



**Conroe Independent School District
Group Term Life Insurance Plan Highlights
Policy #568676
2025-2026 Plan Year
July 1-31, 2025 Annual Enrollment**

Who is eligible for this coverage?	<p>All actively employed full-time employees working at least 18.75 hours each week, their legal spouses, and their children up to age 26.</p> <p>You may not cover your spouse or child as a dependent if your spouse or child is enrolled for coverage as an employee. No child may be covered by more than one employee in the plan. Children include your own natural offspring, lawfully adopted children and stepchildren. They also include foster children and other children who are dependent on you for main support and living with you in a regular parent-child relationship. Handicapped dependent children age 26 or over who became handicapped prior to the child's attainment of age 26 may also be eligible.</p>
What are the coverage amounts?	<p>Employee: up to 5x salary in increments of \$10,000; not to exceed \$500,000. All amounts are rounded to the next higher multiple of \$10,000, if not already an exact multiple thereof.</p> <p>Spouse: up to 100% of employee amount in increments of \$5,000; not to exceed \$500,000. All amounts are rounded to the next higher multiple of \$5,000, if not already an exact multiple thereof.</p> <p>Child: increments of \$2,000; not to exceed \$10,000. The maximum death benefit for a child between the ages of live birth and six months is \$1,000.</p> <p>You must be covered yourself to elect coverage for your spouse and/or child(ren).</p>
Can I be denied coverage?	<p>If you and your eligible dependents are enrolled in the plan and wish to increase your life insurance coverage, you may apply on or before 7/31/2025 for any amount of additional coverage up to \$200,000 for yourself and any amount of additional coverage up to \$25,000 for your spouse without evidence of insurability. Any life insurance coverage over the guaranteed amount(s) will be subject to answers to health questions.</p> <p>If you and/or your eligible dependents are not currently enrolled in the plan, you may apply for coverage on or before 7/31/2025 and will be required to answer health questions for any amount of coverage.</p>
How do I apply?	<p>To apply for coverage, complete your online enrollment by 7/31/2025.</p> <p>If you enroll when first eligible, you may apply for any amount of coverage up to \$200,000 for yourself and any amount of coverage up to \$25,000 for your spouse. Any coverage over the Guarantee Issue amount will be subject to evidence of insurability. If you and your eligible dependents do not enroll within 31 days of your eligibility date, you can apply for coverage only during an annual enrollment period or within 31 days of a change in status (e.g. marriage or birth of child) and will be required to furnish evidence of insurability for the entire amount of coverage.</p> <p>If you and your eligible dependents enroll within 31 days of your eligibility date, and later, wish to increase your coverage, you may increase your coverage, with evidence of insurability at annual enrollment or within 31 days of a change in status.</p>
When is my coverage effective?	<p>Coverage elected during annual enrollment is effective 9/1/2025 for amounts that do not require evidence of insurability. Amounts requiring evidence of insurability</p>

	<p>will be effective the first of the month coincident with or next following the date coverage is approved by Unum.</p> <p>If you are absent from work due to injury, sickness, temporary layoff, or leave of absence on the date your coverage would normally begin, your coverage will begin on the first of the month coincident with or next following the date you return to active employment.</p>
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What if my spouse is disabled when the enrollment occurs?	<p>If your eligible spouse is totally disabled, your spouse's coverage will begin on the first of the month coincident with or next following the date your eligible spouse no longer is totally disabled. Totally disabled means that, as a result of an injury, sickness, or disorder:</p> <p>Your dependent spouse:</p> <ul style="list-style-type: none"> • is confined in a hospital or similar institution; or • is confined at home under the care of a physician for a sickness or injury
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What if my spouse is disabled when the enrollment occurs?

How much does the coverage cost?

