



Additional Life Insurance

Life insurance coverage can help your family meet daily expenses, maintain their standard of living, pay off debt, secure your children’s education, and more in the event of your passing. Standard Insurance Company (The Standard) has developed this document to provide you with information about the elective coverage you may select through Montana University System.

Eligibility Requirements

Employee

- You must be insured for Basic Life through The Standard
- You must be enrolled in Montana University System’s medical plan and one of the following:
 1. An academic and professional employee with an individual contract under the authority of the Board of Regents which provides for eligibility;
 2. A permanent full-time employee of Montana University System scheduled to work more than six months in any twelve month period who is Actively At Work at least 20 hours each week;
 3. A permanent part-time or job-share employee of Montana University System scheduled to work more than six months in any twelve month period who is Actively At Work at least 20 hours each week;
 4. A temporary employee who is a) regularly scheduled to be Actively At Work 20 hours or more per week for more than six months within a year; or b) Actively At Work at least 20 hours each week for a continuous period of more than six months although not regularly scheduled to do so; or c) covered under a labor union contract which provides for eligibility.
- Seasonal employees and full-time members of the armed forces are not eligible
- You cannot be insured as both an employee and a dependent

Dependent

- You must elect Additional Life insurance for yourself in order to elect Dependents Life insurance
- Spouse means a person to whom you are legally married or your adult dependent as recognized by law
- Child means your child from live birth through the last day of the month in which a child reaches age 26
- Your child cannot be insured by more than one employee
- Your spouse or children must not be full-time member(s) of the armed forces

Premium

- You pay 100 percent of the premium for this coverage through easy payroll deduction

Coverage Amount Guidelines

Within the coverage amount guidelines shown below, you select the amount of Additional Life and Dependents Life insurance for which you are interested in applying.

	Minimum	Incremental Unit	Guarantee Issue Amount	Maximum
Employee	\$25,000	\$25,000	\$300,000	\$600,000
Spouse	\$25,000	\$25,000	\$50,000	Lesser of 100% of employee's Additional Life amount and \$300,000
Child	\$5,000	\$5,000		\$30,000

Note:

- Amounts of coverage elected above the Guarantee Issue amount are subject to medical underwriting approval. Medical underwriting is never required for children.
- All late applications (applying 63 days after becoming eligible), requests for coverage increases and reinstatements are subject to medical underwriting approval. Employees eligible but not insured under the prior life insurance plan are also subject to medical underwriting approval.
- 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 combined Basic and Additional Life coverage.

Coverage Amount Needed

Your family has a unique set of circumstances and financial demands. To help you figure out the amount of Additional Life insurance you may need to protect your loved ones, The Standard has created a Life Insurance Needs Calculator found at: standard.com/lifeneeds.

Family Status Change

If you are currently enrolled or eligible for Additional Life insurance for an amount less than \$300,000, you may elect to enroll or increase your coverage amount by one unit (\$25,000) but not to exceed \$300,000, without having to submit medical history within 63 days of a Family Status Change.

If you are currently enrolled or eligible for Dependents Life insurance for your spouse for an amount less than \$50,000, you may elect to enroll or increase your spouse's coverage amount by one unit (\$25,000) but not to exceed \$50,000, without having to submit medical history within 63 days of a Family Status Change.

Annual Enrollment

During your employer's annual enrollment period, if you are currently enrolled or eligible for Additional Life insurance for an amount less than \$300,000, you may elect to enroll or increase your coverage amount by one unit (\$25,000) each year but not to exceed \$300,000, without having to submit medical history.

During your employer's annual enrollment period, if you are currently enrolled for Dependents Life insurance for your spouse for an amount less than \$50,000, you may elect to increase your spouse's coverage amount by one unit (\$25,000) each year but not to exceed \$50,000, without having to submit medical history.

Employee Coverage Effective Date

To become insured, you must satisfy the eligibility requirements listed above, receive medical 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 including Dependents Life insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

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

Life Insurance Exclusions

This plan contains an exclusion for death resulting from suicide or other intentionally self-inflicted injury. The amount payable will exclude amounts that have not been continuously in effect for at least two years on the date of death. This is subject to state variations.

Life Insurance Features and Benefits

Please see your human resources representative for additional information about the features and benefits below.

- Waiver of Premium** If you become totally disabled while insured under this plan and under age 60, and complete a waiting period of 180 days, your Basic and Additional Life insurance may continue without premium payment until age 65 provided you give us satisfactory proof that you remain totally disabled.
- 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.
- Portability** If your insurance ends because your employment terminates, you may be eligible to buy portable group insurance coverage.
- Conversion** If your insurance ends or reduces, you may be eligible to convert your life insurance to an individual life insurance policy without submitting proof of good health.

When Insurance Ends

Coverage ends automatically on the earliest of the following:

- The last 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 (coverage may continue for limited periods under certain circumstances)
- The date the group policy, or your employer's coverage under the group policy, terminates
- For each elective insurance coverage, the date that coverage terminates under the group policy

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

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

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. Neither the information presented in this summary nor the certificate modifies the group policy or the insurance coverage in any way.

