

# Group Additional Life Insurance

Help protect your loved ones from financial hardship.

This coverage is designed to help provide financial support and stability to your family should you pass away. You can also cover your eligible spouse and child(ren). Life insurance is an easy, responsible way to help protect your family from financial hardship during a difficult time — and into the future.



## This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits if you become terminally ill or die
- An annual enrollment opportunity. See Annual Enrollment section for additional details.

# ② About This Coverage

If you take no action you'll be covered under Basic Life insurance provided you meet the eligibility requirements. Consider whether that would be enough to help your family meet daily expenses, maintain their standard of living, pay off debt and fund your children's education. If not, you may want to apply for additional coverage now.

| How Much Can I Apply For?  Your combined Basic Life and Additional Life amounts  | For You:             | <b>\$10,000</b> – <b>\$200,000</b> in increments of <b>\$10,000</b> |  |  |  |  |
|--|----------------------|---|--|--|--|--|
| cannot exceed a maximum of 8 times your annual earnings. The coverage amount for your spouse cannot exceed 100 percent of your Additional Life coverage. The coverage amount for your child(ren) cannot exceed 100 percent of your Additional Life coverage. | For Your Spouse:     | \$5,000 – \$100,000 in increments of<br>\$5,000                     |  |  |  |  |
|  | For Your Child(ren): | <b>\$2,500 – \$10,000</b> in increments of <b>\$2,500</b>           |  |  |  |  |
| What is the Guarantee Issue Maximum?   | For You:             | Up to <b>\$200,000</b>  |  |  |  |  |
| Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions.  | For Your Spouse:     | Up to <b>\$50,000</b>   |  |  |  |  |

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

### **■** Annual Enrollment

#### During CareStL Health's Annual Enrollment Period

**For You.** If you are currently enrolled in Additional Life insurance for an amount less than \$200,000, you may elect to increase your coverage by \$10,000 annually, up to, but not to exceed, the guarantee issue amount of \$200,000 without having to answer health questions. If you are not currently enrolled in Additional Life insurance, you may elect \$10,000 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 \$50,000, you may elect to increase coverage by \$5,000 annually, up to, but not to exceed, the guarantee issue amount of \$50,000 without having to answer health questions. If your Spouse is not currently enrolled in Dependents Life insurance, you may elect \$5,000 of coverage without having to answer health questions.

**For Your Child(ren).** If your child(ren) is/are currently enrolled in Dependents Life insurance for an amount less than \$10,000, you may elect to increase coverage by \$2,500 annually, up to the maximum coverage amount of \$10,000 without having to answer health questions. If your child(ren) is/are not currently enrolled in Dependents Life insurance, you may elect coverage up to the maximum coverage amount of \$10,000 without having to answer health questions.

If you, and/or your spouse and/or your child(ren) were previously declined coverage by The Standard, you, and/or your spouse and/or your child(ren) will need to submit a medical history statement in order to apply for any amount of coverage during the Annual Enrollment period. Visit www.standard.com/mhs to complete and submit a medical history statement online.

### ■ Additional Feature

| arated | Benefit |  |
|--------|---------|--|

If you become terminally ill, you may be eligible to receive up to 75 percent of your combined Basic and Additional Life benefit to a maximum of \$500,000.

### How Much Life Insurance Do You Need?

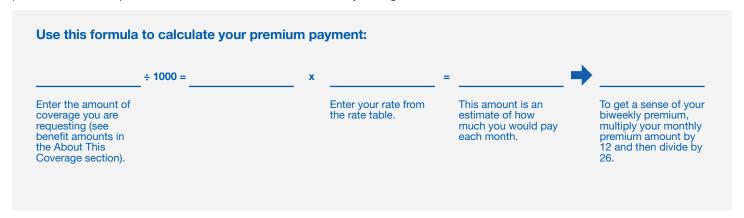
After a death in the family, there are many unexpected expenses. Your benefits could help your family pay for:

- Outstanding debt
- · Burial expenses
- Medical bills
- Your children's education
- · Daily expenses

To estimate your insurance needs, you'll need to consider your unique circumstances. Use our online calculator at www.standard.com/life/needs.

