	36.72	67.32	90.44	163.20	262.71
\$350,000	7.93	10.27	10.27	13.53	19.83	23.57	37.80	69.30	93.10	168.00	270.43
\$360,000	8.16	10.56	10.56	13.92	20.40	24.24	38.88	71.28	95.76	172.80	278.16
\$370,000	8.39	10.85	10.85	14.31	20.97	24.91	39.96	73.26	98.42	177.60	285.89
\$380,000	8.61	11.15	11.15	14.69	21.53	25.59	41.04	75.24	101.08	182.40	293.61
\$390,000	8.84	11.44	11.44	15.08	22.10	26.26	42.12	77.22	103.74	187.20	301.34
\$400,000	9.07	11.73	11.73	15.47	22.67	26.93	43.20	79.20	106.40	192.00	309.07

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Coverage Amount	Continued Employee Life: 18 Pay Period Premiums (Employee's Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$410,000	9.29	12.03	12.03	15.85	23.23	27.61	44.28	81.18	109.06	196.80	316.79
\$420,000	9.52	12.32	12.32	16.24	23.80	28.28	45.36	83.16	111.72	201.60	324.52
\$430,000	9.75	12.61	12.61	16.63	24.37	28.95	46.44	85.14	114.38	206.40	332.25
\$440,000	9.97	12.91	12.91	17.01	24.93	29.63	47.52	87.12	117.04	211.20	339.97
\$450,000	10.20	13.20	13.20	17.40	25.50	30.30	48.60	89.10	119.70	216.00	347.70
\$460,000	10.43	13.49	13.49	17.79	26.07	30.97	49.68	91.08	122.36	220.80	355.43
\$470,000	10.65	13.79	13.79	18.17	26.63	31.65	50.76	93.06	125.02	225.60	363.15
\$480,000	10.88	14.08	14.08	18.56	27.20	32.32	51.84	95.04	127.68	230.40	370.88
\$490,000	11.11	14.37	14.37	18.95	27.77	32.99	52.92	97.02	130.34	235.20	378.61
\$500,000	11.33	14.67	14.67	19.33	28.33	33.67	54.00	99.00	133.00	240.00	386.33
\$510,000	11.56	14.96	14.96	19.72	28.90	34.34	55.08	100.98	135.66	244.80	394.06
\$520,000	11.79	15.25	15.25	20.11	29.47	35.01	56.16	102.96	138.32	249.60	401.79
\$530,000	12.01	15.55	15.55	20.49	30.03	35.69	57.24	104.94	140.98	254.40	409.51
\$540,000	12.24	15.84	15.84	20.88	30.60	36.36	58.32	106.92	143.64	259.20	417.24
\$550,000	12.47	16.13	16.13	21.27	31.17	37.03	59.40	108.90	146.30	264.00	424.97
\$560,000	12.69	16.43	16.43	21.65	31.73	37.71	60.48	110.88	148.96	268.80	432.69
\$570,000	12.92	16.72	16.72	22.04	32.30	38.38	61.56	112.86	151.62	273.60	440.42
\$580,000	13.15	17.01	17.01	22.43	32.87	39.05	62.64	114.84	154.28	278.40	448.15
\$590,000	13.37	17.31	17.31	22.81	33.43	39.73	63.72	116.82	156.94	283.20	455.87
\$600,000	13.60	17.60	17.60	23.20	34.00	40.40	64.80	118.80	159.60	288.00	463.60

