



The Standard[®]
Positively different.

Voluntary Life Insurance

FOR EMPLOYEES OF FAYETTE COUNTY PUBLIC SCHOOLS

Answers to your questions about coverage from Standard Insurance Company



STANDARD INSURANCE COMPANY

About This Booklet

This booklet is designed to answer some common questions about the group Voluntary Life insurance coverage offered to the eligible employees in your company. It is not intended to provide a detailed description of the coverage. Refer to the plan certificate for additional details of the plan.

If coverage becomes effective and you become insured, you will receive a 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 this booklet nor the certificate modify the *group policy* or the insurance coverage in any way.

Please note that defined terms and provisions from the *group policy* are italicized in this booklet.

Features of the group Voluntary Life coverage may vary by state.



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Voluntary Life Insurance Features

It's not easy to think about, but what if you suddenly died? Your family could be faced with house payments, unpaid bills, childcare and other expenses just to maintain their current lifestyle. Could your family live without your income? Would your family be able to cover the medical expenses associated with a terminal illness or with burial and funeral expenses?

You make a great investment in your family. You spend time with them. You care for them. You work for them. And if you're not there for them, you want them protected. By sponsoring group Voluntary Life insurance from Standard Insurance Company, your *employer* offers you an excellent opportunity to help protect your loved ones.

The advantages to you and your loved ones include:

- **Choice** – You decide how much coverage you need from the range of amounts available.
- **Flexibility** – If your needs change, you may request to change the amount of coverage. Increases in coverage may require *evidence of insurability*.
- **Convenience** – With premiums deducted directly from your paycheck, you don't have to worry about mailing monthly payments.
- **Peace of Mind** – You can take comfort and satisfaction in knowing that you have done something positive for your family's future.

Commonly Asked Questions

The following information provides details to give you a better understanding of the group Voluntary Life insurance available from The Standard. Please also refer to the plan certificate for additional details of the plan.

When does my insurance go into effect?

The effective date of your coverage depends upon when you become a *member*, when you apply and whether you are required to provide *evidence of insurability*.

If you are not required to provide *evidence of insurability*, if you apply and agree to pay premiums, your Voluntary Life coverage becomes effective on:

- The date you become eligible if you apply on or before that date; or
- The date you apply if you apply within 31 days after you become eligible.

Refer to the plan certificate for information on the *eligibility waiting period* and when you become eligible for insurance.

If you are required to provide *evidence of insurability*, if you apply and agree to pay premiums, your Voluntary Life coverage becomes effective on the date The Standard approves your *evidence of insurability*.

In every case, you must meet the *active work* requirement before your insurance becomes effective.

What is the active work requirement?

Active work means performing with reasonable continuity, the material duties of your own occupation at your *employer's* usual place of business. You must be capable of *active work* on the day before the scheduled effective date of your insurance or your insurance will not become effective as scheduled.

How much coverage do I need?

It can be difficult to determine the amount of insurance you need. Each family has its own unique set of circumstances, combined with needs that may arise with the unexpected loss of life.

Use the worksheet on Page 3 to guide you in calculating the amount of group life insurance you may need. The final total is the amount of life insurance you might want to consider applying for to meet your obligations. Once you determine how much coverage you need, complete the Enrollment Form in your enrollment packet and submit it to your human resources department.

How much coverage can I purchase?

You may elect Voluntary Life insurance coverage for yourself in increments of \$10,000 up to the lesser of 5 times your *annual earnings* and \$500,000.

If you wish to become insured for an amount in excess of \$150,000, the excess will be subject to medical underwriting approval.

You may also elect Dependents Life insurance coverage for your *spouse*. This coverage is available in units of \$5,000 to a maximum of \$500,000, but not to exceed 100 percent of your Voluntary Life coverage.

If you elect an amount for your *spouse* greater than \$25,000, the excess will be subject to medical underwriting approval.

