

# Welcome to your employee benefits.

Enroll in coverage now to help protect  
yourself and your loved ones in the future.



Douglas County

Standard Insurance Company





# Act Now to Help Protect What Matters Most



The life you're building for yourself and your family is precious. Every financial decision, every first step, every milestone — these are the things that matter. Think of insurance as a financial safety net that can help protect you when life doesn't go as planned. Enrolling in coverage now is a small thing you can do to help make sure you and your loved ones keep moving forward.

In this guide, you'll find details about your group insurance options from Standard Insurance Company (The Standard) and the forms you need to start the application process.



## Protection from the Unexpected

Even with medical insurance, a serious illness or accident – or even a routine stay in the hospital – can be a drain on your finances. The following types of insurance pay a benefit to help you pay the bills. Use the payment however you like to cover out-of-pocket medical costs and other living expenses.

**Accident insurance** pays a lump sum directly to you so you can help cover out-of-pocket expenses as you or a family member recuperates after an accident.

**Critical Illness insurance** helps you manage expenses during a serious illness, such as a heart attack, stroke or cancer. Use the benefit, paid to you in a lump sum, for deductibles, copays, rent or groceries as you or a family member recovers.

With the insurance described above, you can take advantage of affordable group rates that will not increase as you get older. And if you leave your job, you can take your coverage with you.

## Your Employer-Paid Benefits

- Life and Accidental Death & Dismemberment insurance

## Benefits You Can Apply for Now:

- Accident insurance
- Critical Illness insurance
- Life and Accidental Death & Dismemberment insurance
- Dependents Life and AD&D insurance
- Short Term Disability insurance
- Long Term Disability insurance



## Protection for Your Loved Ones

**Life insurance** helps provide support and stability to your family if something were to happen to you or your spouse or children. It can help your family financially through a difficult time and provide support into the future.

**Accidental Death and Dismemberment (AD&D) insurance** helps protect against a sudden financial loss brought on by an accidental death. It can also help pay for the high cost of living associated with surviving an accident that results in a severe physical loss.



## Protection for Your Paycheck

Your most valuable asset is your ability to earn an income. Disability insurance provides partial income replacement if you can't work because of a qualifying disability caused by an illness, injury or

pregnancy. The benefit payments can help with bills that continue even when you can't work, like your mortgage or rent — expenses medical insurance won't cover.

**Short Term Disability insurance** pays a weekly benefit to help you keep your finances on track when you're out of work because of a disability.

**Long Term Disability insurance** pays a monthly benefit if you experience a disability that lasts for several months or even years.

When you buy insurance through work, you have access to competitive group rates and the convenience of premiums deducted right from your paycheck.

## Ready to Apply? You'll Find the Form(s) Right Here

Once you've reviewed your options, the next step is to apply using the form(s) included at the end of this guide. Don't forget to turn in your forms before your enrollment period ends.

# Enroll Now



Enrollment begins January 27, 2016  
and ends February 15, 2016

Attend your group meeting on:

### Wednesday, January 27, 2016

- Douglas County Sheriff's Office (Training Room)  
1038 Buckeye, Minden  
7:00am - 8:00am  
1:30pm - 2:30pm
- Douglas County Historic Courthouse (BOCC Chambers)  
1616 8th Street, Minden  
9:00am - 10:00am  
10:30am - 11:30am  
3:30pm - 4:30pm

### Thursday, January 28, 2016

- Douglas County Sheriff's Office (Training Room)  
1038 Buckeye, Minden  
7:00am - 8:00am  
1:30pm - 2:30pm
- Douglas County Historic Courthouse (BOCC Chambers)  
1616 8th Street, Minden  
9:00am - 10:00am  
10:30am - 11:30am  
3:30pm - 4:30pm

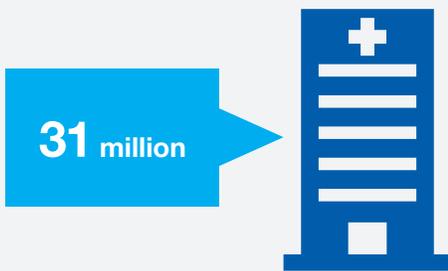


# Group Accident Insurance

Keep your finances on track when an accident happens.

Having an accident doesn't just hurt you — it can also damage your finances. Your medical insurance will cover some of the expenses, but you'll be left to foot the bills for your copays and deductible. Those can add up fast, especially if you're unable to work while you recover. That's where Group Accident insurance comes in: It helps protect your bank account from the out-of-pocket expenses that can come with an injury — whether you're coping with a broken arm or recovering from a serious car accident.

## Medical insurance helps — but it doesn't pay for everything.



Some 31 million people sought care in the emergency room for unintended injuries in 2011.<sup>1</sup>



An estimated 10 million working-aged Americans struggled to pay medical bills in 2013 — even though they had health insurance.<sup>2</sup>

<sup>1</sup> Source: FastStats, based on National Hospital Ambulatory Medical Care Survey: 2011 Emergency Departure Summary Tables, [www.cdc.gov/nchs/fastats/accidental-injury.htm](http://www.cdc.gov/nchs/fastats/accidental-injury.htm)

<sup>2</sup> Source: NerdWallet Health. In 2013, NerdWallet aggregated multiple sources and data sets to estimate the impact of medical bills on Americans that year.

## Don't let an accident stop your financial plans.

Accident insurance is an affordable way to make sure you can cover the gap between what your medical insurance covers and what you'd owe out of pocket if you or a family member were to get injured. It's protection that's also convenient: Your premium payments are deducted directly from your paycheck.

## Here's how it works:

In the event of a covered accident, your Accident insurance will pay a benefit directly to you. You can use this money wherever you need it most — whether that's to help with your deductible, copays and other medical bills, or your daily expenses while you recover.

Let's say your teenage daughter gets injured during tryouts for her school basketball team and goes to urgent care for treatment. Diagnosis: dislocated elbow and fracture of the forearm and wrist. Although surgery isn't necessary, she will need follow-up appointments and physical therapy.



You'd get an additional 25% if your child is injured while participating in an organized athletic activity — whether it's football practice, a soccer game or dance class.

### BENEFITS PAID TO YOU

Urgent Care Visit.....	\$50
X-ray.....	\$50
Dislocated Elbow.....	\$800
Arm Fracture.....	\$550
Wrist Fracture.....	\$550
Physician Follow-up Appointment.....	\$50
Physical Therapy Appointment (2 visits)	\$100
<b>SUBTOTAL.....</b>	<b>\$2,150</b>
<b>Youth Organized Sports Benefit (25% of subtotal).....</b>	<b>\$538</b>
<b>Total paid directly to you.....</b>	<b>\$2,688</b>

Imagine that you survive a serious car accident. After a trip to the ER, you stay in the hospital for several days while you recover. In the weeks following the accident, you have a follow-up appointment at a clinic in another city and physical therapy.



You'd get an additional \$500 because you were injured in a car accident. Because you drove more than 100 miles for your follow-up appointment, you'd receive an extra \$150. If your car accident occurred more than 100 miles away from home and a family member traveled to be near you while you were in the hospital, we'd pay additional benefits to help cover lodging expenses.

### BENEFITS PAID TO YOU

Ambulance.....	\$300
Emergency Room Visit.....	\$150
CAT Scan.....	\$200
Hospital Admission Benefit.....	\$1,000
5-Day Hospital Confinement (\$200 per day).....	\$1,000
Right Leg Fracture.....	\$4,000
Knee Cap Fracture.....	\$1,100
Pelvis Fracture.....	\$2,400
Physician Follow-up Appointment.....	\$50
Physical Therapy Appointment.....	\$50
<b>SUBTOTAL.....</b>	<b>\$10,250</b>
<b>Automobile Accident Benefit.....</b>	<b>\$500</b>
<b>Transportation Benefit.....</b>	<b>\$150</b>
<b>Lodging (4 days).....</b>	<b>\$700</b>
<b>Total paid directly to you.....</b>	<b>\$11,600</b>

## Affordable Group Rates

Because you'll be buying this insurance through Douglas County, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. Your rates will not increase as you grow older — meaning you'll pay the same premium for the life of the policy, even if you continue your coverage after your employment with Douglas County ends (this is known as portability).

You can get a Health Maintenance Screening Benefit of \$50 each year just for going to the doctor for a covered wellness exam, such as a stress test or lipid panel — a routine preventive visit that typically costs you nothing under your medical insurance.

It pays to be well-adjusted. If you need to see a chiropractor while you're recovering from an accident, you can get a benefit of \$50 (up to two visits per accident, providing those visits are on different days).

Staying in a hospital can be costly, even with medical insurance coverage. You'll receive a \$1,000 benefit if you're admitted — plus \$100 for every day you're hospitalized.\* And if you're admitted or confined to a critical care unit while you're in the hospital, you'll receive additional critical care unit benefits.

If you or a dependent travel at least 100 miles for treatment, you'll receive a Transportation Benefit of \$150 for each day of travel.\*\* We'll pay a \$175 Lodging Benefit per day\*\* if you or a dependent travel at least 100 miles from your or your dependent's place of residence for treatment and you, your dependent or another person incurs a lodging expense.

\*Up to 365 days per accident.

\*\*Maximum 30 days per accident; 90 days per year.