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Coverage Amount	Spouse Life: 18 Pay Period Premiums (Spouse's Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$5,000	0.11	0.15	0.15	0.19	0.28	0.34	0.54	0.99	1.33	2.40	3.86
\$10,000	0.23	0.29	0.29	0.39	0.57	0.67	1.08	1.98	2.66	4.80	7.73
\$15,000	0.34	0.44	0.44	0.58	0.85	1.01	1.62	2.97	3.99	7.20	11.59
\$20,000	0.45	0.59	0.59	0.77	1.13	1.35	2.16	3.96	5.32	9.60	15.45
\$25,000	0.57	0.73	0.73	0.97	1.42	1.68	2.70	4.95	6.65	12.00	19.32
\$30,000	0.68	0.88	0.88	1.16	1.70	2.02	3.24	5.94	7.98	14.40	23.18
\$35,000	0.79	1.03	1.03	1.35	1.98	2.36	3.78	6.93	9.31	16.80	27.04
\$40,000	0.91	1.17	1.17	1.55	2.27	2.69	4.32	7.92	10.64	19.20	30.91
\$45,000	1.02	1.32	1.32	1.74	2.55	3.03	4.86	8.91	11.97	21.60	34.77
\$50,000	1.13	1.47	1.47	1.93	2.83	3.37	5.40	9.90	13.30	24.00	38.63
\$55,000	1.25	1.61	1.61	2.13	3.12	3.70	5.94	10.89	14.63	26.40	42.50
\$60,000	1.36	1.76	1.76	2.32	3.40	4.04	6.48	11.88	15.96	28.80	46.36
\$65,000	1.47	1.91	1.91	2.51	3.68	4.38	7.02	12.87	17.29	31.20	50.22
\$70,000	1.59	2.05	2.05	2.71	3.97	4.71	7.56	13.86	18.62	33.60	54.09
\$75,000	1.70	2.20	2.20	2.90	4.25	5.05	8.10	14.85	19.95	36.00	57.95
\$80,000	1.81	2.35	2.35	3.09	4.53	5.39	8.64	15.84	21.28	38.40	61.81
\$85,000	1.93	2.49	2.49	3.29	4.82	5.72	9.18	16.83	22.61	40.80	65.68
\$90,000	2.04	2.64	2.64	3.48	5.10	6.06	9.72	17.82	23.94	43.20	69.54
\$95,000	2.15	2.79	2.79	3.67	5.38	6.40	10.26	18.81	25.27	45.60	73.40
\$100,000	2.27	2.93	2.93	3.87	5.67	6.73	10.80	19.80	26.60	48.00	77.27
\$105,000	2.38	3.08	3.08	4.06	5.95	7.07	11.34	20.79	27.93	50.40	81.13
\$110,000	2.49	3.23	3.23	4.25	6.23	7.41	11.88	21.78	29.26	52.80	84.99
\$115,000	2.61	3.37	3.37	4.45	6.52	7.74	12.42	22.77	30.59	55.20	88.86
\$120,000	2.72	3.52	3.52	4.64	6.80	8.08	12.96	23.76	31.92	57.60	92.72
\$125,000	2.83	3.67	3.67	4.83	7.08	8.42	13.50	24.75	33.25	60.00	96.58
\$130,000	2.95	3.81	3.81	5.03	7.37	8.75	14.04	25.74	34.58	62.40	100.45
\$135,000	3.06	3.96	3.96	5.22	7.65	9.09	14.58	26.73	35.91	64.80	104.31
\$140,000	3.17	4.11	4.11	5.41	7.93	9.43	15.12	27.72	37.24	67.20	108.17
\$145,000	3.29	4.25	4.25	5.61	8.22	9.76	15.66	28.71	38.57	69.60	112.04
\$150,000	3.40	4.40	4.40	5.80	8.50	10.10	16.20	29.70	39.90	72.00	115.90
\$155,000	3.51	4.55	4.55	5.99	8.78	10.44	16.74	30.69	41.23	74.40	119.76
\$160,000	3.63	4.69	4.69	6.19	9.07	10.77	17.28	31.68	42.56	76.80	123.63
\$165,000	3.74	4.84	4.84	6.38	9.35	11.11	17.82	32.67	43.89	79.20	127.49
\$170,000	3.85	4.99	4.99	6.57	9.63	11.45	18.36	33.66	45.22	81.60	131.35
\$175,000	3.97	5.13	5.13	6.77	9.92	11.78	18.90	34.65	46.55	84.00	135.22
\$180,000	4.08	5.28	5.28	6.96	10.20	12.12	19.44	35.64	47.88	86.40	139.08
\$185,000	4.19	5.43	5.43	7.15	10.48	12.46	19.98	36.63	49.21	88.80	142.94
\$190,000	4.31	5.57	5.57	7.35	10.77	12.79	20.52	37.62	50.54	91.20	146.81
\$195,000	4.42	5.72	5.72	7.54	11.05	13.13	21.06	38.61	51.87	93.60	150.67
\$200,000	4.53	5.87	5.87	7.73	11.33	13.47	21.60	39.60	53.20	96.00	154.53
\$205,000	4.65	6.01	6.01	7.93	11.62	13.80	22.14	40.59	54.53	98.40	158.40
\$210,000	4.76	6.16	6.16	8.12	11.90	14.14	22.68	41.58	55.86	100.80	162.26
\$215,000	4.87	6.31	6.31	8.31	12.18	14.48	23.22	42.57	57.19	103.20	166.12
\$220,000	4.99	6.45	6.45	8.51	12.47	14.81	23.76	43.56	58.52	105.60	169.99
\$225,000	5.10	6.60	6.60	8.70	12.75	15.15	24.30	44.55	59.85	108.00	173.85
\$230,000	5.21	6.75	6.75	8.89	13.03	15.49	24.84	45.54	61.18	110.40	177.71
\$235,000	5.33	6.89	6.89	9.09	13.32	15.82	25.38	46.53	62.51	112.80	181.58
\$240,000	5.44	7.04	7.04	9.28	13.60	16.16	25.92	47.52	63.84	115.20	185.44
\$245,000	5.55	7.19	7.19	9.47	13.88	16.50	26.46	48.51	65.17	117.60	189.30
\$250,000	5.67	7.33	7.33	9.67	14.17	16.83	27.00	49.50	66.50	120.00	193.17

