

## **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.

**Life insurance** helps protect the people who depend on your income by paying them an amount of money specified in the policy if you die.

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 like:



Child Care



Housing Costs



Daily Living Expenses

## Life Insurance

## **How Much Can I Apply For?**

Note: You cannot buy more coverage for your spouse or child(ren) than you buy for yourself.

The coverage amount for your spouse cannot exceed 100 percent of your Life coverage.

The coverage amount for your child(ren) cannot exceed 100 percent of your Life coverage.

#### For You:

\$10,000-\$500,000 in increments of \$10,000

### For Your Spouse:

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

#### For Your Children:

You may elect one of the following options:

Option 1: \$1,000 Option 2: \$5,000 Option 3: \$10,000

## 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:

\$150,000

## For Your Spouse:

\$50,000

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

## Annual Enrollment

### **During Your Annual Enrollment Period**

If you are currently enrolled in Life insurance for an amount less than \$150,000, you may elect to increase your coverage by \$10,000, up to, but not to exceed, the guarantee issue amount of \$150,000 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 **myeoi.standard.com** to complete and submit a medical history statement online.

## Additional Feature

**Accelerated Benefit** 

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

## How Much Your Coverage Costs

Because this insurance is offered through Mesquite Independent 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.

## **Employee Rates**

How much your premium costs depends on a number of factors, such as your age and the benefit amount. If you elect Life insurance, your monthly rate for this plan is indicated in the table below. **Refer to page 4 to see monthly premium amounts**.

Age (as of September 1)	Your Rate (Per \$1,000 of Total Coverage)					
<25	\$0.04					
25–29	\$0.06					
30–34	\$0.08					
35–39	\$0.09					
40-44	\$0.10					
45–49	\$0.15					
50-54	\$0.23					
55–59	\$0.41					
60–64	\$0.52					
65–69	\$0.97					
70+	\$1.59					

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
- Daily expenses
- Medical bills

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

## **Spouse Rates**

If you buy coverage for your spouse, your monthly rate for this coverage is indicated in the table below. **Refer to page 5 to see monthly premium amounts for your spouse.** 

Spouse's Age (as of September 1)	Your Spouse's Rate (Per \$1,000 of Total Coverage)					
<25	\$0.04					
25–29	\$0.06					
30–34	\$0.08					
35–39	\$0.09					
40–44	\$0.10					
45–49	\$0.15					
50-54	\$0.23					
55–59	\$0.41					
60–64	\$0.52					
65–69	\$0.97					
70+	\$1.59					

## **Child Rate and Monthly Premiums**

If you buy Dependents Life for your child(ren), your monthly rate for this coverage is \$0.18 per \$1,000. Monthly premium amounts for your eligible childr(en) are indicated in the table below.

	Child Life Monthly Premiums*					
Coverage Amount	Premium					
\$1,000	0.18					
\$5,000	0.90					
\$10,000	1.80					

<sup>\*</sup>Regardless of the number of eligible children covered.