Coverage for...	Monthly Premium
You	\$18.24
You and your spouse	\$27.28
You and your children	\$31.70
You, your spouse and your children	\$48.48

These are actual benefits you could receive in the event of a covered accident. Benefits are paid once per covered accident unless otherwise noted:

Emergency Care Benefits	
Ambulance — Air	\$800
Ambulance — Ground	\$300
Emergency Room Visit	\$150
Urgent Care Visit	\$50
Initial Care Visit (not payable if Urgent Care or Emergency Room Visit Benefit is payable)	\$50
Emergency Dental Care — Crown	\$200
Emergency Dental Care — Extraction	\$100
Outpatient X-ray	\$50
Major Diagnostic Exam (such as CT scan, MRI, EEG)	\$200
Transfusion Blood, Plasma or Platelets	\$300

Specific Injury Benefits	
Burns	\$200-\$10,000, depending on severity
Coma	\$7,500
Concussion	\$150
Eye Injury	\$200
Lacerations	\$75-\$500, depending on size
Skin Graft	25% of burn benefit

Dislocations	Non-surgical/Surgical
Ankle, Collarbone (sternoclavicular), Elbow, Foot, Hand, Lower Jaw, Shoulder, Wrist	\$800/\$1,600
Knee (not including kneecap)	\$900/\$1,800
Collarbone (acromioclavicular), Spine	\$400/\$800
Finger, Rib, Toe	\$150/\$300
Hip	\$2,500/\$5,000
Partial Dislocation	25% of the associated dislocation listed above (non-surgical)

Fractures	Non-surgical/Surgical
Ankle, Arm (shoulder to elbow), Arm (elbow to wrist), Collarbone, Elbow, Foot, Hand, Kneecap, Lower Jaw, Shoulder Blade, Sternum, Wrist	\$550/\$1,100
Bones of Face, Coccyx, Nose, Vertebrae	\$500/\$1,000
Rib	\$400/\$800
Finger, Toe	\$100/\$200
Hip	\$2,500/\$5,000
Leg (hip to knee)	\$2,000/\$4,000
Leg (knee to ankle), Pelvis, Vertebral Column	\$1,200/\$2,400
Skull (depressed)	\$4,000/\$8,000
Skull (non-depressed)	\$1,500/\$3,000
Chip Fracture	25% of the associated fracture listed above (non-surgical)

## Group Accident Insurance

Surgical Benefits	
Knee Cartilage (Once per covered accident, regardless of whether one or both knees require repair. If both exploratory and repair surgeries are performed, will pay repair benefit amount)	
Exploratory	\$200
Repair	\$750
Tendon, Ligament, Rotator Cuff (If two or more surgeries are required for the same covered accident, will pay the highest benefit amount)	
Exploratory	\$200
Repair of one	\$750
Repair of two or more	\$1,000
Ruptured Disc	
Repair	\$750
Abdominal/Thoracic Surgery (If more than one surgery required for the same covered accident, will pay the highest benefit amount)	
Exploratory	\$200
Laparoscopic Repair Surgery	\$750
Open Repair Surgery	\$1,500
Surgical Facility Benefit	\$150

Hospital Benefits	
Hospital Admission (once per covered accident)	\$1,000
Daily Hospital Confinement (maximum 365 days per covered accident)	\$200 per day
Critical Care Unit Admission* (once per covered accident)	\$750
Daily Critical Care Unit Confinement* (maximum 15 days per covered accident)	\$200 per day
Daily Rehabilitation Facility (maximum 90 days per covered accident)	\$100 per day
* Payable in addition to any Hospital Admission and/or Daily Hospital Confinement Benefit you may be eligible to receive.	

Follow-Up Care	
Medical Appliance (e.g., wheelchair, cane or brace)	\$100
Chiropractic Care (maximum 2 visits per covered accident, 1 per day)	\$50 per day
Physician Follow-up (maximum 2 visits per covered accident, 1 per day)	\$50 per day
Hearing Device	\$500
Prosthesis	One: \$500 Two or more: \$1,000
Occupational, Speech or Physical Therapy (maximum 3 visits per covered accident, 1 per day)	\$50 per day

Additional Benefits	
Lodging (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$175
Transportation (per trip) (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$150
Health Maintenance Screening Benefit (once per calendar year)	\$50
Automobile Accident Benefit	\$500
Youth Organized Sports Benefit	Additional 25% of total benefit payable

Accidental Death and Dismemberment (AD&D)	
Accidental Death	
You:	\$50,000
Spouse:	\$25,000
Child:	\$12,500
In the event of a covered accidental dismemberment or impairment, this policy would pay a percentage of the Accidental Death benefit:	
Loss of both hands or feet	30%
Loss of one hand and one foot	30%
Loss of one hand or one foot	15%
Loss of one digit (finger or toe)	2%
Loss of two or more digits (fingers and/or toes)	5%
Uniplegia	15%
Hemiplegia, Paraplegia or Triplegia	30%
Quadriplegia	50%
Loss of sight (one eye); loss of hearing (one ear)	15%
Loss of sight (both eyes); loss of hearing (both ears)	30%
In the event of an accidental death, this policy would pay the full Accidental Death benefit. In certain scenarios, it would also pay an additional percentage of the Accidental Death benefit:	
Air Bag Benefit	10%
Helmet Benefit	10%
Seat Belt Benefit	10%
Repatriation/transportation of remains	10%
Death that occurs while aboard commercial transportation	100%

## Important Details

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

### Portability

This coverage is portable. That means that you may be able to continue your coverage — at the same rate you would pay today — if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

To be eligible for this coverage, you must be a regular employee of Douglas County, actively working in the United States at least 30 hours per week and a citizen or resident of the United States or Canada. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, a person to whom you are legally married, or your domestic partner as recognized by law. You can also cover your children from birth to age 26. Your children cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Accident insurance coverage can become effective.

### Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, receive evidence of good health underwriting approval (if applicable), agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

### Exclusions

Benefits are not payable if an accident is caused by or contributed to any of the following:

- War or any act of war
- Suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony

or act of terrorism

- Active participation in a violent disorder or riot
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a commercial aircraft
- Engaging in high-risk sports or activities such as (but not limited to) bungee jumping, parachuting, base jumping, mixed martial arts or mountain climbing
- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident
- Riding in or driving any automobile in a race, stunt show or speed test
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function after a covered accident
- An accident that occurs while you or your dependent is incarcerated in a jail or penal or correctional institution

### When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

**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.

This is a limited benefit policy.

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**IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE**

**Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.**

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

**Medicare generally pays for most or all of these expenses.**

**Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:**

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

**This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.**

**Before you buy this insurance:**

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).



# Group Critical Illness Insurance

Help cover out-of-pocket expenses associated with a serious illness.

You may have medical insurance. But that doesn't mean you're covered for all of the expenses resulting from a serious illness that you probably haven't budgeted for — things like copays, deductibles, loss of income, child care and travel expenses. Group Critical Illness insurance helps fill the gap caused by these out-of-pocket costs, creating a financial safety net for you and your family.



42%



46%



Cancer patients carry rising burdens of health care-related out-of-pocket expenses: 42 percent reported a significant subjective financial burden and 46 percent used savings to defray out-of-pocket expenses.<sup>1</sup>

70 percent of people who had difficulty paying medical bills in 2012 had some kind of health insurance.<sup>2</sup>

1 The Financial Toxicity of Cancer Treatment: A Pilot Study Assessing Out-of-Pocket Expenses and the Insured Cancer Patient's Experience," The Oncologist Express, Feb. 26, 2013, [www.theoncologist.alphamedpress.org/content/18/4/381.long](http://www.theoncologist.alphamedpress.org/content/18/4/381.long)

2 "Medical Debt Among People With Health Insurance," Kaiser Family Foundation, 2012 National Health Interview Survey (NHIS) data, Jan. 7, 2014, <http://kff.org/private-insurance/report/medical-debt-among-people-with-health-insurance/>

## Help ensure your financial plans stay healthy even when you're not.

Critical Illness insurance is an affordable way to make up the difference between what your medical insurance covers and what you'd owe out of pocket if you or a family member were to be diagnosed with a covered serious illness. It's protection that's also convenient: Your premium payments are deducted directly from your paycheck.

## An Extra Layer of Protection

Critical Illness insurance can make a big difference in your ability to pay out-of-pocket expenses associated with a serious illness. It pays a lump-sum benefit directly to you upon diagnosis of a covered illness, regardless of your treatment costs or what's covered by your medical insurance. Elect coverage in \$5,000 increments between \$5,000 and \$50,000.

### With Critical Illness insurance, you can:

- **Update your coverage as needed.** As your life circumstances change, increase\* or decrease your coverage.
- **Lock in your rate.** For example, if you're 35 when your coverage becomes effective, you'll pay a 35-year-old's rate for as long as you have the coverage. If you increase your coverage amount at age 45, you will pay a 45-year-old's rate for that increased coverage amount for so long as you have that increased coverage amount.
- **Take it with you.** If you leave your job, you can take your coverage with you.
- **Pick and choose how to spend your benefit.** Spend your lump-sum benefit however you want.
- **Protect your loved ones.** Cover your spouse up to \$30,000. Your kids are automatically covered at 25 percent of the amount elected for yourself for the same critical illnesses that you are. Kids are also covered for 21 additional childhood diseases, including cystic fibrosis, Down syndrome, muscular dystrophy, spina bifida and cerebral palsy.
- **Receive a benefit for taking care of your health.** You and your covered loved ones receive a Health Maintenance Screening Benefit of \$50 once per calendar year when visiting the doctor for a covered wellness exam, such as a cholesterol screening (part of a lipid panel) or mammogram — routine preventive visits that typically cost you nothing under your medical insurance.
- **Receive additional benefits.** If you are diagnosed with a covered illness again after a treatment-free period of 12 months, you will receive 25 percent of the original benefit amount. If you are diagnosed with a different and subsequent covered illness at least 90 days after the diagnosis of the first critical illness, you will receive an additional critical illness benefit.

Chances are good that a family member, friend or colleague of yours has endured a critical illness. You may have even seen that person struggle to pay the bills. Think of Critical Illness insurance as financial peace of mind, so you don't have to choose between paying for medical bills and helping send your daughter to the college of her dreams.

\*Evidence of good health may be necessary in some cases; see the Important Details section for more information.

## Here's how it works:

John has \$10,000 of Critical Illness insurance coverage. He makes an appointment with his doctor after feeling off for the past few weeks. Diagnosis: cancer, with a good prognosis but a long road ahead. Within days of making a claim, John receives his Critical Illness insurance benefit paid directly to him. As John undergoes intensive treatment over the next few months, he can use the benefit for any purpose, including to pay for things that his medical insurance does not cover. Things like the deductible, copays, child care, certain medications, time away from work, alternative treatments and a special diet.

### SAMPLE OUT-OF-POCKET EXPENSES

Medical insurance deductible.....	\$1,300
Out-of-pocket expenses over the course of six months.....	\$5,000
Lost wages.....	\$4,500
Alternative treatments and diets not covered by medical plan.....	\$4,500
<b>TOTAL OUT-OF-POCKET EXPENSES.....</b>	<b>\$15,300</b>
<b>CRITICAL ILLNESS BENEFIT.....</b>	<b>\$10,000</b>
<b>OUT-OF-POCKET EXPENSES.....</b>	<b>\$5,300</b>

Costs are hypothetical. Actual costs will vary by state, cancer type, stage at diagnosis, treatments received and personal factors.

Critical Illness insurance can make a big difference in your ability to pay out-of-pocket expenses associated with a serious illness that are not covered by medical insurance.

## Covered Conditions

Receive 100 percent of  
your coverage amount for:

- Heart attack
- Stroke
- Cancer
- End stage renal (kidney) failure
- Major organ failure
- Coma
- Paralysis of two or more limbs
- Loss of sight
- Occupational HIV
- Occupational hepatitis

Receive 25 percent of  
your coverage amount for:

- Severe coronary artery disease with recommendation for bypass surgery
- Carcinoma in situ (cancer that has not metastasized)

Initial diagnosis and initial recommendation must occur after your coverage becomes effective.

## Affordable Group Rates

Because you'll be buying this insurance through Douglas County, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. Your rates will not increase as you grow older – meaning you'll have the same monthly payment for as long as you have your coverage.