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Child Life: 18 Pay Period Premiums**	
Coverage Amount	Premium
\$5,000	0.67
\$10,000	1.33
\$15,000	2.00

**Regardless of the number of eligible children covered.

Coverage Amount	Employee Life: 24 Pay Periods (Employee's Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$10,000	0.17	0.22	0.22	0.29	0.43	0.51	0.81	1.49	2.00	3.60	5.80
\$20,000	0.34	0.44	0.44	0.58	0.85	1.01	1.62	2.97	3.99	7.20	11.59
\$30,000	0.51	0.66	0.66	0.87	1.28	1.52	2.43	4.46	5.99	10.80	17.39
\$40,000	0.68	0.88	0.88	1.16	1.70	2.02	3.24	5.94	7.98	14.40	23.18
\$50,000	0.85	1.10	1.10	1.45	2.13	2.53	4.05	7.43	9.98	18.00	28.98
\$60,000	1.02	1.32	1.32	1.74	2.55	3.03	4.86	8.91	11.97	21.60	34.77
\$70,000	1.19	1.54	1.54	2.03	2.98	3.54	5.67	10.40	13.97	25.20	40.57
\$80,000	1.36	1.76	1.76	2.32	3.40	4.04	6.48	11.88	15.96	28.80	46.36
\$90,000	1.53	1.98	1.98	2.61	3.83	4.55	7.29	13.37	17.96	32.40	52.16
\$100,000	1.70	2.20	2.20	2.90	4.25	5.05	8.10	14.85	19.95	36.00	57.95
\$110,000	1.87	2.42	2.42	3.19	4.68	5.56	8.91	16.34	21.95	39.60	63.75
\$120,000	2.04	2.64	2.64	3.48	5.10	6.06	9.72	17.82	23.94	43.20	69.54
\$130,000	2.21	2.86	2.86	3.77	5.53	6.57	10.53	19.31	25.94	46.80	75.34
\$140,000	2.38	3.08	3.08	4.06	5.95	7.07	11.34	20.79	27.93	50.40	81.13
\$150,000	2.55	3.30	3.30	4.35	6.38	7.58	12.15	22.28	29.93	54.00	86.93
\$160,000	2.72	3.52	3.52	4.64	6.80	8.08	12.96	23.76	31.92	57.60	92.72
\$170,000	2.89	3.74	3.74	4.93	7.23	8.59	13.77	25.25	33.92	61.20	98.52
\$180,000	3.06	3.96	3.96	5.22	7.65	9.09	14.58	26.73	35.91	64.80	104.31
\$190,000	3.23	4.18	4.18	5.51	8.08	9.60	15.39	28.22	37.91	68.40	110.11
\$200,000	3.40	4.40	4.40	5.80	8.50	10.10	16.20	29.70	39.90	72.00	115.90
\$210,000	3.57	4.62	4.62	6.09	8.93	10.61	17.01	31.19	41.90	75.60	121.70
\$220,000	3.74	4.84	4.84	6.38	9.35	11.11	17.82	32.67	43.89	79.20	127.49
\$230,000	3.91	5.06	5.06	6.67	9.78	11.62	18.63	34.16	45.89	82.80	133.29
\$240,000	4.08	5.28	5.28	6.96	10.20	12.12	19.44	35.64	47.88	86.40	139.08
\$250,000	4.25	5.50	5.50	7.25	10.63	12.63	20.25	37.13	49.88	90.00	144.88
\$260,000	4.42	5.72	5.72	7.54	11.05	13.13	21.06	38.61	51.87	93.60	150.67
\$270,000	4.59	5.94	5.94	7.83	11.48	13.64	21.87	40.10	53.87	97.20	156.47
\$280,000	4.76	6.16	6.16	8.12	11.90	14.14	22.68	41.58	55.86	100.80	162.26
\$290,000	4.93	6.38	6.38	8.41	12.33	14.65	23.49	43.07	57.86	104.40	168.06
\$300,000	5.10	6.60	6.60	8.70	12.75	15.15	24.30	44.55	59.85	108.00	173.85
\$310,000	5.27	6.82	6.82	8.99	13.18	15.66	25.11	46.04	61.85	111.60	179.65
\$320,000	5.44	7.04	7.04	9.28	13.60	16.16	25.92	47.52	63.84	115.20	185.44
\$330,000	5.61	7.26	7.26	9.57	14.03	16.67	26.73	49.01	65.84	118.80	191.24
\$340,000	5.78	7.48	7.48	9.86	14.45	17.17	27.54	50.49	67.83	122.40	197.03
\$350,000	5.95	7.70	7.70	10.15	14.88	17.68	28.35	51.98	69.83	126.00	202.83
\$360,000	6.12	7.92	7.92	10.44	15.30	18.18	29.16	53.46	71.82	129.60	208.62
\$370,000	6.29	8.14	8.14	10.73	15.73	18.69	29.97	54.95	73.82	133.20	214.42
\$380,000	6.46	8.36	8.36	11.02	16.15	19.19	30.78	56.43	75.81	136.80	220.21
\$390,000	6.63	8.58	8.58	11.31	16.58	19.70	31.59	57.92	77.81	140.40	226.01
\$400,000	6.80	8.80	8.80	11.60	17.00	20.20	32.40	59.40	79.80	144.00	231.80