	Employee Life Monthly Premiums										
Coverage Amount	< 25	25-29	30-34	En 35-39	nployee's A 40-44	ge as of Se 45-49	eptember 1 50-54	55-59	60-64	65-69	70+
\$10,000	0.40	0.60	0.80	0.90	1.00	1.50	2.30	4.10	5.20	9.70	15.90
\$20,000	0.80	1.20	1.60	1.80	2.00	3.00	4.60	8.20	10.40	19.40	31.80
\$30,000	1.20	1.80	2.40	2.70	3.00	4.50	6.90	12.30	15.60	29.10	47.70
\$40,000	1.60	2.40	3.20	3.60	4.00	6.00	9.20	16.40	20.80	38.80	63.60
\$50,000	2.00	3.00	4.00	4.50	5.00	7.50	11.50	20.50	26.00	48.50	79.50
\$60,000	2.40	3.60	4.80	5.40	6.00	9.00	13.80	24.60	31.20	58.20	95.40
\$70,000	2.80	4.20	5.60	6.30	7.00	10.50	16.10	28.70	36.40	67.90	111.30
\$80,000	3.20	4.80	6.40	7.20	8.00	12.00	18.40	32.80	41.60	77.60	127.20
\$90,000	3.60	5.40	7.20	8.10	9.00	13.50	20.70	36.90	46.80	87.30	143.10
\$100,000	4.00	6.00	8.00	9.00	10.00	15.00	23.00	41.00	52.00	97.00	159.00
\$110,000	4.40	6.60	8.80	9.90	11.00	16.50	25.30	45.10	57.20	106.70	174.90
\$120,000	4.80	7.20	9.60	10.80	12.00	18.00	27.60	49.20	62.40	116.40	190.80
\$130,000	5.20	7.80	10.40	11.70	13.00	19.50	29.90	53.30	67.60	126.10	206.70
\$140,000	5.60	8.40	11.20	12.60	14.00	21.00	32.20	57.40	72.80	135.80	222.60
\$150,000	6.00	9.00	12.00	13.50	15.00	22.50	34.50	61.50	78.00	145.50	238.50
\$160,000	6.40	9.60	12.80	14.40	16.00	24.00	36.80	65.60	83.20	155.20	254.40
\$170,000	6.80	10.20	13.60	15.30	17.00	25.50	39.10	69.70	88.40	164.90	270.30
\$180,000	7.20	10.80	14.40	16.20	18.00	27.00	41.40	73.80	93.60	174.60	286.20
\$190,000	7.60	11.40	15.20	17.10	19.00	28.50	43.70	77.90	98.80	184.30	302.10
\$200,000	8.00	12.00	16.00	18.00	20.00	30.00	46.00	82.00	104.00	194.00	318.00
\$210,000	8.40	12.60	16.80	18.90	21.00	31.50	48.30	86.10	109.20	203.70	333.90
\$220,000	8.80	13.20	17.60	19.80	22.00	33.00	50.60	90.20	114.40	213.40	349.80
\$230,000	9.20	13.80	18.40	20.70	23.00	34.50	52.90	94.30	119.60	223.10	365.70
\$240,000	9.60	14.40	19.20	21.60	24.00	36.00	55.20	98.40	124.80	232.80	381.60
\$250,000	10.00	15.00	20.00	22.50	25.00	37.50	57.50	102.50	130.00	242.50	397.50
\$260,000	10.40	15.60	20.80	23.40	26.00	39.00	59.80	106.60	135.20	252.20	413.40
\$270,000	10.80	16.20	21.60	24.30	27.00	40.50	62.10	110.70	140.40	261.90	429.30
\$280,000	11.20	16.80	22.40	25.20	28.00	42.00	64.40	114.80	145.60	271.60	445.20
\$290,000	11.60	17.40	23.20	26.10	29.00	43.50	66.70	118.90	150.80	281.30	461.10
\$300,000	12.00	18.00	24.00	27.00	30.00	45.00	69.00	123.00	156.00	291.00	477.00
\$310,000	12.40	18.60	24.80	27.90	31.00	46.50	71.30	127.10	161.20	300.70	492.90
\$320,000	12.80	19.20	25.60	28.80	32.00	48.00	73.60	131.20	166.40	310.40	508.80
\$330,000	13.20	19.80	26.40	29.70	33.00	49.50	75.90	135.30	171.60	320.10	524.70
\$340,000	13.60	20.40	27.20	30.60	34.00	51.00	78.20	139.40	176.80	329.80	540.60
\$350,000	14.00	21.00	28.00	31.50	35.00	52.50	80.50	143.50	182.00	339.50	556.50
\$360,000	14.40	21.60	28.80	32.40	36.00	54.00	82.80	147.60	187.20	349.20	572.40
\$370,000	14.80	22.20	29.60	33.30	37.00	55.50	85.10	151.70	192.40	358.90	588.30
\$380,000	15.20	22.80	30.40	34.20	38.00	57.00	87.40	155.80	197.60	368.60	604.20
\$390,000	15.60	23.40	31.20	35.10	39.00	58.50	89.70	159.90	202.80	378.30	620.10
\$400,000	16.00	24.00	32.00	36.00	40.00	60.00	92.00	164.00	208.00	388.00	636.00
\$410,000	16.40	24.60	32.80	36.90	41.00	61.50	94.30	168.10	213.20	397.70	651.90
\$420,000	16.80	25.20	33.60	37.80	42.00	63.00	96.60	172.20	218.40	407.40	667.80
\$430,000	17.20	25.80	34.40	38.70	43.00	64.50	98.90	176.30	223.60	417.10	683.70
\$440,000	17.60	26.40	35.20	39.60	44.00	66.00	101.20	180.40	228.80	426.80	699.60
\$450,000	18.00	27.00	36.00	40.50	45.00	67.50	103.50	184.50	234.00	436.50	715.50
\$460,000	18.40	27.60	36.80	41.40	46.00	69.00	105.80	188.60	239.20	446.20	731.40
\$470,000	18.80	28.20	37.60	42.30	47.00	70.50	108.10	192.70	244.40	455.90	747.30
\$480,000	19.20	28.80	38.40	43.20	48.00	72.00	110.40	196.80	249.60	465.60	763.20
\$490,000	19.60	29.40	39.20	44.10	49.00	73.50	112.70	200.90	254.80	475.30	779.10
\$500,000	20.00	30.00	40.00	45.00	50.00	75.00	115.00	205.00	260.00	485.00	795.00