If you wish to apply for an amount greater than the Guarantee Issue Amount: \$20,000 for yourself or \$10,000 for your spouse, complete a brief health questionnaire (also known as evidence of insurability).

Coverage for...	Coverage Amount...
You	\$5,000-\$50,000 in increments of \$5,000
Your spouse	\$5,000-\$30,000 in increments of \$5,000, as long as it's not more than your coverage amount
Your children up to age 26	Automatically covered at 25% of your coverage amount

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

The monthly premiums you would pay for Critical Illness insurance benefits are based on the ages of you and your spouse and whether or not you or your spouse use tobacco. The rates below are not combined rates for you and your spouse, rather they are the rates for each of you individually. Please note that coverage can be purchased in \$5,000 increments.

Coverage Amount	Issue Age									
	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-70
<b>Non-Tobacco Monthly Rates</b>										
<b>\$5,000</b>	\$4.39	\$5.40	\$6.51	\$8.15	\$9.83	\$12.72	\$16.69	\$24.05	\$32.14	\$42.18
<b>\$10,000</b>	\$6.01	\$8.02	\$10.25	\$13.52	\$16.89	\$22.66	\$30.61	\$45.33	\$61.50	\$81.60
<b>\$15,000</b>	\$7.64	\$10.66	\$14.00	\$18.91	\$23.96	\$32.62	\$44.54	\$66.62	\$90.88	\$121.02
<b>\$20,000</b>	\$9.27	\$13.30	\$17.75	\$24.30	\$31.03	\$42.58	\$58.47	\$87.91	\$120.26	\$160.44
<b>\$25,000</b>	\$10.89	\$15.92	\$21.48	\$29.68	\$38.09	\$52.52	\$72.39	\$109.18	\$149.63	\$199.86
<b>\$30,000</b>	\$12.52	\$18.56	\$25.23	\$35.06	\$45.17	\$62.48	\$86.32	\$130.47	\$179.00	\$239.28
<b>\$35,000</b>	\$14.15	\$21.20	\$28.98	\$40.45	\$52.24	\$72.44	\$100.25	\$151.76	\$208.38	\$278.70
<b>\$40,000</b>	\$15.77	\$23.82	\$32.72	\$45.83	\$59.30	\$82.38	\$114.17	\$173.04	\$237.75	\$318.12
<b>\$45,000</b>	\$17.40	\$26.46	\$36.47	\$51.21	\$66.37	\$92.34	\$128.10	\$194.33	\$267.12	\$357.54
<b>\$50,000</b>	\$19.03	\$29.10	\$40.22	\$56.60	\$73.44	\$102.30	\$142.03	\$215.62	\$296.50	\$396.96

Coverage Amount	Issue Age									
	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-70
<b>Tobacco Monthly Rates</b>										
<b>\$5,000</b>	\$4.96	\$6.53	\$8.69	\$11.97	\$15.66	\$22.21	\$31.59	\$48.96	\$68.24	\$91.24
<b>\$10,000</b>	\$7.14	\$10.28	\$14.61	\$21.18	\$28.55	\$41.66	\$60.41	\$95.15	\$133.71	\$179.72
<b>\$15,000</b>	\$9.34	\$14.05	\$20.53	\$30.39	\$41.46	\$61.11	\$89.24	\$141.35	\$199.19	\$268.20
<b>\$20,000</b>	\$11.53	\$17.81	\$26.46	\$39.60	\$54.36	\$80.56	\$118.07	\$187.55	\$264.68	\$356.69
<b>\$25,000</b>	\$13.72	\$21.57	\$32.38	\$48.80	\$67.25	\$100.01	\$146.89	\$233.73	\$330.15	\$445.16
<b>\$30,000</b>	\$15.91	\$25.34	\$38.31	\$58.02	\$80.15	\$119.46	\$175.73	\$279.93	\$395.63	\$533.65
<b>\$35,000</b>	\$18.11	\$29.10	\$44.23	\$67.23	\$93.06	\$138.91	\$204.56	\$326.13	\$461.11	\$622.13
<b>\$40,000</b>	\$20.29	\$32.86	\$50.15	\$76.43	\$105.95	\$158.35	\$233.38	\$372.32	\$526.58	\$710.60
<b>\$45,000</b>	\$22.49	\$36.62	\$56.08	\$85.64	\$118.85	\$177.81	\$262.21	\$418.52	\$592.06	\$799.09
<b>\$50,000</b>	\$24.68	\$40.39	\$62.01	\$94.86	\$131.75	\$197.26	\$291.04	\$464.72	\$657.54	\$887.57

## Important Details

Here's where you'll find the nitty-gritty details about Critical Illness Insurance.

### Portability

This coverage is portable. That means that you may be able to continue your coverage — at the same rate you would pay today — if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

### Eligibility Requirements

To be eligible for this coverage, you must be a regular employee of Douglas County, actively working in the United States at least 30 hours per week and a citizen or resident of the United States or Canada. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, a person to whom you are legally married. You can also cover your child(ren) from birth to age 26. Your child(ren) 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.

A minimum number of eligible employees must apply and qualify for the proposed plan before Critical Illness insurance coverage can become effective.

### Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, receive evidence of good health underwriting approval (if applicable), agree to pay premium and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

### Evidence of Good Health

You and your spouse will need to provide evidence of good health by completing a brief questionnaire for the following situations:

- Coverage amounts higher than the Guarantee Issue Amount

- All late applications (applying 31 days after becoming eligible)
- Reinstatements, if required
- If you or your spouse were required to provide evidence of good health under a prior period of eligibility and either:
  - Did not provide it, or
  - We did not approve it

### Changes in Your Insurance

To increase your or your spouse's insurance, you can apply in writing. Evidence of good health will be required:

- For requests for coverage increases
- If you or your spouse were required to provide evidence of good health under a prior period of eligibility and either:
  - Did not provide it, or
  - We did not approve it

### Reoccurrence Benefit

If you or your dependents receive a benefit for a covered critical illness and are later diagnosed with the same critical illness, a one-time reoccurrence benefit will be paid if you or your dependents have:

- Been continuously insured under the group policy between the initial and subsequent diagnosis or recommendation
- Served a 12-month treatment-free period in connection with the critical illness during which you or your dependents did not:
  - Consult a physician or other licensed medical professional
  - Receive medical treatment, services or advice
  - Undergo diagnostic procedures, including self-administered procedures
  - Take prescribed drugs or medications

### Exclusions

Benefits are not payable if a critical illness is caused or contributed to by any of the following:

- War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism

- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state the critical illness occurred, unless used or consumed according to the directions of a physician
- Initial diagnosis outside of the United States or Canada
- Elective surgery or other procedure which:
  - Does not promote the proper function of your or your dependent's body or prevent or treat sickness or injury
  - Is directed at improving your or your dependent's appearance, unless such surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurementNote: This exclusion will not apply to a critical illness caused or contributed to by your or your dependent's donation of an organ or tissue

### Preexisting Condition Exclusion

Preexisting conditions can affect your coverage if they occurred at any time during the 180-day period just before the date your or your dependent's insurance or an increase in coverage amount becomes effective.

Preexisting conditions are defined as:

- A mental or physical condition (whether or not diagnosed or misdiagnosed) for which you or your dependent consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures including self-administered procedures; or taken prescribed drugs or medications.
- A mental or physical condition that was discovered or suspected as a result of any medical examination, including a routine examination.

You or your dependent will not be covered for a critical illness if it is caused or contributed to by a preexisting condition or medical or surgical treatment of a preexisting condition. The preexisting condition will be covered if, on the date you or your dependent incur the critical illness:

- You or your dependent have been continuously insured under the group policy for 12 months
- You have been actively at work for at least one full day after the end of that 12 months

You and your dependents will not be covered for an increase in coverage amount if your or your dependent's critical illness is caused or contributed to by a preexisting condition or medical or surgical treatment of a preexisting condition. The preexisting condition will be covered if, on the date you or your dependent incur the critical illness:

- You or your dependent have been continuously insured

for the increase in coverage amount under the group policy for 12 months

- You have been actively at work for at least one full day after the end of that 12 months

### When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you reach age 80, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for spouse insurance, your spouse reaches age 80, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

### 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.

This is a limited benefit policy.

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[www.standard.com](http://www.standard.com)

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**IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE**

**Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.**

This insurance pays a fixed dollar amount, regardless of your expenses, if you meet the policy conditions, for one of the specific diseases or health conditions named in the policy. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

**Medicare generally pays for most or all of these expenses.**

**Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:**

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

**This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.**

**Before you buy this insurance:**

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).



# Group Basic Life and Accidental Death and Dismemberment Insurance

Group Basic Life insurance from Standard Insurance Company helps provide financial protection by promising to pay a benefit in the event of an eligible member's covered death. Basic Accidental Death and Dismemberment (AD&D) insurance may provide an additional amount in the event of a covered death or dismemberment as a result of an accident.

The cost of this insurance is paid by Douglas County.

## Eligibility

<b>Definition of a Member</b>	You are a member if you are an active employee of Douglas County and regularly working at least 30 hours each week. You are not a member if you are a temporary or seasonal employee, a full-time member of the armed forces, a leased employee or an independent contractor.
<b>Class Definition</b>	Class 1 - Elected officials, Managers and Supervisors Class 2 - All other Members
<b>Eligibility Waiting Period</b>	You must satisfy your new employee waiting period to be eligible.

## Benefits

<b>Basic Life Coverage Amount</b>	Class 1 - 1 times your annual earnings to a maximum of \$50,000. Class 2 - \$25,000
<b>Basic AD&amp;D Coverage Amount</b>	For a covered accidental loss of life, your Basic AD&D coverage amount is equal to your Basic Life coverage amount. For other covered losses, a percentage of this benefit will be payable.
<b>Age Reductions</b>	Basic Life and AD&D insurance coverage amount reduces to 65 percent at age 65 and to 55 percent at age 70.

## Other Basic Life Features and Services

- Accelerated Benefit
- Life Services Toolkit
- Portability of Insurance Provision
- Repatriation Benefit
- Right to Convert Provision
- Standard Secure Access account payment option
- Travel Assistance
- Waiver of Premium

## Other Basic AD&D Features

- Air Bag Benefit
- Family Benefits Package
- Seat Belt Benefit

This information is only a brief description of the group Basic Life/AD&D insurance policy sponsored by Douglas County. The controlling provisions will be in the group policy issued by The Standard. The group policy contains a detailed description of the limitations, reductions in benefits, exclusions and when The Standard and Douglas County may increase the cost of coverage, amend or cancel the policy. A group certificate of insurance that describes the terms and conditions of the group policy is available for those who become insured according to its terms. For more complete details of coverage, contact your human resources representative.