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Coverage Amount	Continued Employee Life: 24 Pay Periods (Employee's Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$410,000	6.97	9.02	9.02	11.89	17.43	20.71	33.21	60.89	81.80	147.60	237.60
\$420,000	7.14	9.24	9.24	12.18	17.85	21.21	34.02	62.37	83.79	151.20	243.39
\$430,000	7.31	9.46	9.46	12.47	18.28	21.72	34.83	63.86	85.79	154.80	249.19
\$440,000	7.48	9.68	9.68	12.76	18.70	22.22	35.64	65.34	87.78	158.40	254.98
\$450,000	7.65	9.90	9.90	13.05	19.13	22.73	36.45	66.83	89.78	162.00	260.78
\$460,000	7.82	10.12	10.12	13.34	19.55	23.23	37.26	68.31	91.77	165.60	266.57
\$470,000	7.99	10.34	10.34	13.63	19.98	23.74	38.07	69.80	93.77	169.20	272.37
\$480,000	8.16	10.56	10.56	13.92	20.40	24.24	38.88	71.28	95.76	172.80	278.16
\$490,000	8.33	10.78	10.78	14.21	20.83	24.75	39.69	72.77	97.76	176.40	283.96
\$500,000	8.50	11.00	11.00	14.50	21.25	25.25	40.50	74.25	99.75	180.00	289.75
\$510,000	8.67	11.22	11.22	14.79	21.68	25.76	41.31	75.74	101.75	183.60	295.55
\$520,000	8.84	11.44	11.44	15.08	22.10	26.26	42.12	77.22	103.74	187.20	301.34
\$530,000	9.01	11.66	11.66	15.37	22.53	26.77	42.93	78.71	105.74	190.80	307.14
\$540,000	9.18	11.88	11.88	15.66	22.95	27.27	43.74	80.19	107.73	194.40	312.93
\$550,000	9.35	12.10	12.10	15.95	23.38	27.78	44.55	81.68	109.73	198.00	318.73
\$560,000	9.52	12.32	12.32	16.24	23.80	28.28	45.36	83.16	111.72	201.60	324.52
\$570,000	9.69	12.54	12.54	16.53	24.23	28.79	46.17	84.65	113.72	205.20	330.32
\$580,000	9.86	12.76	12.76	16.82	24.65	29.29	46.98	86.13	115.71	208.80	336.11
\$590,000	10.03	12.98	12.98	17.11	25.08	29.80	47.79	87.62	117.71	212.40	341.91
\$600,000	10.20	13.20	13.20	17.40	25.50	30.30	48.60	89.10	119.70	216.00	347.70