Spouse Life Monthly Premiums											
Coverage	Spouse's Age as of September 1										
Amount	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5,000	0.20	0.30	0.40	0.45	0.50	0.75	1.15	2.05	2.60	4.85	7.95
\$10,000 \$15,000	0.40 0.60	0.60 0.90	0.80 1.20	0.90 1.35	1.00 1.50	1.50 2.25	2.30 3.45	4.10 6.15	5.20 7.80	9.70 14.55	15.90 23.85
\$20,000	0.80	1.20	1.60	1.80	2.00	3.00	4.60	8.20	10.40	19.40	31.80
\$25,000	1.00	1.50	2.00	2.25	2.50	3.75	5.75	10.25	13.00	24.25	39.75
\$30,000	1.20	1.80	2.40	2.70	3.00	4.50	6.90	12.30	15.60	29.10	47.70
\$35,000 \$40,000	1.40 1.60	2.10 2.40	2.80 3.20	3.15 3.60	3.50 4.00	5.25 6.00	8.05 9.20	14.35 16.40	18.20 20.80	33.95 38.80	55.65 63.60
\$45,000	1.80	2.40	3.60	4.05	4.50	6.75	10.35	18.45	23.40	43.65	71.55
\$50,000	2.00	3.00	4.00	4.50	5.00	7.50	11.50	20.50	26.00	48.50	79.50
\$55,000	2.20	3.30	4.40	4.95	5.50	8.25	12.65	22.55	28.60	53.35	87.45
\$60,000	2.40	3.60	4.80	5.40	6.00	9.00	13.80	24.60	31.20	58.20	95.40
\$65,000 \$70,000	2.60 2.80	3.90 4.20	5.20 5.60	5.85 6.30	6.50 7.00	9.75 10.50	14.95 16.10	26.65 28.70	33.80 36.40	63.05 67.90	103.35 111.30
\$75,000	3.00	4.50	6.00	6.75	7.50	11.25	17.25	30.75	39.00	72.75	119.25
\$80,000	3.20	4.80	6.40	7.20	8.00	12.00	18.40	32.80	41.60	77.60	127.20
\$85,000	3.40	5.10	6.80	7.65	8.50	12.75	19.55	34.85	44.20	82.45	135.15
\$90,000 \$95,000	3.60 3.80	5.40 5.70	7.20 7.60	8.10 8.55	9.00 9.50	13.50 14.25	20.70 21.85	36.90 38.95	46.80 49.40	87.30 92.15	143.10 151.05
\$100,000	4.00	6.00	8.00	9.00	10.00	15.00	23.00	41.00	52.00	97.00	159.00
\$105,000	4.20	6.30	8.40	9.45	10.50	15.75	24.15	43.05	54.60	101.85	166.95
\$110,000	4.40	6.60	8.80	9.90	11.00	16.50	25.30	45.10	57.20	106.70	174.90
\$115,000 \$120,000	4.60 4.80	6.90 7.20	9.20 9.60	10.35 10.80	11.50 12.00	17.25 18.00	26.45 27.60	47.15 49.20	59.80 62.40	111.55 116.40	182.85 190.80
\$125,000	5.00	7.20 7.50	10.00	11.25	12.50	18.75	28.75	51.25	65.00	121.25	190.80
\$130,000	5.20	7.80	10.40	11.70	13.00	19.50	29.90	53.30	67.60	126.10	206.70
\$135,000	5.40	8.10	10.80	12.15	13.50	20.25	31.05	55.35	70.20	130.95	214.65
\$140,000	5.60 5.80	8.40 8.70	11.20	12.60	14.00	21.00 21.75	32.20 33.35	57.40	72.80	135.80 140.65	222.60 230.55
\$145,000 \$150,000	6.00	9.00	11.60 12.00	13.05 13.50	14.50 15.00	22.50	34.50	59.45 61.50	75.40 78.00	140.65	230.55
\$155,000	6.20	9.30	12.40	13.95	15.50	23.25	35.65	63.55	80.60	150.35	246.45
\$160,000	6.40	9.60	12.80	14.40	16.00	24.00	36.80	65.60	83.20	155.20	254.40
\$165,000	6.60	9.90	13.20	14.85	16.50	24.75	37.95	67.65	85.80	160.05	262.35
\$170,000 \$175,000	6.80 7.00	10.20 10.50	13.60 14.00	15.30 15.75	17.00 17.50	25.50 26.25	39.10 40.25	69.70 71.75	88.40 91.00	164.90 169.75	270.30 278.25
\$180,000	7.20	10.80	14.40	16.20	18.00	27.00	41.40	73.80	93.60	174.60	286.20
\$185,000	7.40	11.10	14.80	16.65	18.50	27.75	42.55	75.85	96.20	179.45	294.15
\$190,000	7.60	11.40	15.20	17.10	19.00	28.50	43.70	77.90	98.80	184.30	302.10
\$195,000 \$200,000	7.80 8.00	11.70 12.00	15.60 16.00	17.55 18.00	19.50 20.00	29.25 30.00	44.85 46.00	79.95 82.00	101.40 104.00	189.15 194.00	310.05 318.00
\$205,000	8.20	12.30	16.40	18.45	20.50	30.75	47.15	84.05	106.60	198.85	325.95
\$210,000	8.40	12.60	16.80	18.90	21.00	31.50	48.30	86.10	109.20	203.70	333.90
\$215,000	8.60	12.90	17.20	19.35	21.50	32.25	49.45	88.15	111.80	208.55	341.85
\$220,000 \$225,000	8.80 9.00	13.20 13.50	17.60 18.00	19.80 20.25	22.00 22.50	33.00 33.75	50.60 51.75	90.20 92.25	114.40 117.00	213.40 218.25	349.80 357.75
\$230,000	9.20	13.80	18.40	20.70	23.00	34.50	52.90	94.30	119.60	223.10	365.70
\$235,000	9.40	14.10	18.80	21.15	23.50	35.25	54.05	96.35	122.20	227.95	373.65
\$240,000	9.60	14.40	19.20	21.60	24.00	36.00	55.20	98.40	124.80	232.80	381.60
\$245,000 \$250,000	9.80 10.00	14.70 15.00	19.60 20.00	22.05 22.50	24.50 25.00	36.75 37.50	56.35 57.50	100.45 102.50	127.40 130.00	237.65 242.50	389.55 397.50
Ψ230,000	10.00	15.00	20.00	22.00	20.00	37.30	37.50	102.00	150.00	242.00	391.30