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# Group Life and AD&D Insurance

Help protect your loved ones from financial hardship.

Life insurance coverage is designed to help provide financial support and stability to your family should you pass away. Accidental Death & Dismemberment (AD&D) insurance provides an extra layer of protection if you die or become dismembered in an accident. You can also cover your eligible spouse and child(ren).



## This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits if you are dismembered, become terminally ill or die

## 🔗 About This Coverage

If you take no action, you'll be covered for the basic amount of Life insurance up to the guarantee issue maximum amount, 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.

Life Insurance		
<p><b>How Much Can I Apply For?</b></p> <p>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.</p>	For You:	<b>\$10,000 – \$500,000</b> in increments of <b>\$10,000</b>
	For Your Spouse:	<b>\$5,000 – \$250,000</b> in increments of <b>\$5,000</b>
	For Your Child(ren):	<b>\$10,000 – \$20,000</b> in increments of <b>\$10,000</b>
<p><b>What is the Guarantee Issue Maximum?</b></p> <p>Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions.</p>	For You:	Up to <b>\$150,000</b>
	For Your Spouse:	Up to <b>\$100,000</b>

### AD&D Insurance

The benefit is paid if you or your dependents are seriously injured or pass away as a result of a covered accident.

#### What Does My AD&D Benefit Provide?

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

For You:	You may elect AD&D insurance in increments of \$10,000 from \$10,000 to \$500,000. Your elected AD&D amount cannot exceed your Additional Life amount.
For Your Spouse:	You may elect AD&D insurance in increments of \$5,000 from \$5,000 to \$250,000. Your elected AD&D amount cannot exceed your Life amount.
For Your Child(ren):	You may elect AD&D insurance in increments of \$10,000 from \$10,000 to \$20,000. Your elected AD&D amount cannot exceed your Life amount.

Keep in mind that the amount payable for certain losses is less than 100 percent of the AD&D insurance benefit.

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

## ☰ Additional Features

Your coverage comes with some added features:

### Life Insurance

#### Accelerated 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 Your Coverage Costs

Your Basic Life insurance is paid for by Douglas County. 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.

**Use this formula to calculate your premium payment:**

$$\frac{\text{Enter the amount of coverage you are requesting (see benefit amounts in the About This Coverage section)}}{1000} = \text{Enter your rate from the rate table.} \times \text{This amount is an estimate of how much you would pay each month.}$$

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 \$0.18 per \$1,000, no matter how many children you're covering. If you elect AD&D insurance with your Dependents Life insurance for your child(ren), your child(ren)'s monthly AD&D rate is \$0.02 per \$1,000 added to the above rate. The amount of AD&D you elect for your child(ren) may differ from the amount of Dependents Life insurance you elect for your child(ren).

Age (as of March 1)	Your Rate* (Per \$1,000 of Total Coverage)	Your Spouse's Rate** (Per \$1,000 of Total Coverage)
<30	\$0.060	\$0.060
30-34	\$0.080	\$0.080
35-39	\$0.090	\$0.090
40-44	\$0.126	\$0.126
45-49	\$0.234	\$0.234
50-54	\$0.342	\$0.342
55-59	\$0.594	\$0.594
60-64	\$0.882	\$0.882
65-69	\$1.791	\$1.791
70-74	\$2.772	\$2.772
75+	\$4.644	\$4.644

### How much Life insurance do you need?

After a serious accident or 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](http://www.standard.com/life/needs).

\*If you elect AD&D insurance with your Additional Life insurance, your monthly AD&D rate is \$0.03 per \$1,000 of AD&D benefit. The amount of AD&D you elect may differ from the amount of Additional Life insurance you elect.

\*\*If you elect AD&D insurance with your Dependents Life insurance for your spouse, your spouse's monthly AD&D rate is \$0.03 per \$1,000 of AD&D benefit. The amount of AD&D you elect for your spouse may differ from the amount of Dependents Life insurance you elect for your spouse.

Group Additional Life Monthly Premiums

Coverage Amount	Employee's Age as of March 1										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$10,000	0.60	0.80	0.90	1.26	2.34	3.42	5.94	8.82	11.64	13.86	23.22
\$20,000	1.20	1.60	1.80	2.52	4.68	6.84	11.88	17.64	23.28	27.72	46.44
\$30,000	1.80	2.40	2.70	3.78	7.02	10.26	17.82	26.46	34.92	41.58	69.66
\$40,000	2.40	3.20	3.60	5.04	9.36	13.68	23.76	35.28	46.57	55.44	92.88
\$50,000	3.00	4.00	4.50	6.30	11.70	17.10	29.70	44.10	58.21	69.30	116.10
\$60,000	3.60	4.80	5.40	7.56	14.04	20.52	35.64	52.92	69.85	83.16	139.32
\$70,000	4.20	5.60	6.30	8.82	16.38	23.94	41.58	61.74	81.49	97.02	162.54
\$80,000	4.80	6.40	7.20	10.08	18.72	27.36	47.52	70.56	93.13	110.88	185.76
\$90,000	5.40	7.20	8.10	11.34	21.06	30.78	53.46	79.38	104.77	124.74	208.98
\$100,000	6.00	8.00	9.00	12.60	23.40	34.20	59.40	88.20	116.42	138.60	232.20
\$110,000	6.60	8.80	9.90	13.86	25.74	37.62	65.34	97.02	128.06	152.46	255.42
\$120,000	7.20	9.60	10.80	15.12	28.08	41.04	71.28	105.84	139.70	166.32	278.64
\$130,000	7.80	10.40	11.70	16.38	30.42	44.46	77.22	114.66	151.34	180.18	301.86
\$140,000	8.40	11.20	12.60	17.64	32.76	47.88	83.16	123.48	162.98	194.04	325.08
\$150,000	9.00	12.00	13.50	18.90	35.10	51.30	89.10	132.30	174.62	207.90	348.30
\$160,000	9.60	12.80	14.40	20.16	37.44	54.72	95.04	141.12	186.26	221.76	371.52
\$170,000	10.20	13.60	15.30	21.42	39.78	58.14	100.98	149.94	197.91	235.62	394.74
\$180,000	10.80	14.40	16.20	22.68	42.12	61.56	106.92	158.76	209.55	249.48	417.96
\$190,000	11.40	15.20	17.10	23.94	44.46	64.98	112.86	167.58	221.19	263.34	441.18
\$200,000	12.00	16.00	18.00	25.20	46.80	68.40	118.80	176.40	232.83	277.20	464.40
\$210,000	12.60	16.80	18.90	26.46	49.14	71.82	124.74	185.22	244.47	291.06	487.62
\$220,000	13.20	17.60	19.80	27.72	51.48	75.24	130.68	194.04	256.11	304.92	510.84
\$230,000	13.80	18.40	20.70	28.98	53.82	78.66	136.62	202.86	267.75	318.78	534.06
\$240,000	14.40	19.20	21.60	30.24	56.16	82.08	142.56	211.68	279.40	332.64	557.28
\$250,000	15.00	20.00	22.50	31.50	58.50	85.50	148.50	220.50	291.04	346.50	580.50
\$260,000	15.60	20.80	23.40	32.76	60.84	88.92	154.44	229.32	302.68	360.36	603.72
\$270,000	16.20	21.60	24.30	34.02	63.18	92.34	160.38	238.14	314.32	374.22	626.94
\$280,000	16.80	22.40	25.20	35.28	65.52	95.76	166.32	246.96	325.96	388.08	650.16
\$290,000	17.40	23.20	26.10	36.54	67.86	99.18	172.26	255.78	337.60	401.94	673.38
\$300,000	18.00	24.00	27.00	37.80	70.20	102.60	178.20	264.60	349.25	415.80	696.60
\$310,000	18.60	24.80	27.90	39.06	72.54	106.02	184.14	273.42	360.89	429.66	719.82
\$320,000	19.20	25.60	28.80	40.32	74.88	109.44	190.08	282.24	372.53	443.52	743.04
\$330,000	19.80	26.40	29.70	41.58	77.22	112.86	196.02	291.06	384.17	457.38	766.26
\$340,000	20.40	27.20	30.60	42.84	79.56	116.28	201.96	299.88	395.81	471.24	789.48
\$350,000	21.00	28.00	31.50	44.10	81.90	119.70	207.90	308.70	407.45	485.10	812.70
\$360,000	21.60	28.80	32.40	45.36	84.24	123.12	213.84	317.52	419.09	498.96	835.92
\$370,000	22.20	29.60	33.30	46.62	86.58	126.54	219.78	326.34	430.74	512.82	859.14
\$380,000	22.80	30.40	34.20	47.88	88.92	129.96	225.72	335.16	442.38	526.68	882.36
\$390,000	23.40	31.20	35.10	49.14	91.26	133.38	231.66	343.98	454.02	540.54	905.58
\$400,000	24.00	32.00	36.00	50.40	93.60	136.80	237.60	352.80	465.66	554.40	928.80
\$410,000	24.60	32.80	36.90	51.66	95.94	140.22	243.54	361.62	477.30	568.26	952.02
\$420,000	25.20	33.60	37.80	52.92	98.28	143.64	249.48	370.44	488.94	582.12	975.24
\$430,000	25.80	34.40	38.70	54.18	100.62	147.06	255.42	379.26	500.58	595.98	998.46
\$440,000	26.40	35.20	39.60	55.44	102.96	150.48	261.36	388.08	512.23	609.84	1,021.68
\$450,000	27.00	36.00	40.50	56.70	105.30	153.90	267.30	396.90	523.87	623.70	1,044.90
\$460,000	27.60	36.80	41.40	57.96	107.64	157.32	273.24	405.72	535.51	637.56	1,068.12
\$470,000	28.20	37.60	42.30	59.22	109.98	160.74	279.18	414.54	547.15	651.42	1,091.34
\$480,000	28.80	38.40	43.20	60.48	112.32	164.16	285.12	423.36	558.79	665.28	1,114.56
\$490,000	29.40	39.20	44.10	61.74	114.66	167.58	291.06	432.18	570.43	679.14	1,137.78
\$500,000	30.00	40.00	45.00	63.00	117.00	171.00	297.00	441.00	582.08	693.00	1,161.00

\* Coverage amounts for ages 65 and over reduce due to age reduction (see Life Insurance Age Reductions section).