# Show Much Your Coverage Costs

Your Basic Life insurance is paid for by CareStL Health. If you choose to purchase Additional Life coverage, 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. How much your premium costs depends on a number of factors, such as your age and the benefit amount.



If you buy coverage for your spouse, your monthly rate is shown in the table below. Use the same formula to calculate the premium that you used for yourself, but use your age and your spouse's rate.

If you buy Dependents Life coverage for your child(ren), your monthly rate is \$0.20 per \$1,000, no matter how many children you're covering.

| Age<br>(as of October 1) | Your Rate<br>(Per \$1,000<br>of Total Coverage) | Your Spouse's Rate<br>(Per \$1,000<br>of Total Coverage) |
|--------------------------|---|--|
| <30                      | \$0.060   | \$0.060  |
| 30–34                    | \$0.080   | \$0.080  |
| 35–39                    | \$0.092   | \$0.092  |
| 40–44                    | \$0.112   | \$0.112  |
| 45–49                    | \$0.177   | \$0.177  |
| 50–54                    | \$0.284   | \$0.284  |
| 55–59                    | \$0.494   | \$0.494  |
| 60–64                    | \$0.685   | \$0.685  |
| 65–69                    | \$1.270   | \$1.270  |
| 70+                      | \$2.278   | \$2.278  |

#### Employee Life Bi-Weekly Premiums

| Coverage  |      |       |       | Er    | nployee's | Age as c | of October | 1     |        |        |        |
|-----------|------|-------|-------|-------|-----------|----------|------------|-------|--------|--------|--------|
| Amount    | < 30 | 30-34 | 35-39 | 40-44 | 45-49     | 50-54    | 55-59      | 60-64 | 65-69  | 70-74* | 75+*   |
| \$10,000  | 0.28 | 0.37  | 0.42  | 0.52  | 0.82      | 1.31     | 2.28       | 3.16  | 5.86   | 6.83   | 5.26   |
| \$20,000  | 0.55 | 0.74  | 0.85  | 1.03  | 1.63      | 2.62     | 4.56       | 6.32  | 11.72  | 13.67  | 10.51  |
| \$30,000  | 0.83 | 1.11  | 1.27  | 1.55  | 2.45      | 3.93     | 6.84       | 9.48  | 17.58  | 20.50  | 15.77  |
| \$40,000  | 1.11 | 1.48  | 1.70  | 2.07  | 3.27      | 5.24     | 9.12       | 12.65 | 23.45  | 27.34  | 21.03  |
| \$50,000  | 1.38 | 1.85  | 2.12  | 2.58  | 4.08      | 6.55     | 11.40      | 15.81 | 29.31  | 34.17  | 26.28  |
| \$60,000  | 1.66 | 2.22  | 2.55  | 3.10  | 4.90      | 7.86     | 13.68      | 18.97 | 35.17  | 41.00  | 31.54  |
| \$70,000  | 1.94 | 2.58  | 2.97  | 3.62  | 5.72      | 9.18     | 15.96      | 22.13 | 41.03  | 47.84  | 36.80  |
| \$80,000  | 2.22 | 2.95  | 3.40  | 4.14  | 6.54      | 10.49    | 18.24      | 25.29 | 46.89  | 54.67  | 42.06  |
| \$90,000  | 2.49 | 3.32  | 3.82  | 4.65  | 7.35      | 11.80    | 20.52      | 28.45 | 52.75  | 61.51  | 47.31  |
| \$100,000 | 2.77 | 3.69  | 4.25  | 5.17  | 8.17      | 13.11    | 22.80      | 31.62 | 58.62  | 68.34  | 52.57  |
| \$110,000 | 3.05 | 4.06  | 4.67  | 5.69  | 8.99      | 14.42    | 25.08      | 34.78 | 64.48  | 75.17  | 57.83  |
| \$120,000 | 3.32 | 4.43  | 5.10  | 6.20  | 9.80      | 15.73    | 27.36      | 37.94 | 70.34  | 82.01  | 63.08  |
| \$130,000 | 3.60 | 4.80  | 5.52  | 6.72  | 10.62     | 17.04    | 29.64      | 41.10 | 76.20  | 88.84  | 68.34  |
| \$140,000 | 3.88 | 5.17  | 5.94  | 7.24  | 11.44     | 18.35    | 31.92      | 44.26 | 82.06  | 95.68  | 73.60  |
| \$150,000 | 4.15 | 5.54  | 6.37  | 7.75  | 12.25     | 19.66    | 34.20      | 47.42 | 87.92  | 102.51 | 78.85  |
| \$160,000 | 4.43 | 5.91  | 6.79  | 8.27  | 13.07     | 20.97    | 36.48      | 50.58 | 93.78  | 109.34 | 84.11  |
| \$170,000 | 4.71 | 6.28  | 7.22  | 8.79  | 13.89     | 22.28    | 38.76      | 53.75 | 99.65  | 116.18 | 89.37  |
| \$180,000 | 4.98 | 6.65  | 7.64  | 9.30  | 14.70     | 23.59    | 41.04      | 56.91 | 105.51 | 123.01 | 94.62  |
| \$190,000 | 5.26 | 7.02  | 8.07  | 9.82  | 15.52     | 24.90    | 43.32      | 60.07 | 111.37 | 129.85 | 99.88  |
| \$200,000 | 5.54 | 7.38  | 8.49  | 10.34 | 16.34     | 26.22    | 45.60      | 63.23 | 117.23 | 136.68 | 105.14 |