You may elect \$5,000 or \$10,000 of Dependents Life insurance for your eligible *children*. This amount may not exceed 50 percent of your Voluntary Life coverage.

In order to purchase coverage for your *dependents*, you must be covered for Voluntary Life insurance.

Note: The premium paid for your *child* coverage is based on the cost of coverage for one *child*, regardless of how many *children* you have.

What is Accidental Death and Dismemberment (AD&D)?

Voluntary Life insurance includes a matching Accidental Death and Dismemberment (AD&D) coverage in which you or your beneficiaries may be eligible to receive an additional amount in the event of death or dismemberment as a result of an accident. The amount of this AD&D Insurance Benefit for loss of life is equal to the amount payable for Life insurance coverage on the date of the accident. See the plan certificate for additional features and exclusions.

	You	Your Spouse
Immediate Needs		
Medical and hospital expenses	\$ _____	\$ _____
Funeral/Burial expenses	_____	_____
Taxes		
Federal and state income taxes	_____	_____
Property taxes	_____	_____
Federal and state estate taxes	_____	_____
Loans/Debts requiring payment upon death	_____	_____
Long Term Needs		
Mortgage	\$ _____	\$ _____
Debts (credit cards, car and student loans, etc.)	_____	_____
Educational/Vocational fund	_____	_____
Childcare expenses	_____	_____
Emergency fund for unforeseen expenses	_____	_____
Income Replacement		
<i>Consider the income needed to support your family and the number of years that support is needed.</i>	\$ _____	\$ _____
Total Income Needs		
<i>Add together all of the above.</i>	\$ _____	\$ _____
Available Resources		
Existing life insurance coverage	\$ _____	\$ _____
Other assets such as 401(k), stocks, bonds, etc.	_____	_____
Total Available Resources		
<i>Add together all of your available resources.</i>	\$ _____	\$ _____
Total Life Insurance Needed		
<i>Subtract the amount of your total available resources from your total income needs.</i>	\$ _____	\$ _____

Will I have to provide information regarding my medical history?

If you apply for Voluntary Life insurance within 31 days of becoming eligible to apply and meet the *active work* requirement, you will automatically qualify for up to a set amount of insurance coverage called the *guarantee issue amount*. This means that you will not have to answer medical questions to purchase coverage up to this amount.

If you apply more than 31 days after becoming eligible to apply or if you determine that you need more insurance than the *guarantee issue amount*, satisfactory *evidence of insurability* is required. You will need to complete and submit a Medical History Statement. In some cases, we may request additional medical information or a physical exam.

However, you may wait until the next annual enrollment and only coverage over the *guarantee issue amount* will be subject to *evidence of insurability*.

Evidence of insurability is also required for reinstatement of terminated coverage and for *members* eligible but not insured under prior life insurance plans.

What is my insurance age?

Your rate is based on your insurance age. To figure your insurance age, determine what your age will be when this coverage becomes effective on January 1, 2010. For rating purposes you and your *spouse* are assumed to be the same age.

Note: Your rate may increase on January 1st following the year you move into the next higher age band.

How are benefits paid?

Our goal is to make the claims experience as easy as possible and to pay benefits to entitled individuals in a timely, accurate and sensitive manner. Depending upon the approved claim amount, The Standard may either issue a check to your designated *beneficiary* as a lump-sum payment or deposit the funds into a Standard Secure Access account.

With Standard Secure Access – a convenient, no fee, interest-bearing draft account, each *beneficiary* receives a personalized checkbook and has complete control of the account. *Beneficiaries* can write checks as needed or for the full amount. This arrangement allows *beneficiaries* to earn competitive interest rates on their benefits while they take the time to consider financial decisions and evaluate their choices.

Will insurance benefits be reduced as I grow older?

Typically, insurance benefits are reduced to a percentage of the original amount.