Group Additional AD&D Monthly Premiums

Coverage Amount	Employee's Age as of March 1			
	< 65	65-69*	70-74*	75+*
\$10,000	0.30	0.20	0.15	0.15
\$20,000	0.60	0.39	0.30	0.30
\$30,000	0.90	0.59	0.45	0.45
\$40,000	1.20	0.78	0.60	0.60
\$50,000	1.50	0.98	0.75	0.75
\$60,000	1.80	1.17	0.90	0.90
\$70,000	2.10	1.37	1.05	1.05
\$80,000	2.40	1.56	1.20	1.20
\$90,000	2.70	1.76	1.35	1.35
\$100,000	3.00	1.95	1.50	1.50
\$110,000	3.30	2.15	1.65	1.65
\$120,000	3.60	2.34	1.80	1.80
\$130,000	3.90	2.54	1.95	1.95
\$140,000	4.20	2.73	2.10	2.10
\$150,000	4.50	2.93	2.25	2.25
\$160,000	4.80	3.12	2.40	2.40
\$170,000	5.10	3.32	2.55	2.55
\$180,000	5.40	3.51	2.70	2.70
\$190,000	5.70	3.71	2.85	2.85
\$200,000	6.00	3.90	3.00	3.00
\$210,000	6.30	4.10	3.15	3.15
\$220,000	6.60	4.29	3.30	3.30
\$230,000	6.90	4.49	3.45	3.45
\$240,000	7.20	4.68	3.60	3.60
\$250,000	7.50	4.88	3.75	3.75
\$260,000	7.80	5.07	3.90	3.90
\$270,000	8.10	5.27	4.05	4.05
\$280,000	8.40	5.46	4.20	4.20
\$290,000	8.70	5.66	4.35	4.35
\$300,000	9.00	5.85	4.50	4.50
\$310,000	9.30	6.05	4.65	4.65
\$320,000	9.60	6.24	4.80	4.80
\$330,000	9.90	6.44	4.95	4.95
\$340,000	10.20	6.63	5.10	5.10
\$350,000	10.50	6.83	5.25	5.25
\$360,000	10.80	7.02	5.40	5.40
\$370,000	11.10	7.22	5.55	5.55
\$380,000	11.40	7.41	5.70	5.70
\$390,000	11.70	7.61	5.85	5.85
\$400,000	12.00	7.80	6.00	6.00
\$410,000	12.30	8.00	6.15	6.15
\$420,000	12.60	8.19	6.30	6.30
\$430,000	12.90	8.39	6.45	6.45
\$440,000	13.20	8.58	6.60	6.60
\$450,000	13.50	8.78	6.75	6.75
\$460,000	13.80	8.97	6.90	6.90
\$470,000	14.10	9.17	7.05	7.05
\$480,000	14.40	9.36	7.20	7.20
\$490,000	14.70	9.56	7.35	7.35
\$500,000	15.00	9.75	7.50	7.50

\* Coverage amounts for ages 65 and over reduce due to age reduction (see Life Insurance Age Reductions section).

Spouse Life Monthly Premiums

Coverage Amount	Employee's Age as of March 1										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75+*
\$5,000	0.30	0.40	0.45	0.63	1.17	1.71	2.97	4.41	5.82	6.93	11.61
\$10,000	0.60	0.80	0.90	1.26	2.34	3.42	5.94	8.82	11.64	13.86	23.22
\$15,000	0.90	1.20	1.35	1.89	3.51	5.13	8.91	13.23	17.46	20.79	34.83
\$20,000	1.20	1.60	1.80	2.52	4.68	6.84	11.88	17.64	23.28	27.72	46.44
\$25,000	1.50	2.00	2.25	3.15	5.85	8.55	14.85	22.05	29.10	34.65	58.05
\$30,000	1.80	2.40	2.70	3.78	7.02	10.26	17.82	26.46	34.92	41.58	69.66
\$35,000	2.10	2.80	3.15	4.41	8.19	11.97	20.79	30.87	40.75	48.51	81.27
\$40,000	2.40	3.20	3.60	5.04	9.36	13.68	23.76	35.28	46.57	55.44	92.88
\$45,000	2.70	3.60	4.05	5.67	10.53	15.39	26.73	39.69	52.39	62.37	104.49
\$50,000	3.00	4.00	4.50	6.30	11.70	17.10	29.70	44.10	58.21	69.30	116.10
\$55,000	3.30	4.40	4.95	6.93	12.87	18.81	32.67	48.51	64.03	76.23	127.71
\$60,000	3.60	4.80	5.40	7.56	14.04	20.52	35.64	52.92	69.85	83.16	139.32
\$65,000	3.90	5.20	5.85	8.19	15.21	22.23	38.61	57.33	75.67	90.09	150.93
\$70,000	4.20	5.60	6.30	8.82	16.38	23.94	41.58	61.74	81.49	97.02	162.54
\$75,000	4.50	6.00	6.75	9.45	17.55	25.65	44.55	66.15	87.31	103.95	174.15
\$80,000	4.80	6.40	7.20	10.08	18.72	27.36	47.52	70.56	93.13	110.88	185.76
\$85,000	5.10	6.80	7.65	10.71	19.89	29.07	50.49	74.97	98.95	117.81	197.37
\$90,000	5.40	7.20	8.10	11.34	21.06	30.78	53.46	79.38	104.77	124.74	208.98
\$95,000	5.70	7.60	8.55	11.97	22.23	32.49	56.43	83.79	110.59	131.67	220.59
\$100,000	6.00	8.00	9.00	12.60	23.40	34.20	59.40	88.20	116.42	138.60	232.20
\$105,000	6.30	8.40	9.45	13.23	24.57	35.91	62.37	92.61	122.24	145.53	243.81
\$110,000	6.60	8.80	9.90	13.86	25.74	37.62	65.34	97.02	128.06	152.46	255.42
\$115,000	6.90	9.20	10.35	14.49	26.91	39.33	68.31	101.43	133.88	159.39	267.03
\$120,000	7.20	9.60	10.80	15.12	28.08	41.04	71.28	105.84	139.70	166.32	278.64
\$125,000	7.50	10.00	11.25	15.75	29.25	42.75	74.25	110.25	145.52	173.25	290.25
\$130,000	7.80	10.40	11.70	16.38	30.42	44.46	77.22	114.66	151.34	180.18	301.86
\$135,000	8.10	10.80	12.15	17.01	31.59	46.17	80.19	119.07	157.16	187.11	313.47
\$140,000	8.40	11.20	12.60	17.64	32.76	47.88	83.16	123.48	162.98	194.04	325.08
\$145,000	8.70	11.60	13.05	18.27	33.93	49.59	86.13	127.89	168.80	200.97	336.69
\$150,000	9.00	12.00	13.50	18.90	35.10	51.30	89.10	132.30	174.62	207.90	348.30
\$155,000	9.30	12.40	13.95	19.53	36.27	53.01	92.07	136.71	180.44	214.83	359.91
\$160,000	9.60	12.80	14.40	20.16	37.44	54.72	95.04	141.12	186.26	221.76	371.52
\$165,000	9.90	13.20	14.85	20.79	38.61	56.43	98.01	145.53	192.08	228.69	383.13
\$170,000	10.20	13.60	15.30	21.42	39.78	58.14	100.98	149.94	197.91	235.62	394.74
\$175,000	10.50	14.00	15.75	22.05	40.95	59.85	103.95	154.35	203.73	242.55	406.35
\$180,000	10.80	14.40	16.20	22.68	42.12	61.56	106.92	158.76	209.55	249.48	417.96
\$185,000	11.10	14.80	16.65	23.31	43.29	63.27	109.89	163.17	215.37	256.41	429.57
\$190,000	11.40	15.20	17.10	23.94	44.46	64.98	112.86	167.58	221.19	263.34	441.18
\$195,000	11.70	15.60	17.55	24.57	45.63	66.69	115.83	171.99	227.01	270.27	452.79
\$200,000	12.00	16.00	18.00	25.20	46.80	68.40	118.80	176.40	232.83	277.20	464.40
\$205,000	12.30	16.40	18.45	25.83	47.97	70.11	121.77	180.81	238.65	284.13	476.01
\$210,000	12.60	16.80	18.90	26.46	49.14	71.82	124.74	185.22	244.47	291.06	487.62
\$215,000	12.90	17.20	19.35	27.09	50.31	73.53	127.71	189.63	250.29	297.99	499.23
\$220,000	13.20	17.60	19.80	27.72	51.48	75.24	130.68	194.04	256.11	304.92	510.84
\$225,000	13.50	18.00	20.25	28.35	52.65	76.95	133.65	198.45	261.93	311.85	522.45
\$230,000	13.80	18.40	20.70	28.98	53.82	78.66	136.62	202.86	267.75	318.78	534.06
\$235,000	14.10	18.80	21.15	29.61	54.99	80.37	139.59	207.27	273.58	325.71	545.67
\$240,000	14.40	19.20	21.60	30.24	56.16	82.08	142.56	211.68	279.40	332.64	557.28
\$245,000	14.70	19.60	22.05	30.87	57.33	83.79	145.53	216.09	285.22	339.57	568.89
\$250,000	15.00	20.00	22.50	31.50	58.50	85.50	148.50	220.50	291.04	346.50	580.50

\* Coverage amounts for ages 65 and over reduce due to age reduction (see Life Insurance Age Reductions section).

Spouse AD&D Monthly Premiums

Coverage Amount	Employee's Age as of March 1			
	< 65	65-69*	70-74*	75+*
\$5,000	0.15	0.10	0.08	0.08
\$10,000	0.30	0.20	0.15	0.15
\$15,000	0.45	0.29	0.23	0.23
\$20,000	0.60	0.39	0.30	0.30
\$25,000	0.75	0.49	0.38	0.38
\$30,000	0.90	0.59	0.45	0.45
\$35,000	1.05	0.68	0.53	0.53
\$40,000	1.20	0.78	0.60	0.60
\$45,000	1.35	0.88	0.68	0.68
\$50,000	1.50	0.98	0.75	0.75
\$55,000	1.65	1.07	0.83	0.83
\$60,000	1.80	1.17	0.90	0.90
\$65,000	1.95	1.27	0.98	0.98
\$70,000	2.10	1.37	1.05	1.05
\$75,000	2.25	1.46	1.13	1.13
\$80,000	2.40	1.56	1.20	1.20
\$85,000	2.55	1.66	1.28	1.28
\$90,000	2.70	1.76	1.35	1.35
\$95,000	2.85	1.85	1.43	1.43
\$100,000	3.00	1.95	1.50	1.50
\$105,000	3.15	2.05	1.58	1.58
\$110,000	3.30	2.15	1.65	1.65
\$115,000	3.45	2.24	1.73	1.73
\$120,000	3.60	2.34	1.80	1.80
\$125,000	3.75	2.44	1.88	1.88
\$130,000	3.90	2.54	1.95	1.95
\$135,000	4.05	2.63	2.03	2.03
\$140,000	4.20	2.73	2.10	2.10
\$145,000	4.35	2.83	2.18	2.18
\$150,000	4.50	2.93	2.25	2.25
\$155,000	4.65	3.02	2.33	2.33
\$160,000	4.80	3.12	2.40	2.40
\$165,000	4.95	3.22	2.48	2.48
\$170,000	5.10	3.32	2.55	2.55
\$175,000	5.25	3.41	2.63	2.63
\$180,000	5.40	3.51	2.70	2.70
\$185,000	5.55	3.61	2.78	2.78
\$190,000	5.70	3.71	2.85	2.85
\$195,000	5.85	3.80	2.93	2.93
\$200,000	6.00	3.90	3.00	3.00
\$205,000	6.15	4.00	3.08	3.08
\$210,000	6.30	4.10	3.15	3.15
\$215,000	6.45	4.19	3.23	3.23
\$220,000	6.60	4.29	3.30	3.30
\$225,000	6.75	4.39	3.38	3.38
\$230,000	6.90	4.49	3.45	3.45
\$235,000	7.05	4.58	3.53	3.53
\$240,000	7.20	4.68	3.60	3.60
\$245,000	7.35	4.78	3.68	3.68
\$250,000	7.50	4.88	3.75	3.75

\* Coverage amounts for ages 65 and over reduce due to age reduction (see Life Insurance Age Reductions section).