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Coverage Amount	Spouse Life: 24 Pay Period Premiums (Spouse Age as of Jan. 1)										
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$5,000	0.09	0.11	0.11	0.15	0.21	0.25	0.41	0.74	1.00	1.80	2.90
\$10,000	0.17	0.22	0.22	0.29	0.43	0.51	0.81	1.49	2.00	3.60	5.80
\$15,000	0.26	0.33	0.33	0.44	0.64	0.76	1.22	2.23	2.99	5.40	8.69
\$20,000	0.34	0.44	0.44	0.58	0.85	1.01	1.62	2.97	3.99	7.20	11.59
\$25,000	0.43	0.55	0.55	0.73	1.06	1.26	2.03	3.71	4.99	9.00	14.49
\$30,000	0.51	0.66	0.66	0.87	1.28	1.52	2.43	4.46	5.99	10.80	17.39
\$35,000	0.60	0.77	0.77	1.02	1.49	1.77	2.84	5.20	6.98	12.60	20.28
\$40,000	0.68	0.88	0.88	1.16	1.70	2.02	3.24	5.94	7.98	14.40	23.18
\$45,000	0.77	0.99	0.99	1.31	1.91	2.27	3.65	6.68	8.98	16.20	26.08
\$50,000	0.85	1.10	1.10	1.45	2.13	2.53	4.05	7.43	9.98	18.00	28.98
\$55,000	0.94	1.21	1.21	1.60	2.34	2.78	4.46	8.17	10.97	19.80	31.87
\$60,000	1.02	1.32	1.32	1.74	2.55	3.03	4.86	8.91	11.97	21.60	34.77
\$65,000	1.11	1.43	1.43	1.89	2.76	3.28	5.27	9.65	12.97	23.40	37.67
\$70,000	1.19	1.54	1.54	2.03	2.98	3.54	5.67	10.40	13.97	25.20	40.57
\$75,000	1.28	1.65	1.65	2.18	3.19	3.79	6.08	11.14	14.96	27.00	43.46
\$80,000	1.36	1.76	1.76	2.32	3.40	4.04	6.48	11.88	15.96	28.80	46.36
\$85,000	1.45	1.87	1.87	2.47	3.61	4.29	6.89	12.62	16.96	30.60	49.26
\$90,000	1.53	1.98	1.98	2.61	3.83	4.55	7.29	13.37	17.96	32.40	52.16
\$95,000	1.62	2.09	2.09	2.76	4.04	4.80	7.70	14.11	18.95	34.20	55.05
\$100,000	1.70	2.20	2.20	2.90	4.25	5.05	8.10	14.85	19.95	36.00	57.95
\$105,000	1.79	2.31	2.31	3.05	4.46	5.30	8.51	15.59	20.95	37.80	60.85
\$110,000	1.87	2.42	2.42	3.19	4.68	5.56	8.91	16.34	21.95	39.60	63.75
\$115,000	1.96	2.53	2.53	3.34	4.89	5.81	9.32	17.08	22.94	41.40	66.64
\$120,000	2.04	2.64	2.64	3.48	5.10	6.06	9.72	17.82	23.94	43.20	69.54
\$125,000	2.13	2.75	2.75	3.63	5.31	6.31	10.13	18.56	24.94	45.00	72.44