- How much does the coverage cost?
- Term life**
- | Age band | Employee rate per \$1,000 | Spouse rate per \$1,000 |
|----------|---------------------------|-------------------------|
| <25 | \$.03 | \$.06 |
| 25-29 | \$.03 | \$.06 |
| 30-34 | \$.04 | \$.08 |
| 35-39 | \$.07 | \$.11 |
| 40-44 | \$.08 | \$.18 |
| 45-49 | \$.12 | \$.32 |
| 50-54 | \$.19 | \$.52 |
| 55-59 | \$.35 | \$.82 |
| 60-64 | \$.43 | \$ 1.26 |
| 65-69 | \$.74 | \$ 1.86 |
| 70-74+ | \$ 1.20 | \$ 1.86 |
- Child life monthly rate is \$.04 per \$1,000. One life premium covers all children.
- Your and your spouse's rates are based on your ages as of September 1 each year.
- Term life calculation worksheet**
- | Coverage amount | Increment | Rate | Monthly cost |
|--------------------|--------------|------------|--------------|
| Employee \$ | ÷ \$1,000 | X \$ | = \$ |
| Spouse \$ | ÷ \$1,000 | X \$ | = \$ |
| Children \$ | ÷ \$1,000 | X \$.04 | = \$ |
| Total Monthly Cost | | | \$ |

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50-54	\$.19	\$.52
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60-64	\$.43	\$ 1.26
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70-74+	\$ 1.20	\$ 1.86

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Your and your spouse's rates are based on your ages as of September 1 each year.

Term life calculation worksheet

Coverage amount	Increment	Rate	Monthly cost
Employee \$	÷ \$1,000	X \$	= \$
Spouse \$	÷ \$1,000	X \$	= \$
Children \$	÷ \$1,000	X \$.04	= \$
Total Monthly Cost			\$

[illegible]

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Employee	\$	÷	\$1,000	X	\$	=	\$						
Spouse	\$	÷	\$1,000	X	\$	=	\$						
Children	\$	÷	\$1,000	X	\$.04	=	\$						
Total Monthly Cost						\$							

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Total Monthly Cost						\$						

[illegible]

Do my life insurance benefits decrease with age?	Coverage amounts will reduce according to the following schedule: <table border="0"> <tr> <td>Age:</td> <td>Insurance amount reduces to:</td> </tr> <tr> <td>70</td> <td>65% of original amount rounded to the next higher \$10,000</td> </tr> <tr> <td>75</td> <td>50% of original amount rounded to the next higher \$10,000</td> </tr> </table> Coverage may not be increased after a reduction.	Age:	Insurance amount reduces to:	70	65% of original amount rounded to the next higher \$10,000	75	50% of original amount rounded to the next higher \$10,000
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Is the coverage portable (can I keep it if I leave my employer)?	If you retire, reduce your hours, or leave your employer, you can continue coverage for yourself, your spouse, and your eligible children at the port rate.
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Is the coverage portable (can I keep it if I leave my employer)?

Are there any life insurance exclusions or limitations?	Life insurance benefits will not be paid for deaths caused by suicide within the first 24 months after the date your coverage becomes effective. If you increase or add coverage, these enhancements will not be paid for deaths caused by suicide within the first 24 months after you make these changes.
Will my premiums be waived if I'm disabled?	If you become disabled (as defined by your plan) and are no longer able to work, your life premium payments will be waived until your disability period ends.
When does my coverage end?	<p>You and your dependents' coverage under the Summary of Benefits ends on the earliest of:</p> <ul style="list-style-type: none"> • the date the policy or plan is cancelled; • the date you no longer are in an eligible group; • the date your eligible group is no longer covered; • the last day of the period for which you made any required contributions; • the last day you are in active employment unless continued due to a covered layoff or leave of absence or due to an injury or sickness, as described in the certificate of coverage. <p>In addition, coverage for any one dependent will end on the earliest of:</p> <ul style="list-style-type: none"> • the date your coverage under a plan ends; • the date your dependent ceases to be an eligible dependent; • for a spouse, the date of a divorce or annulment; • for dependent coverage, the date of your death. <p>Unum will provide coverage for a payable claim that occurs while you and your dependents are covered under the policy or plan.</p>

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

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