## Group Life and AD&D Insurance

### Child Life Monthly Premiums

Coverage Amount	Premium
\$10,000	1.80
\$20,000	3.60

### Child AD&D Monthly Premiums

Coverage Amount	Premium
\$10,000	0.20
\$20,000	0.40

## Important Details

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

### Life and AD&D Insurance Eligibility Requirements

To be eligible for coverage, you must be:

- A regular employee of Douglas County
- Actively working at least 30 hours per week
- Insured for Basic Life insurance through The Standard

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. If you buy Additional Life insurance for yourself, you may also buy AD&D insurance. If you buy AD&D insurance for yourself, you can also buy AD&D coverage for your dependents. 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 26. 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 for Life Coverage

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](http://www.standard.com/mhs) to submit a medical history statement online.

### Coverage Effective Date for Life Coverage

To become insured, you must satisfy 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, including any optional coverages, 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, including any optional coverages.

\*If you are already an eligible employee on the date the group policy is effective, you are eligible on that date. If you become an eligible employee after the group policy effective date, the eligibility waiting period varies and you should contact your human resources representative for additional information.

### Life and AD&D Age Reductions

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

### Life Insurance Waiver of Premium

Your Basic and Additional Life 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 Basic and Additional Life insurance coverage may continue without cost until age 65, provided you give us satisfactory proof that you remain totally disabled.

### Life and AD&D Insurance Portability

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

### Life Insurance 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.

### Life Insurance 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.

**AD&D Benefits**

The amount of the AD&D benefit is equal to the amount payable for you or your spouse’s or child(ren)’s Life benefit on the date of the accident. For all other covered losses, the amount is shown as a percentage of the amount payable for the benefit on the date of the accident. No more than 100 percent of the AD&D benefit will be paid for all losses resulting from one accident.

Any loss must be caused solely and directly by an accident within 365 days of the accident. A certified copy of the death certificate is needed to prove loss of life.

All other losses must be certified by a physician in the appropriate specialty determined by The Standard.

<b>Covered loss:</b>	<b>Percentage of AD&amp;D benefit payable:</b>
Life	100%
One hand or one foot	50%
Sight in one eye	50%
Two or more of the losses listed above	100%

**Voluntary AD&D Insurance Exclusions**

You are not covered for death or dismemberment caused or contributed to by any of the following:

- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Suicide or other intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared), and any substantial armed conflict between organized forces of a military nature
- Voluntary consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a physician
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

**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
- The date your Life coverage ends, your AD&D coverage will end as well

In addition to the above requirements, your Dependents Life with AD&D 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.

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

[SI 12506D-ALAA-753892 \(1/16\)](#)  
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# Life Services Toolkit

Resources and tools to help you and your beneficiary meet life's challenges



Group Life insurance through your employer gives you assurance that your family will receive some financial assistance in the event of a death. But coverage under a Group Life policy from The Standard<sup>‡</sup> does more than help protect your family from financial hardship after a loss. We have partnered with Bensinger, DuPont and Associates (BDA) to offer a lineup of additional services that can make a difference now and in the future.

Online tools and services can help you create a will, make advance funeral plans and put your finances in order. After a loss, beneficiaries can consult experts by phone or in person, and obtain other helpful information online.

The Life Services Toolkit is automatically available to those insured under a Group Life insurance policy from The Standard. Recipients of an Accelerated Benefit can access services for 12 months after the date of payment. Life insurance beneficiaries<sup>1</sup> can access services for 12 months after the date of death.

## Services to Help You Now

Visit the Life Services Toolkit website for information and tools to help you make important life decisions.

[www.standard.com/mytoolkit](http://www.standard.com/mytoolkit) with the username "assurance"



**Estate-Planning Assistance:** Online tools, found in the Legal Forms section, walk you through the steps to prepare a will and create other documents, such as living wills, powers of attorney, health care agent forms and living trusts.



**Financial Planning:** Consult online services to help you manage debt, calculate mortgage and loan payments, and take care of other financial matters with confidence.



**Health and Wellness:** Timely articles about nutrition, stress management and wellness help employees and their families lead healthy lives.



**Identity Theft Prevention:** Check the website for ways to thwart identity thieves and resolve issues if identity theft occurs.



**Funeral Arrangements:** Use the website to calculate funeral costs, find funeral-related services and make decisions about funeral arrangements in advance.

If you are a recipient of an Accelerated Benefit, you may access the services for beneficiaries outlined on the next page.

<sup>‡</sup> 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, where insurance products are offered by The Standard Life Insurance Company of New York of White Plains, New York. Product features and availability vary by state and company, and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.

<sup>1</sup> The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

**Standard Insurance Company**

**The Standard Life Insurance  
Company of New York**

[www.standard.com](http://www.standard.com)

Life Services Toolkit  
17526 (8/15) SI/SNY EE FLYER

## Services for Your Beneficiary

These supportive services can help your beneficiary cope after a loss:

- **Grief Support:** Clinicians with master's degrees are on call to provide confidential grief sessions by phone or in person. Beneficiaries are eligible for up to six face-to-face sessions and unlimited phone contact.
- **Legal Services:** Beneficiaries can obtain legal assistance from experienced attorneys.
  - They can schedule an initial 30-minute office and a telephone consultation with a network attorney. Beneficiaries who wish to retain a participating attorney after the initial consultation receive a 25 percent rate reduction from the attorney's normal hourly or fixed fee rates.
  - They can obtain an estate-planning package that consists of a simple will, a living will, a health care agent form and a durable power of attorney.
- **Financial Assistance:** Beneficiaries have unlimited phone access to financial counselors who can help with issues such as budgeting strategies, and credit and debt management, including hour-long sessions on topics requiring more in-depth discussion.
- **Support Services:** During an emotional time, beneficiaries can receive help planning a funeral or memorial service. Work-life advisors can guide them to resources to help manage household repairs and chores; find child care and elder care providers; or organize a move or relocation.
- **Online Resources:** Beneficiaries can easily access additional services and features on the Life Services Toolkit website for beneficiaries, including online resources to calculate funeral costs, find funeral-related services and make decisions about funeral arrangements.

**For beneficiary services, visit [www.standard.com/mytoolkit](http://www.standard.com/mytoolkit) (User name = support) or call the phone assistance line at 800.387.5742.**



Beneficiaries can participate in phone consultations or in-person meetings with trained grief counselors.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company, 1100 SW Sixth Avenue, Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York, 360 Hamilton Avenue, Suite 210, White Plains, New York. Product features and availability vary by state and company, and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.

The Life Services Toolkit is provided through an arrangement with Bensinger, DuPont & Associates (BDA) and is not affiliated with The Standard. BDA is solely responsible for providing and administering the included service. This service is not an insurance product.

# Travel Assistance

## Explore the World with Confidence



Things can happen on the road. Passports get stolen or lost. Unforeseen events or circumstances derail travel plans. Medical problems surface at the most inconvenient times. Travel Assistance can help you navigate these issues and more at any time of the day or night.

You and your spouse are covered with Travel Assistance — and so are kids through age 25<sup>1</sup> — with your group insurance from The Standard.‡

### Security That Travels with You

Travel Assistance is available when you travel more than 100 miles from home or internationally for up to 180 days for business or pleasure. It offers aid before and during your trip, including:



Passport, visa, weather and currency exchange information, health hazards advice and inoculation requirements



Emergency ticket, credit card and passport replacement, funds transfer and missing baggage



Connection to medical care providers and interpreter services



24/7/365 phone access to registered nurses for health and medication information, symptom decision support, and help understanding treatment options



Emergency evacuation to the nearest adequate medical facility and medically necessary repatriation to the employee's home, including repatriation of remains<sup>2</sup>



Connection to a local attorney, consular officer or bail bond services



Logistical arrangements for ground transportation, housing and/or evacuation in the event of political unrest and social instability; for more complex situations, assists with making arrangements with providers of specialized security services

‡ 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, where insurance products are offered by The Standard Life Insurance Company of New York of White Plains, New York. Product features and availability vary by state and company, and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.

### Contact Travel Assistance

**800.527.0218**

United States, Canada, Puerto Rico,  
U.S. Virgin Islands and Bermuda

**+1.410.453.6330**

Everywhere else

**Assistance@uhcglobal.com**

**www.standard.com/travel**

<sup>1</sup> Travel Assistance is provided through an arrangement with UnitedHealthcare Global, which is not affiliated with The Standard, and is subject to the terms and conditions, including exclusions and limitations, of the Emergency Travel Assistance Program Employee Description. UnitedHealthcare Global is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product, except in Oregon. UnitedHealthcare Global is the marketing name for FrontierMEDEX, Inc. This service is only available while insured under The Standard's group policy.

<sup>2</sup> Must be arranged by UnitedHealthcare Global. Related medical services, medical supplies and a medical escort are covered where applicable and necessary.



Global Intelligence Center  
[www.standard.com/travel](http://www.standard.com/travel)  
Group #9061

Travel Assistance is available if you travel more than 100 miles from home or in a foreign country.

#### Contact

**800.527.0218:** United States, Canada, Puerto Rico,  
U.S. Virgin Islands and Bermuda  
**+1.410.453.6330:** Everywhere else  
**Assistance@uhcglobal.com**



UnitedHealthcare Global is not responsible for the availability or results of any medical, legal, or transportation services. You are responsible for obtaining all services not directly provided by UnitedHealthcare Global and for the expenses associated with them. All services must be arranged by UnitedHealthcare Global. No claims for reimbursement will be accepted.

**Standard Insurance Company**

**The Standard Life Insurance  
Company of New York**

**www.standard.com**

Travel Assistance  
**14684-D (12/15) SI/SNY EE**



# Group Short Term Disability Insurance

Protect your income and those who depend on it.