Insurance benefits will reduce to a percentage of the original amount when you or your *spouse* reach the following ages:

Age	Insurance amount reduces to:
70-74	65 percent of the original amount
75-79	45 percent of the original amount
80+	30 percent of the original amount

What happens if I become totally disabled and can't work?

If you become *totally disabled* while you are insured, insurance may be continued without premium. Refer to the plan certificate for additional information.

What happens if I become terminally ill?

Under the *Accelerated Benefit* provision, you may be eligible to receive up to 75 percent, to a maximum of \$500,000, of your Voluntary Life insurance coverage if you become terminally ill, have a life expectancy of less than 12 months and meet other eligibility requirements. This benefit allows you to use the proceeds as you desire – whether to cover medical expenses or to maintain your quality of life. The amount paid under the *Accelerated Benefit* provision including an interest charge would reduce the amount of Voluntary Life insurance payable upon your death. However, to help protect your *beneficiaries*, The Standard would pay at least 10 percent of the original Voluntary Life coverage amount at that time.

Are there any other benefits with the group Voluntary Life coverage from The Standard?

The Standard includes a travel assistance program¹ that provides a full range of 24-hour medical, legal and travel assistance services to you and your *dependents* when you travel more than 100 miles from home or in a foreign country.

The Standard also pays an additional benefit, called the *Repatriation Benefit*, if you die more than 200 miles from your primary place of residence. The Standard will pay for expenses, up to a benefit maximum, incurred to transport your body to a mortuary near your primary place of residence. (This benefit is not available in Maryland) Please refer to the plan certificate for more details and benefit amounts.

What are the exclusions?

Please see the plan certificate for plan exclusions.

When does coverage end?

Voluntary Life coverage ends automatically on the earliest of the following:

- The last day of the last period for which you make a premium contribution (except if premiums are waived while totally *disabled*, if applicable)
- The date your employment terminates
- The date the *group policy* terminates
- The date you cease to be a *member*; however, insurance may continue for limited periods under certain circumstances
- The date your *employer* ceases to participate under the *group policy*, if applicable.

When does dependent coverage end?

Any *spouse* and *child* coverage will automatically end on the earliest of the following:

- Five months after the date you die
- The date your life insurance ends
- The date Dependents' life insurance terminates under the *group policy*
- The date your *employer's* coverage under the *group policy* for Dependents' Life insurance terminates
- The date the last period ends for which a premium was paid for your Dependents' Life insurance
- When the *dependent* ceases to be an eligible *dependent*
- For your *spouse*, the date of your divorce
- For a *child* who is *disabled*, 90 days after we mail you a proof of disability request, if proof is not given

If my Voluntary Life insurance ends or reduces, may I convert to an individual policy?

If your Voluntary Life insurance from The Standard ends or reduces, you may be able to convert the terminated coverage to an individual life insurance policy without providing *evidence of insurability*.

¹ Provided through an agreement with MEDEX® Assistance Corporation.

May I buy group life coverage after I leave my employer?

If you leave your employment, you may be able to buy group life insurance from The Standard through the *Portability* provision, assuming you meet the eligibility requirements. Please refer to the plan certificate for the amounts you may be able to purchase. This option is not available in all states.

How do I apply?

To apply for the Voluntary Life insurance coverage, complete the Enrollment Form in your enrollment packet, place it in a confidential envelope and submit it to your human resources department.

You may apply at any time, but remember if you apply more than 31 days after becoming eligible, *evidence of insurability* is required. Coverage subject to *evidence of insurability* is not effective until approved by The Standard.

If you currently are enrolled for life coverage and a payroll deduction is coming out of your check, you do not need to re-enroll unless you want to change coverage:

For *members* and *spouses* who enroll during the enrollment period for coverage effective January 1, 2010 or who enroll within 31 days of initial eligibility, each subsequent enrollment period you will be able to elect Voluntary Life coverage for you and your *spouse* up to the *guarantee issue amount* without having to provide satisfactory *evidence of insurability*. Voluntary Life insurance coverage over the *guarantee issue amounts* will be subject to medical underwriting. The suicide exclusion will apply to any increase in coverage.