\$130,000	2.21	2.86	2.86	3.77	5.53	6.57	10.53	19.31	25.94	46.80	75.34
\$135,000	2.30	2.97	2.97	3.92	5.74	6.82	10.94	20.05	26.93	48.60	78.23
\$140,000	2.38	3.08	3.08	4.06	5.95	7.07	11.34	20.79	27.93	50.40	81.13
\$145,000	2.47	3.19	3.19	4.21	6.16	7.32	11.75	21.53	28.93	52.20	84.03
\$150,000	2.55	3.30	3.30	4.35	6.38	7.58	12.15	22.28	29.93	54.00	86.93
\$155,000	2.64	3.41	3.41	4.50	6.59	7.83	12.56	23.02	30.92	55.80	89.82
\$160,000	2.72	3.52	3.52	4.64	6.80	8.08	12.96	23.76	31.92	57.60	92.72
\$165,000	2.81	3.63	3.63	4.79	7.01	8.33	13.37	24.50	32.92	59.40	95.62
\$170,000	2.89	3.74	3.74	4.93	7.23	8.59	13.77	25.25	33.92	61.20	98.52
\$175,000	2.98	3.85	3.85	5.08	7.44	8.84	14.18	25.99	34.91	63.00	101.41
\$180,000	3.06	3.96	3.96	5.22	7.65	9.09	14.58	26.73	35.91	64.80	104.31
\$185,000	3.15	4.07	4.07	5.37	7.86	9.34	14.99	27.47	36.91	66.60	107.21
\$190,000	3.23	4.18	4.18	5.51	8.08	9.60	15.39	28.22	37.91	68.40	110.11
\$195,000	3.32	4.29	4.29	5.66	8.29	9.85	15.80	28.96	38.90	70.20	113.00
\$200,000	3.40	4.40	4.40	5.80	8.50	10.10	16.20	29.70	39.90	72.00	115.90
\$205,000	3.49	4.51	4.51	5.95	8.71	10.35	16.61	30.44	40.90	73.80	118.80
\$210,000	3.57	4.62	4.62	6.09	8.93	10.61	17.01	31.19	41.90	75.60	121.70
\$215,000	3.66	4.73	4.73	6.24	9.14	10.86	17.42	31.93	42.89	77.40	124.59
\$220,000	3.74	4.84	4.84	6.38	9.35	11.11	17.82	32.67	43.89	79.20	127.49
\$225,000	3.83	4.95	4.95	6.53	9.56	11.36	18.23	33.41	44.89	81.00	130.39
\$230,000	3.91	5.06	5.06	6.67	9.78	11.62	18.63	34.16	45.89	82.80	133.29
\$235,000	4.00	5.17	5.17	6.82	9.99	11.87	19.04	34.90	46.88	84.60	136.18
\$240,000	4.08	5.28	5.28	6.96	10.20	12.12	19.44	35.64	47.88	86.40	139.08
\$245,000	4.17	5.39	5.39	7.11	10.41	12.37	19.85	36.38	48.88	88.20	141.98
\$250,000	4.25	5.50	5.50	7.25	10.63	12.63	20.25	37.13	49.88	90.00	144.88

*Coverage amounts for ages 65 and over reduce due to age reduction - not shown in this table. See Age Reductions section for more information.