This coverage replaces a portion of your income when you can't work because of a qualifying disability. Even if you're healthy now, it's important to protect yourself and the people who count on your income. This insurance can help you pay the bills when you're unable to work.



## This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits for a qualifying disability that is not work-related

## 🔗 About This Coverage

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

### What Your Benefit Provides

This is the benefit you'd receive if you were to suffer a qualifying disability. Eligible earnings are your weekly insured predisability earnings, as defined by the group policy. Your benefit amount will be reduced by deductible income; see the Important Details section for a list of deductible income sources.

**60%** of your eligible earnings, up to a maximum benefit of **\$1,500** per week. Plan minimum **\$15** per week.

### Benefit Waiting Period

If you suffer a qualifying disability, your benefit waiting period is the length of time you must be continuously disabled before you can begin receiving your weekly benefit.

30 days for accidental injury  
30 days for physical disease, pregnancy or mental disorder

### How Long Your Benefits Last

This is the maximum length of time you could be eligible to receive a weekly disability benefit.

180 days

## ☰ Additional Features

Your coverage comes with some added features:

<p><b>Help with Returning to Work</b></p>	<p>If a worksite modification would enable you to return to work, we can help your employer make approved modifications by covering some or all of the cost.</p>
---	--

## 💰 How Much Your Coverage Costs

Because this insurance is offered through Douglas County, you'll have access to competitive group rates that 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 benefit amount.

### Use this formula to calculate your premium payment:

$$\text{_____} \times 0.60 \times \text{_____} \div 10 = \text{_____}$$

Enter your weekly earnings (cannot be more than \$2,500).      Enter your rate from the rate table.      This amount is an estimate of how much you'd pay each month.

Your Age (as of March 1)	Rate per \$10 of weekly benefit
<30	\$0.429
30-34	\$0.475
35-39	\$0.339
40-44	\$0.287
45-49	\$0.331
50-54	\$0.372
55-59	\$0.499
60+	\$0.619

### Not being able to work also means not being able to earn a paycheck.

As you consider Short Term Disability (STD) insurance, think about the expenses you would need to cover if you were to become disabled:

- Mortgage or rent
- Utilities
- Groceries
- Medical bills
- Car insurance
- Childcare costs

To estimate your insurance needs, you'll need to consider your unique circumstances.

Use our online calculator at [www.standard.com/disability/needs](http://www.standard.com/disability/needs).

## 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:

- A regular employee of Douglas County
- Actively working at least 30 hours per week
- A citizen or resident of the United States or Canada

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

### Employee Coverage Effective Date

To become insured, you must meet the eligibility requirements listed above, serve an eligibility waiting period\*, apply for coverage and agree to pay premiums, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance. If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

All late applications (applying 31 days after becoming eligible) are subject to medical underwriting approval. Employees eligible but not insured under the prior short term disability insurance plan are also subject to medical underwriting approval. Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

\*If you are already an eligible employee on the date the group policy is effective, you are eligible on that date. If you become an eligible employee after the group policy effective date, the eligibility waiting period varies and you should contact your human resources representative for additional information.

### Definition of Disability

You will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity the material duties of your own occupation, and
- You suffer a loss of at least 20 percent in your predisability earnings when working in your own occupation.

You are not considered disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

### Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- The loss of your professional or occupational license or certification
- An activity arising out of or in the course of any employment for wage or profit

### Limitations

Short Term Disability benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty, as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution
- Able to work and earn at least 20 percent of your predisability earnings in your own occupation but you elect not to
- Receiving sick-leave pay, annual or personal leave pay, severance pay or other salary continuation (including donated amounts) from your employer
- Eligible to receive benefits for your disability under a workers' compensation law or similar law

### When Your Benefits End

Your Short Term Disability benefits end automatically on the date any of the following occur:

- You are no longer disabled
- Your maximum benefit period ends
- Long term disability benefits become payable to you under a Long Term Disability plan
- Benefits become payable under any other disability insurance plan under which you become insured through employment during a period of temporary

recovery

- You fail to provide proof of continued disability and entitlement to benefits
- You pass away

### Deductible Income

Your benefits will be reduced if you have deductible income, which is income you receive or are eligible to receive while receiving Short Term Disability benefits. Deductible income includes:

- Amounts under unemployment compensation law
- Amounts because of your disability from any other group insurance
- Any disability or retirement benefits received or you are eligible to receive from your employer's retirement plan
- Amounts under any state disability income benefit law or similar law
- Earnings from work activity while you are disabled, plus the earnings you could receive if you work as much as your disability allows
- Earnings or compensation included in your predisability earnings which you receive or are eligible to receive while STD benefits are payable
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

### 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 the group policy (or your employer's coverage under the group policy) terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date Douglas County ends participation in the group policy

### 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.

GP399-STD, GP899-STD, GP309-STD, GP209-STD, GP399/ASSOC, GP399-STD/TRUST

[SI 12503D-753892 \(1/16\)](#)

4724817-28188



# Group Long Term Disability Insurance

Protect your income when you're coping with a long-lasting disability.

This coverage is designed to replace a portion of your income when you're disabled for an extended period of time due to a qualifying disability and help you get back to work when you're ready. Long Term Disability (LTD) insurance benefits can help you pay your bills and safeguard your savings when you're unable to work. Whether you're out for a few months or several years, this benefit can help you protect your income — and those who depend on it.



## This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits for a qualifying disability that occurs on or off the job

## 🔗 About This Coverage

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

### What Your Benefit Provides

This is the amount per month you would receive if you were to suffer a qualifying disability. Eligible earnings are your monthly insured predisability earnings, as defined by the group policy. Your monthly benefit will be reduced by deductible income. Please see the Important Details section for a list of deductible income sources.

**60%** of your eligible earnings, up to a maximum benefit of **\$6,000** per month.

Plan minimum: **\$100** per month.

### Benefit Waiting Period

If you suffer a qualifying disability, your benefit waiting period is the length of time you must be continuously disabled before you can begin receiving your monthly benefit.

180 days

### How Long Your Benefits Last

This is the maximum length of time you could be eligible to receive disability benefits for a continuous disability.

Until your Social Security Normal Retirement Age (SSNRA)

Depending on your age at the time of disability, your benefits may be subject to a different schedule. Refer to the table in the Important Details for specifics.

## ☰ Additional Features

Your coverage comes with some added features:

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### **Help with Returning to Work**

This plan provides incentives to help you get back to work. For instance, you'll get help paying for some of the expenses associated with participating in an approved rehabilitation plan.

If a worksite modification would enable you to return to work, the coverage can help your employer make approved modifications.

You may also be eligible to receive an additional benefit of 10 percent of your predisability earnings for participating in an approved rehabilitation plan, subject to the plan maximum.

### **Survivors Benefit**

If you die while receiving benefits, your survivor may be eligible to receive a one-time additional payment.

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## 🇺🇸 How Much Your Coverage Costs

Because this insurance is offered through Douglas County, you'll have access to competitive group rates that 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 benefit amount.

### Use this formula to calculate your premium payment:

$$\frac{\text{Enter your monthly earnings (cannot be more than \$10,000).}}{\text{Enter your rate from the rate table.}} \times \text{Enter your rate from the rate table.} \div 100 = \text{This amount is an estimate of how much you'd pay each month.}$$

Your Age (as of March 1)	Rate %
<30	0.107
30-34	0.195
35-39	0.346
40-44	0.514
45-49	0.769
50-54	1.022
55-59	1.128
60-64	1.006
65-69	0.991
70-74	2.042
75+	2.536

### As you consider Long Term Disability insurance, evaluate what makes sense for you.

Getting by without a paycheck isn't easy, especially for an extended period of time. Make sure you have enough financial protection to help you cover your housing costs, utilities and other bills.

To estimate your insurance needs, you'll need to consider your unique circumstances.

Use our online calculator at [www.standard.com/disability/needs](http://www.standard.com/disability/needs).

## Important Details

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

### Eligibility Requirements

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

- A regular employee of Douglas County
- Actively working at least 30 hours per week
- A citizen or resident of the United States or Canada

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

### Employee Coverage Effective Date

To become insured, you must meet the eligibility requirements listed above, serve an eligibility waiting period\*, apply for coverage and agree to pay premiums, receive medical underwriting approval (if applicable), and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance. If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

All late applications (applying 31 days after becoming eligible), requests for coverage increases (including requests to insure predisability earnings that are greater than the last amount for which evidence of insurability was required) and reinstatements are subject to medical underwriting approval. Employees eligible but not insured under the prior long term disability insurance plan are also subject to medical underwriting approval. Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

\*If you are already an eligible employee on the date the group policy is effective, you are eligible on that date. If you become an eligible employee after the group policy effective date, the eligibility waiting period varies and you should contact your human resources representative for additional information.

### Definition of Disability

For the benefit waiting period and the first 24 months that Long Term Disability benefits are payable, you will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity

the material duties of your own occupation, and

- You suffer a loss of at least 20 percent of your predisability earnings when working in your own occupation.

You are not considered disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

After the own occupation period of disability, you will be considered disabled if, as a result of a physical disease, injury, pregnancy or mental disorder, you are unable to perform with reasonable continuity the material duties of any occupation.

### Maximum Benefit Period

If you become disabled before age 62, LTD benefits may continue during disability until age 65 or to the Social Security Normal Retirement Age (SSNRA) or 3 years 6 months, whichever is longer. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins:

Age	Maximum Benefit Period
62	To SSNRA, or 3 years 6 months, whichever is longer
63	To SSNRA, or 3 years, whichever is longer
64	To SSNRA, or 2 years 6 months, whichever is longer
65	2 years
66	1 year 9 months
67	1 year 6 months
68	1 year 3 months
69+	1 year

### Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- The loss of your professional or occupational license or certification
- A preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously

insured under the group policy for the exclusion period and you have been actively at work for at least one full day after the end of the exclusion period

### Preexisting Condition Provision

A preexisting condition is a mental or physical condition whether or not diagnosed or misdiagnosed:

- For which you or a reasonably prudent person would have consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures, including self-administered procedures; or taken prescribed drugs or medications
- Which, as a result of any medical examination, including routine examination, was discovered or suspected

during the 90-day period just before your insurance becomes effective.

Exclusion Period: 12 months

### Limitations

Long Term Disability benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty, as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution
- Able to work and earn at least 20 percent of your indexed predisability earnings, but you elect not to work. During the first months after the end of the benefit waiting period, the responsibility to work is limited to work in your own occupation; thereafter, the responsibility to work includes work in any occupation.