If you do not enroll during the enrollment for coverage effective January 1, 2010 or within 31 days of the initial eligibility date, you will be required to supply satisfactory medical evidence in order to insure you or your *dependents*.

Refer to the plan certificate for additional details.

Additional questions?

If you have any additional questions, please contact your human resources representative.

Employee/Spouse Rates per Pay Period (24 Pay Periods) - Additional Life and AD&D Coverage

Coverage Amount	Employee's Age as of January 1											
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75-79*	80+*
\$20,000	0.55	0.75	0.95	1.35	2.05	2.95	5.05	6.15	10.15	6.60	4.57	3.05
\$25,000	0.69	0.94	1.19	1.69	2.56	3.69	6.31	7.69	12.69	8.25	5.71	3.81
\$30,000	0.83	1.13	1.43	2.03	3.08	4.43	7.58	9.23	15.23	9.90	6.85	4.57
\$35,000	0.96	1.31	1.66	2.36	3.59	5.16	8.84	10.76	17.76	11.55	7.99	5.33
\$40,000	1.10	1.50	1.90	2.70	4.10	5.90	10.10	12.30	20.30	13.20	9.14	6.09
\$45,000	1.24	1.69	2.14	3.04	4.61	6.64	11.36	13.84	22.84	14.84	10.28	6.85
\$50,000	1.38	1.88	2.38	3.38	5.13	7.38	12.63	15.38	25.38	16.49	11.42	7.61
\$55,000	1.51	2.06	2.61	3.71	5.64	8.11	13.89	16.91	27.91	18.14	12.56	8.37
\$60,000	1.65	2.25	2.85	4.05	6.15	8.85	15.15	18.45	30.45	19.79	13.70	9.14
\$65,000	1.79	2.44	3.09	4.39	6.66	9.59	16.41	19.99	32.99	21.44	14.84	9.90
\$70,000	1.93	2.63	3.33	4.73	7.18	10.33	17.68	21.53	35.53	23.09	15.99	10.66
\$75,000	2.06	2.81	3.56	5.06	7.69	11.06	18.94	23.06	38.06	24.74	17.13	11.42
\$80,000	2.20	3.00	3.80	5.40	8.20	11.80	20.20	24.60	40.60	26.39	18.27	12.18
\$85,000	2.34	3.19	4.04	5.74	8.71	12.54	21.46	26.14	43.14	28.04	19.41	12.94
\$90,000	2.48	3.38	4.28	6.08	9.23	13.28	22.73	27.68	45.68	29.69	20.55	13.70
\$95,000	2.61	3.56	4.51	6.41	9.74	14.01	23.99	29.21	48.21	31.34	21.70	14.46
\$100,000	2.75	3.75	4.75	6.75	10.25	14.75	25.25	30.75	50.75	32.99	22.84	15.23
\$105,000	2.89	3.94	4.99	7.09	10.76	15.49	26.51	32.29	53.29	34.64	23.98	15.99
\$110,000	3.03	4.13	5.23	7.43	11.28	16.23	27.78	33.83	55.83	36.29	25.12	16.75
\$115,000	3.16	4.31	5.46	7.76	11.79	16.96	29.04	35.36	58.36	37.94	26.26	17.51
\$120,000	3.30	4.50	5.70	8.10	12.30	17.70	30.30	36.90	60.90	39.59	27.41	18.27
\$125,000	3.44	4.69	5.94	8.44	12.81	18.44	31.56	38.44	63.44	41.23	28.55	19.03
\$130,000	3.58	4.88	6.18	8.78	13.33	19.18	32.83	39.98	65.98	42.88	29.69	19.79