Child Life: 24 Pay Period Premiums**	
Coverage Amount	Premium
\$5,000	0.50
\$10,000	1.00
\$15,000	1.50

**Regardless of the number of eligible children covered.

Important Details

Here's where you'll find the details about the plan.

Eligibility Requirements

A minimum number of eligible employees must apply and qualify for the proposed plan before coverage can become effective. If this requirement is not met, this plan will not become effective.

To be eligible for coverage, you must be:

- An active benefits-eligible employee of the employer regularly working at least 20 hours each week; or
- An active benefits-eligible 12-month certified staff member of the employer regularly working at least .6 FTE
- **Class 1** 12-month certified staff and administrators
- **Class 2** Members other than 12-month certified staff and administrators

Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

If you buy Life insurance for yourself, you may also buy Life coverage for your eligible child(ren) and/or spouse. This is called Dependents Life insurance.

You can choose to cover your spouse, meaning a person to whom you are legally married.

You may also choose to cover your child. Child means your child from live birth through the last day of the calendar year in which your child reaches age 26.

Please note:

- Your child can be insured by more than one employee.
- Your spouse or child(ren) must not be full-time member(s) of the armed forces.
- You can be insured as both an individual and a dependent.

Medical Underwriting Approval

Required for:

- Coverage amounts higher than the guarantee issue amount
- All late applications (applying 31 days after becoming eligible)
- Requests for coverage increases
- Reinstatements
- Employees eligible but not insured under the prior life insurance plan

Visit myeoi.standard.com/759071 to submit a Medical History Statement online.

Coverage Effective Date

To become insured, you must:

- Meet the eligibility requirements listed in the previous sections
- Serve an eligibility waiting period*
- Receive medical underwriting approval (if applicable)
- Apply for coverage and agree to pay premium
- Be actively at work (able to perform all normal duties of your job) on the day before the insurance is scheduled to be effective

*The eligibility waiting period varies; contact your human resources representative for details.

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 one full day of active work as an eligible employee. You may have a different effective date for Life coverage below and above the guarantee issue amount. Contact your human resources representative or plan administrator for further information about the applicable coverage effective date for your insurance, including Dependents Life insurance.

Age Reductions

Under this plan, your coverage amount reduces to 65% at age 65 and to 50% at age 70. Your spouse's coverage amount reduces by your spouse's age to 65% at age 65 and to 50% at age 70. If you or your spouse are age 65 or over, ask your human resources representative or plan administrator for the amount of coverage available.

Waiver of Premium

Your Life premiums may be waived if you:

- Become totally disabled while insured under this plan
- Are under age 70
- Complete a waiting period of 180 days

If these conditions are met, your Life insurance coverage may continue without cost until age 70, provided you give us satisfactory proof that you remain totally disabled.

Portability

If your insurance ends you may be eligible to buy portable group insurance coverage from The Standard.

Conversion

If your insurance reduces or ends, you may be eligible to convert your existing Life insurance to an individual life insurance policy without submitting proof of good health.

Exclusions

Subject to state variations, you and your dependent spouse are not covered 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 two years on the date of death.

When Your Insurance Ends

Your insurance ends automatically when any of the following occur:

- The date the last period ends for which a premium was paid
- The last day of the calendar month in which your employment terminates
- The last day of the calendar month in which you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date the group policy, or your employer's coverage under the group policy, terminates
- For each elective insurance coverage, the date that coverage terminates under the group policy

In addition to the above requirements, your Dependents Life coverage ends automatically on the date your dependent ceases to meet the eligibility requirements for a dependent.

For more details on when your insurance ends, contact your human resources representative or plan administrator.

Group Insurance Certificate

If coverage becomes effective and you become insured, contact your human resources representative for 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. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.



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Portland, OR 97204

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