## **Important Details**

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

### **Eligibility Requirements**

To be eligible for coverage, you must be:

 An active full-time or part-time salaried employee, including working retiree, of Mesquite Independent School District regularly working at least 18.75 hours per week

Temporary and seasonal employees, substitutes/hourly 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, or your domestic partner as recognized by law.

You may also choose to cover your child. Child means your child from live birth through age 25. Please note:

- 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 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** to submit a medical history statement online.

Note: If your family status changes, you may have the ability to apply for coverage or increase your coverage for a limited time without having to submit a medical history statement. Please see your human resources representative or plan administrator for more information.

### **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

\*If you are already a member on the date the group policy is effective, you are eligible on that date. If you become a member after the group policy effective date, you are eligible on the first day of the month that follows the date you become a member.

If you are not actively at work on the day before the scheduled effective date of your insurance, including any Dependents Life insurance coverages, 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

Your coverage amount will not be reduced because of your age unless your insurance is subject to termination under the Waiver of Premium provision.

## **Waiver of Premium**

Your premiums may be waived if you:

- Become totally disabled while insured under this plan
- Are under age 60
- 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 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
- If you are a 187 contract employee, the August 31st following your last full day of Active Work if you do not return to Active Member on September 1st
- If you are not a 187 contract employee, the end of the calendar month in which your employment terminates, unless you elect to continue your insurance through August 31st with payment of premium to your Employer and paid out prior to when coverage 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, a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events will be accessible on Mesquite Independent School District's benefits website. The controlling provisions will be in the group policy. The information presented in this summary does not modify the group policy, certificate or the insurance coverage in any way.



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 **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.

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

GP190-LIFE/S399, GP399-LIFE/TRUST, GP899-LIFE, GP190-LIFE/A997/S399, GP411-LIFE, GP190-LIFE/S214

VL-648015

(4/23)

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