#### Spouse Life Bi-Weekly Premiums

| Coverage  |      |       |       | Eı    | mployee's | Age as c | of October | · 1   |       |        |       |
|-----------|------|-------|-------|-------|-----------|----------|------------|-------|-------|--------|-------|
| Amount    | < 30 | 30-34 | 35-39 | 40-44 | 45-49     | 50-54    | 55-59      | 60-64 | 65-69 | 70-74* | 75+*  |
| \$5,000   | 0.14 | 0.18  | 0.21  | 0.26  | 0.41      | 0.66     | 1.14       | 1.58  | 2.93  | 3.42   | 2.63  |
| \$10,000  | 0.28 | 0.37  | 0.42  | 0.52  | 0.82      | 1.31     | 2.28       | 3.16  | 5.86  | 6.83   | 5.26  |
| \$15,000  | 0.42 | 0.55  | 0.64  | 0.78  | 1.23      | 1.97     | 3.42       | 4.74  | 8.79  | 10.25  | 7.89  |
| \$20,000  | 0.55 | 0.74  | 0.85  | 1.03  | 1.63      | 2.62     | 4.56       | 6.32  | 11.72 | 13.67  | 10.51 |
| \$25,000  | 0.69 | 0.92  | 1.06  | 1.29  | 2.04      | 3.28     | 5.70       | 7.90  | 14.65 | 17.09  | 13.14 |
| \$30,000  | 0.83 | 1.11  | 1.27  | 1.55  | 2.45      | 3.93     | 6.84       | 9.48  | 17.58 | 20.50  | 15.77 |
| \$35,000  | 0.97 | 1.29  | 1.49  | 1.81  | 2.86      | 4.59     | 7.98       | 11.07 | 20.52 | 23.92  | 18.40 |
| \$40,000  | 1.11 | 1.48  | 1.70  | 2.07  | 3.27      | 5.24     | 9.12       | 12.65 | 23.45 | 27.34  | 21.03 |
| \$45,000  | 1.25 | 1.66  | 1.91  | 2.33  | 3.68      | 5.90     | 10.26      | 14.23 | 26.38 | 30.75  | 23.66 |
| \$50,000  | 1.38 | 1.85  | 2.12  | 2.58  | 4.08      | 6.55     | 11.40      | 15.81 | 29.31 | 34.17  | 26.28 |
| \$55,000  | 1.52 | 2.03  | 2.34  | 2.84  | 4.49      | 7.21     | 12.54      | 17.39 | 32.24 | 37.59  | 28.91 |
| \$60,000  | 1.66 | 2.22  | 2.55  | 3.10  | 4.90      | 7.86     | 13.68      | 18.97 | 35.17 | 41.00  | 31.54 |
| \$65,000  | 1.80 | 2.40  | 2.76  | 3.36  | 5.31      | 8.52     | 14.82      | 20.55 | 38.10 | 44.42  | 34.17 |
| \$70,000  | 1.94 | 2.58  | 2.97  | 3.62  | 5.72      | 9.18     | 15.96      | 22.13 | 41.03 | 47.84  | 36.80 |
| \$75,000  | 2.08 | 2.77  | 3.18  | 3.88  | 6.13      | 9.83     | 17.10      | 23.71 | 43.96 | 51.26  | 39.43 |
| \$80,000  | 2.22 | 2.95  | 3.40  | 4.14  | 6.54      | 10.49    | 18.24      | 25.29 | 46.89 | 54.67  | 42.06 |
| \$85,000  | 2.35 | 3.14  | 3.61  | 4.39  | 6.94      | 11.14    | 19.38      | 26.87 | 49.82 | 58.09  | 44.68 |
| \$90,000  | 2.49 | 3.32  | 3.82  | 4.65  | 7.35      | 11.80    | 20.52      | 28.45 | 52.75 | 61.51  | 47.31 |
| \$95,000  | 2.63 | 3.51  | 4.03  | 4.91  | 7.76      | 12.45    | 21.66      | 30.03 | 55.68 | 64.92  | 49.94 |
| \$100,000 | 2.77 | 3.69  | 4.25  | 5.17  | 8.17      | 13.11    | 22.80      | 31.62 | 58.62 | 68.34  | 52.57 |