In addition, the length of time you can receive Long Term Disability payments will be limited if:

- You reside outside of the United States or Canada
- Your disability is caused or contributed to by mental disorders, substance abuse or the environment, chronic fatigue conditions, chronic pain conditions, carpal tunnel or repetitive motion syndrome or temporomandibular joint disorder or craniomandibular joint disorder

### When Your Benefits End

Your Long Term Disability benefits end automatically on the date any of the following occur:

- You are no longer disabled

- Your maximum benefit period ends
- Benefits become payable under any other disability insurance plan under which you become insured through employment during a period of temporary recovery
- You fail to provide proof of continued disability and entitlement to benefits
- You pass away

### Deductible Income

Your benefits will be reduced if you have deductible income, which is income you receive or are eligible to receive while receiving Long Term Disability benefits. Deductible income includes:

- Benefits under any workers' compensation law or similar law
- Amounts under unemployment compensation law
- Social Security disability or retirement benefits, including benefits for your spouse and children
- Amounts because of your disability from any other group insurance
- Any disability or retirement benefits you received or are eligible to receive from your employer's retirement plan.
- Benefits under any state disability income benefit law or similar law
- Earnings from work activity while you are disabled, plus the earnings you could receive if you work as much as your disability allows
- Earnings or compensation included in your predisability earnings which you receive or are eligible to receive while LTD benefits are payable
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

### **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 the group policy terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date Douglas County ends participation in the group policy

### **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.

GP190-LTD/S399, GP399-LTD/TRUST, GP899-LTD, GP209-LTD, GP608-LTD, GP190-LTD/ASSOC/S399, GP190-LTD/TRUST/S399, GP491-LTD/TRUST/S399

[SI 12501D-753892 \(1/16\)](#)

4724817-28192

**To Be Completed By Human Resources**

Group Number <b>753892</b>	Division	Billing Category	Date of Employment
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**To Be Completed By Applicant**

- Apply for Coverage     
  Name Change      Former Name \_\_\_\_\_  
 Add Dependent     
  Delete Dependent      Date of Add/Delete \_\_\_\_\_  
 Reinstatement     
  Beneficiary Change **Complete Beneficiary Section**

Your Full Name	Social Security Number	Birth Date	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address	City	State	ZIP
Phone Number	Job Title/Occupation		
Employer Name <b>Douglas County</b>	Hours Worked Per Week	Are you Actively At Work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Earnings \$ _____ Per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
Have you or your Spouse used tobacco in any form in the last 12 months? You <input type="checkbox"/> Yes <input type="checkbox"/> No Your Spouse <input type="checkbox"/> Yes <input type="checkbox"/> No			
Spouse Full Name	<input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date	

**Coverage**

**Check with your Human Resources Department about coverage options, minimum and maximums available to you and, if applicable, Evidence Of Insurability requirements.**

**Life and Accidental Death and Dismemberment (AD&D) Insurance**

Life with AD&D (Employer Paid)

*You may choose one of the following options for yourself:*

Additional Life (Employee Paid) requested amount \$ \_\_\_\_\_

Additional Life with AD&D (Employee Paid) requested amount for Life \$ \_\_\_\_\_ for AD&D \$ \_\_\_\_\_

**Dependents Life and AD&D Insurance**

*You may choose one of the following options for your spouse:*

Spouse Life (Employee Paid) requested amount \$ \_\_\_\_\_

Spouse Life with AD&D (Employee Paid) requested amount for Life \$ \_\_\_\_\_ for AD&D \$ \_\_\_\_\_

*You may choose one of the following options for your child(ren):*

Child(ren) Life (Employee Paid) requested amount \$ \_\_\_\_\_

Child(ren) Life with AD&D (Employee Paid) requested amount for Life \$ \_\_\_\_\_ for AD&D \$ \_\_\_\_\_

Your Full Name

**Short Term Disability Insurance**  
 Short Term Disability (Employee Paid)

**Long Term Disability Insurance**  
 Long Term Disability (Employee Paid)

**Accident Insurance**  
 You only     You and your Spouse     You and your Child(ren) (no Spouse)     You, your Spouse and your Child(ren)

**Critical Illness Insurance**  
*If the coverage option you select requires Evidence Of Insurability, please complete the questions below for you and/or your Spouse.*  
 Employee\*    \$ \_\_\_\_\_  
 Spouse    \$ \_\_\_\_\_

**\*Eligible child(ren) are automatically covered at 25% of your Coverage Amount.**

		You		Spouse	
		Yes	No	Yes	No
1.	In the past 12 months have you or your Spouse had any symptom or been informed by a medical professional of any abnormal test result which resulted in a recommendation to have any diagnostic test or procedure which has not yet been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Has a medical professional ever diagnosed you or your Spouse as having or prescribed medication for Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or Human Immunodeficiency Virus (HIV) antibodies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having: <ul style="list-style-type: none"> <li>diabetes (other than during pregnancy); heart disorder; angina; arterial disease; heart attack; angioplasty; coronary artery bypass; high blood pressure (hypertension) treated with three (3) or more medications; rheumatic fever; stroke; transient ischemic attack;</li> <li>renal disease (excluding kidney stone or urinary tract infection); pancreas disorder; liver cirrhosis; hepatitis (excluding hepatitis A);</li> <li>benign brain tumor; systemic lupus; muscular dystrophy; poliomyelitis; osteomyelitis or neurological disorder?</li> <li>Addison's disease; sickle cell anemia; hemophilia; paralysis; organ transplant; tuberculosis; or lung disease (excluding asthma or acute pneumonia)?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having cancer or malignancy (excluding non-melanoma skin cancer); bone marrow disorder, ulcerative colitis or Crohn's disease?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Full Name

5. In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having: glaucoma; retinitis pigmentosa or macular degeneration?

**Beneficiary**  
*This designation applies to your Life and Accidental Death and Dismemberment Insurance, if any, available through your Employer. This designation also will apply to your Supplemental Life and Accident Insurance, if any, available through your Employer, unless replaced by a separate and later designation. Designations are not valid unless signed, dated, and delivered in accordance with the terms of the Group Policy during your lifetime.*

Primary Full Name	Address	Relationship	% of Benefit <i>Total must equal 100%</i>
Contingent Full Name	Address	Relationship	% of Benefit <i>Total must equal 100%</i>

**Consent To Electronic Transactions**  
Pursuant to applicable state and federal electronic transaction laws, I consent to sending and receiving electronic records and to the use of electronic signatures. This consent applies to information, documents, including but not limited to, forms, applications, statements, claims, cancellation and nonrenewal notices where permitted by law, privacy notices or other communications made or exchanged under any plans, insurance policies or products offered or administered by Standard Insurance Company (The Standard). These electronic documents and communications may be sent to the email address I provide and in some cases may be made available to me at a website portal with notification at the email address I provide.

I understand that I will need to have web browser software and Adobe® Reader® software on a computer capable of accessing the Internet and a valid email address to access and retain these electronic records. A confirmation email will be sent from CustomerService@Standard.com to the email address that I provide below. I will click on the link provided in that email to confirm my email address and electronic delivery election, and will add CustomerService@Standard.com to my safe senders list to ensure the email is not blocked or sent to a spam folder. I may request a paper version of any of the electronically furnished documents at any time by contacting The Standard at 866.851.2429 and the document will be provided. There may be a charge for a paper version of certain documents. I will inform The Standard at CustomerService@Standard.com if my email address changes or if I prefer to receive communications at a different email address. In addition, I may withdraw this consent at any time by notifying The Standard by email at CustomerService@Standard.com or at 866.851.2429 that I no longer consent to sending and receiving electronic records or to the use of electronic signatures. The withdrawal of my consent shall be effective no later than ten business days after receipt of the withdrawal by The Standard. Withdrawing consent to receive information and documents electronically may result in a charge for a paper version of certain documents.

The Standard may choose to offer additional online services in the future that it will provide under terms and conditions other than or in addition to those described above. Therefore, as a condition of accessing or receiving those additional services, I may be asked to agree to different or additional terms and conditions.

I agree and consent to the terms and conditions set forth in this Consent to Electronic Transactions section, including, but not limited to, the use of electronic signatures. I agree to receive all mailings and communications electronically at the email address provided below.

Your Full Name
----------------

Email Address
---------------

For Accident and Critical Illness Insurance:

These benefits are under limited benefit insurance policies. These policies are a supplement to health insurance and are not a substitute for major medical coverage. They are not intended to satisfy the individual mandate of the Affordable Care Act (ACA) or provide the minimum essential coverage required by the ACA. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

**Signature**

I wish to make the choices indicated on this form, including, if applicable, consent to the terms and conditions set forth in the Consent to Electronic Transactions section. If electing coverage, I authorize deductions from my wages to cover my contribution, if required, toward the cost of insurance. I understand that my deduction amount will change if my coverage or costs change. I represent that the statements contained herein, including, if applicable, those made in response to the Evidence Of Insurability questions, are true and complete to the best of my knowledge and belief, and I understand that they form the basis of any coverage under the Group Policy(ies). I understand that any misstatements or failure to report information which is material to the issuance of coverage may be used as a basis for rescission of my insurance and/or denial of payment of a claim. I agree to notify Standard Insurance Company (The Standard) of any change in my medical condition while my enrollment application is pending. I agree that if my application is approved by The Standard, the effective date of any coverage will be determined in accordance with the terms of the Group Policy(ies), including any applicable Active Work requirement and my coverage will be subject to all terms and conditions of the Group Policy(ies).

Signature of Applicant (Member/Employee)	Date
--	------

Enroller (If applicable)	Enroller ID	Date
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**Beneficiary Information**

- Your designation revokes all prior designations.
- Benefits are only payable to a contingent Beneficiary if you are not survived by one or more primary Beneficiary(ies).
- If you name two or more Beneficiaries in a class:
  - Two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.
  - If you provide for unequal shares in a class, and two or more Beneficiaries in that class survive, we will pay each surviving Beneficiary his or her designated share. Unless you provide otherwise, we will then pay the share(s) otherwise due to any deceased Beneficiary(ies) to the surviving Beneficiaries pro rata based on the relationship that the designated percentage or fractional share of each surviving Beneficiary bears to the total shares of all surviving Beneficiaries.
  - If only one Beneficiary in a class survives, we will pay the total death benefits to that Beneficiary.
- If a minor (a person not of legal age), or your estate, is the Beneficiary, it may be necessary to have a guardian or a legal representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, the written trust must be identified in the Beneficiary designation. For example, "Dorothy Q. Smith, Trustee under the trust agreement dated \_\_\_\_\_."
- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have questions, consult your legal advisor.
- Dependents Insurance, if any, is payable to you, if living, or as provided under your Employer's coverage under the Group Policy.

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## 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](http://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.

Standard Insurance Company  
1100 SW Sixth Avenue  
Portland OR 97204  
**[www.standard.com](http://www.standard.com)**

Enrollment Booklet  
SI **16891D**-753892 1/16  
4724817-28169