Employee Rates

If you elect Additional Life insurance, use the following rates to determine the monthly premium for coverage in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Coverage Amount	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$25,000	1.50	2.00	2.25	2.50	4.50	6.75	11.00	16.50	31.75	67.25
\$50,000	3.00	4.00	4.50	5.00	9.00	13.50	22.00	33.00	63.50	134.50
\$75,000	4.50	6.00	6.75	7.50	13.50	20.25	33.00	49.50	95.25	201.75
\$100,000	6.00	8.00	9.00	10.00	18.00	27.00	44.00	66.00	127.00	269.00
\$125,000	7.50	10.00	11.25	12.50	22.50	33.75	55.00	82.50	158.75	336.25
\$150,000	9.00	12.00	13.50	15.00	27.00	40.50	66.00	99.00	190.50	403.50
\$175,000	10.50	14.00	15.75	17.50	31.50	47.25	77.00	115.50	222.25	470.75
\$200,000	12.00	16.00	18.00	20.00	36.00	54.00	88.00	132.00	254.00	538.00
\$225,000	13.50	18.00	20.25	22.50	40.50	60.75	99.00	148.50	285.75	605.25
\$250,000	15.00	20.00	22.50	25.00	45.00	67.50	110.00	165.00	317.50	672.50
\$275,000	16.50	22.00	24.75	27.50	49.50	74.25	121.00	181.50	349.25	739.75
\$300,000	18.00	24.00	27.00	30.00	54.00	81.00	132.00	198.00	381.00	807.00

Coverage Amount	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$325,000	19.50	26.00	29.25	32.50	58.50	87.75	143.00	214.50	412.75	874.25
\$350,000	21.00	28.00	31.50	35.00	63.00	94.50	154.00	231.00	444.50	941.50
\$375,000	22.50	30.00	33.75	37.50	67.50	101.25	165.00	247.50	476.25	1,008.75
\$400,000	24.00	32.00	36.00	40.00	72.00	108.00	176.00	264.00	508.00	1,076.00
\$425,000	25.50	34.00	38.25	42.50	76.50	114.75	187.00	280.50	539.75	1,143.25
\$450,000	27.00	36.00	40.50	45.00	81.00	121.50	198.00	297.00	571.50	1,210.50
\$475,000	28.50	38.00	42.75	47.50	85.50	128.25	209.00	313.50	603.25	1,277.75
\$500,000	30.00	40.00	45.00	50.00	90.00	135.00	220.00	330.00	635.00	1,345.00
\$525,000	31.50	42.00	47.25	52.50	94.50	141.75	231.00	346.50	666.75	1,412.25
\$550,000	33.00	44.00	49.50	55.00	99.00	148.50	242.00	363.00	698.50	1,479.50
\$575,000	34.50	46.00	51.75	57.50	103.50	155.25	253.00	379.50	730.25	1,546.75
\$600,000	36.00	48.00	54.00	60.00	108.00	162.00	264.00	396.00	762.00	1,614.00

Spouse Rates

If you elect Dependents Life insurance for your spouse, use the following rates to determine the monthly premium for your coverages indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Coverage Amount	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$25,000	1.50	2.00	2.25	2.50	4.50	6.75	11.00	16.50	31.75	67.25
\$50,000	3.00	4.00	4.50	5.00	9.00	13.50	22.00	33.00	63.50	134.50
\$75,000	4.50	6.00	6.75	7.50	13.50	20.25	33.00	49.50	95.25	201.75
\$100,000	6.00	8.00	9.00	10.00	18.00	27.00	44.00	66.00	127.00	269.00
\$125,000	7.50	10.00	11.25	12.50	22.50	33.75	55.00	82.50	158.75	336.25
\$150,000	9.00	12.00	13.50	15.00	27.00	40.50	66.00	99.00	190.50	403.50
\$175,000	10.50	14.00	15.75	17.50	31.50	47.25	77.00	115.50	222.25	470.75
\$200,000	12.00	16.00	18.00	20.00	36.00	54.00	88.00	132.00	254.00	538.00
\$225,000	13.50	18.00	20.25	22.50	40.50	60.75	99.00	148.50	285.75	605.25
\$250,000	15.00	20.00	22.50	25.00	45.00	67.50	110.00	165.00	317.50	672.50
\$275,000	16.50	22.00	24.75	27.50	49.50	74.25	121.00	181.50	349.25	739.75
\$300,000	18.00	24.00	27.00	30.00	54.00	81.00	132.00	198.00	381.00	807.00

Child Rates

If you elect Dependents Life insurance for your eligible child(ren), your monthly premium is shown below regardless of the number of eligible children covered. Premiums for this coverage will be deducted directly from your paycheck.

Coverage Amount	Premium
\$5,000	0.56
\$10,000	1.12
\$15,000	1.68
\$20,000	2.24
\$25,000	2.80
\$30,000	3.36



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 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.

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GP899-LIFE, GP190-LIFE/A997/S399