#### Child Life Bi-Weekly Premiums

| Coverage<br>Amount | Premium      |
|--------------------|--------------|
| \$2,500<br>\$5,000 | 0.23<br>0.46 |
| \$7,500            | 0.69         |
| \$10,000           | 0.92         |

<sup>\*</sup> Coverage amounts for ages 70 and over reduce due to age reduction (see Life Insurance Age Reductions section).

### Important Details

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

#### **Eligibility Requirements**

To be eligible for coverage, you must be:

- · An active employee of CareStL Health
- · Regularly working at least 30 hours per week
- A member of Class 1 All other Members, other than CEOs
- Insured for Basic Life insurance through The Standard to qualify for Additional Life insurance

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

If you buy Additional Life insurance for yourself, you may also buy additional coverage for your eligible children 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. Child means your child from live birth through age 25. Your child cannot be insured by more than one employee. Your spouse or child(ren) must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

#### **Medical Underwriting Approval**

Required for:

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

Visit **www.standard.com/mhs** 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, and
- Be actively at work (able to perform all normal duties of your job) on the day before the insurance is scheduled

to be effective.

If you are not actively at work on the day before the scheduled effective date of your insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee. Contact your human resources representative or plan administrator for further information about the applicable coverage effective date for your coverage.

\*Defined as first of the month that follows the date you become a member

#### **Life Insurance Age Reductions**

Under this plan, your coverage amount reduces to 65 percent at age 70 and to 50 percent at age 75. Your spouse's coverage amount reduces by your age as follows: to 65 percent at age 70 and to 50 percent at age 75. If you are age 70 or over, ask your human resources representative or plan administrator for the amount of coverage available.

#### **Waiver of Premium**

Your premiums may be waived if you:

- Become totally disabled while insured under this plan,
- Are under age 60, and
- Complete a waiting period of 180 days.

If these conditions are met, your Life insurance coverage may continue without cost until age 65, provided you give us satisfactory proof that you remain totally disabled.

#### **Portability**

If your insurance ends because your employment terminates, 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 dependents 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 one year 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 date your employment terminates
- The date 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, 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. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

#### **About Standard Insurance Company**

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at www.standard.com.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

GP190-LIFE/S399, GP399-LIFE/TRUST, GP899-LIFE, GP190-LIFE/A997/S399, GP411-LIFE

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www.standard.com

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