

## PLAN 2 - XL2 Plan EXTRA GROUP TERM LIFE INSURANCE

We can help provide for your family when you can't.

Group Life insurance can help protect your family's finances if something happens to you. This coverage can help provide financial support and stability to your family if you pass away.

**Life insurance can help make things easier for the people you care about.**

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

Life insurance is an easy, responsible way to help your loved ones during a difficult time — and into the future.

### **What's at stake.**

A death might leave your family facing expenses they couldn't pay without your income. That could include extra costs for medical care or a funeral.

Life insurance may cover future expenses like:



**Tuition**



**Child Care**



**Housing Costs**



**Daily Living Expenses**

# Life Insurance - XL2 Plan

## How Much Can I Apply For?

Your combined Plan 2 (Extra) and Plan 3 (Voluntary) Life amounts cannot exceed the lesser of a) \$500,000, and b) 4 times your Annual Earnings.

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

The coverage amount for your spouse cannot exceed 50 percent of your Plan 2 (Extra) Life coverage.

The coverage amount for your child(ren) cannot exceed 50 percent of your Plan 2 (Extra) Life coverage.

## For You:

You may become insured for Plan 2 (Extra) Life insurance if your Employer elects to provide Plan 2 (Extra) Life insurance.

**Plan 2 (Extra):** 2 times your annual earnings

**Note:** If you are insured for Plan 2 (Extra) Life insurance, you may also become insured for Plan 3 (Voluntary) Life insurance. See the Plan 3 (Voluntary) Coverage Highlights for more information.

## For Your Dependents:

If you are insured for Plan 2 (Extra) Life insurance, you may apply for Plan 2 (Extra) Dependents Life insurance for your spouse and/or eligible child(ren).

One of the following options may be chosen:

### Option 1

**For Your Spouse:** \$10,000

**For Your Children:** \$2,000

### Option 2

**For Your Spouse:** \$20,000

**For Your Children:** \$5,000

### Option 3

**For Your Spouse:** \$30,000

**For Your Children:** \$6,000

### Option 4

**For Your Spouse:** \$40,000

**For Your Children:** \$8,000

### Option 5

**For Your Spouse:** \$50,000

**For Your Children:** \$10,000

## What Is The Guarantee Issue Amount?

Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions.

**For You:** Up to \$150,000

**For Your Spouse:** Up to \$50,000

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

## Additional Feature

### Accelerated Benefit

If you become terminally ill, you may be eligible to receive up to 80 percent of your combined Basic and Additional Life benefit to a maximum of \$500,000.

# How Much Your Coverage Costs

If you choose to purchase **Plan 2 (Extra) Life coverage** offered through NBA Benefit Plans, 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.

To determine your monthly premium use the calculator below.

Use this formula to estimate your monthly premium payment:

$$\frac{\text{Enter the amount of coverage.}}{\div 1000} = \text{Rate.} \times \text{This amount is an estimate of how much you would pay each month.} =$$

If you elect Plan 2 (Extra) coverage for yourself, you may buy Plan 2 (Extra) Dependent coverage for your spouse. Your spouse's monthly rate is shown in the following table. Use the same formula to calculate the premium that you used for yourself, but use your age and your spouse's rate.

Age (as of January 1)	Your Rate (Per \$1,000 of Total Coverage)	Your Spouse's Rate (Per \$1,000 of Total Coverage)
<30	\$0.035	\$0.066
30-34	\$0.041	\$0.068
35-39	\$0.056	\$0.093
40-44	\$0.091	\$0.141
45-49	\$0.125	\$0.190
50-54	\$0.168	\$0.285
55-59	\$0.230	\$0.465
60-64	\$0.425	\$0.792
65-69	\$0.815	\$1.260
70+	\$1.352	\$1.260

## How Much Life Insurance Do You Need?

After a death in the family, there are many unexpected expenses.

Your benefits could help your family pay for:

- Outstanding debt
- Your child(ren)'s education
- Burial expenses
- Daily expenses
- Medical bills

To estimate your insurance needs, you'll need to consider your unique circumstances. Use our online calculator at [standard.com/life/needs](http://standard.com/life/needs).

## For Your Child(ren):

If you buy Dependents Life for your child(ren), your monthly premium is shown in the following table, no matter how many children you're covering.

Option	Coverage Amount	Monthly Cost Per Member
Option 1	\$2,000	\$0.10
Option 2	\$5,000	\$0.25
Option 3	\$6,000	\$0.30
Option 4	\$8,000	\$0.40
Option 5	\$10,000	\$0.50

## Important Details

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

### Eligibility Requirements

To be eligible for coverage, you must be:

- An active employee of any bank which is participating in the NBA Benefit Plans, regularly working at least 17.5 hours per week

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

If you buy Plan 2 (Extra) Life insurance for yourself, you may also buy Plan 2 (Extra) Life coverage for your eligible child(ren) and/or spouse. This is called Dependents Life insurance.

You can choose to cover your spouse, meaning a person to whom you are legally married.

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

- Your child cannot be insured by more than one employee.
- Your spouse or child(ren) must not be full-time member(s) of the armed forces.
- You cannot be insured as both an individual and a dependent.

### Medical Underwriting Approval

Required for:

- Coverage amounts higher than the guarantee issue amount
- All late applications (applying 31 days after becoming eligible)
- Requests for coverage increases
- Reinstatements
- Employees eligible but not insured under the prior life insurance plan. Note: See the Open Enrollment section for exceptions

Visit [myeoi.standard.com/760844](https://myeoi.standard.com/760844) to submit a medical history statement online.

### Coverage Effective Date

To become insured, you must:

- Meet the eligibility requirements listed in the previous sections
- Serve an eligibility waiting period\*
- Receive medical underwriting approval (if applicable)
- Apply for coverage and agree to pay premium, and
- Be actively at work (able to perform all normal duties of your job) on the day before the insurance is scheduled to be effective

\*You are eligible on the later of:

1. The effective date of your Employer's participation under the Group Policy; and
2. The date you complete the waiting period for eligibility as required by your Employer

If you are not actively at work on the day before the scheduled effective date of your insurance, including any Dependents Life insurance coverages, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee. You may have a different effective date for Life coverage below and above the guarantee issue amount. Contact your human resources representative or plan administrator for further information about the applicable coverage effective date for your insurance, including Dependents Life insurance.

### Age Reductions

Your coverage amount does not reduce due to age unless your insurance is subject to termination under the Waiver Of Premium provision. Dependents Life insurance for your spouse will not reduce because of your age.

### Waiver of Premium

Your premiums may be waived if you:

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

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

### Portability

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

**Conversion**

If your insurance reduces or ends, you may be eligible to convert your existing Life insurance to an individual life insurance policy without submitting proof of good health.

**Exclusions**

Subject to state variations, you and your spouse are not covered for death resulting from suicide or other intentionally self-inflicted injury, while sane or insane. The amount payable will exclude amounts that have not been continuously in effect for at least two years on the date of death.

**When Your Insurance Ends**

Your insurance ends automatically when any of the following occur:

- The date the last period ends for which a premium was paid
- The date your employment terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date the group policy, or your employer's coverage under the group policy, terminates
- For each elective insurance coverage, the date that coverage terminates under the group policy

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

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

**Group Insurance Certificate**

If coverage becomes effective, and you become insured, you may 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 presented in this summary does not modify the group policy, certificate or the insurance coverage in any way.

For purposes of coverage information provided in the Extra Group Term Life Insurance document, "NBA Benefit Plans" means "Nebraska Bankers Association Voluntary Employees' Beneficiary Association", who is Policyholder.



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](http://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,  
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