\$135,000	3.71	5.06	6.41	9.11	13.84	19.91	34.09	41.51	68.51	44.53	30.83	20.55
\$140,000	3.85	5.25	6.65	9.45	14.35	20.65	35.35	43.05	71.05	46.18	31.97	21.32
\$145,000	3.99	5.44	6.89	9.79	14.86	21.39	36.61	44.59	73.59	47.83	33.11	22.08
\$150,000	4.13	5.63	7.13	10.13	15.38	22.13	37.88	46.13	76.13	49.48	34.26	22.84
\$155,000	4.26	5.81	7.36	10.46	15.89	22.86	39.14	47.66	78.66	51.13	35.40	23.60
\$160,000	4.40	6.00	7.60	10.80	16.40	23.60	40.40	49.20	81.20	52.78	36.54	24.36
\$165,000	4.54	6.19	7.84	11.14	16.91	24.34	41.66	50.74	83.74	54.43	37.68	25.12
\$170,000	4.68	6.38	8.08	11.48	17.43	25.08	42.93	52.28	86.28	56.08	38.82	25.88
\$175,000	4.81	6.56	8.31	11.81	17.94	25.81	44.19	53.81	88.81	57.73	39.97	26.64
\$180,000	4.95	6.75	8.55	12.15	18.45	26.55	45.45	55.35	91.35	59.38	41.11	27.41
\$185,000	5.09	6.94	8.79	12.49	18.96	27.29	46.71	56.89	93.89	61.03	42.25	28.17
\$190,000	5.23	7.13	9.03	12.83	19.48	28.03	47.98	58.43	96.43	62.68	43.39	28.93
\$195,000	5.36	7.31	9.26	13.16	19.99	28.76	49.24	59.96	98.96	64.33	44.53	29.69
\$200,000	5.50	7.50	9.50	13.50	20.50	29.50	50.50	61.50	101.50	65.98	45.68	30.45
\$205,000	5.64	7.69	9.74	13.84	21.01	30.24	51.76	63.04	104.04	67.62	46.82	31.21
\$210,000	5.78	7.88	9.98	14.18	21.53	30.98	53.03	64.58	106.58	69.27	47.96	31.97
\$215,000	5.91	8.06	10.21	14.51	22.04	31.71	54.29	66.11	109.11	70.92	49.10	32.73
\$220,000	6.05	8.25	10.45	14.85	22.55	32.45	55.55	67.65	111.65	72.57	50.24	33.50
\$225,000	6.19	8.44	10.69	15.19	23.06	33.19	56.81	69.19	114.19	74.22	51.38	34.26
\$230,000	6.33	8.63	10.93	15.53	23.58	33.93	58.08	70.73	116.73	75.87	52.53	35.02
\$235,000	6.46	8.81	11.16	15.86	24.09	34.66	59.34	72.26	119.26	77.52	53.67	35.78
\$240,000	6.60	9.00	11.40	16.20	24.60	35.40	60.60	73.80	121.80	79.17	54.81	36.54
\$245,000	6.74	9.19	11.64	16.54	25.11	36.14	61.86	75.34	124.34	80.82	55.95	37.30
\$250,000	6.88	9.38	11.88	16.88	25.63	36.88	63.13	76.88	126.88	82.47	57.09	38.06
\$255,000	7.01	9.56	12.11	17.21	26.14	37.61	64.39	78.41	129.41	84.12	58.24	38.82
\$260,000	7.15	9.75	12.35	17.55	26.65	38.35	65.65	79.95	131.95	85.77	59.38	39.59
\$265,000	7.29	9.94	12.59	17.89	27.16	39.09	66.91	81.49	134.49	87.42	60.52	40.35
\$270,000	7.43	10.13	12.83	18.23	27.68	39.83	68.18	83.03	137.03	89.07	61.66	41.11
\$275,000	7.56	10.31	13.06	18.56	28.19	40.56	69.44	84.56	139.56	90.72	62.80	41.87
\$280,000	7.70	10.50	13.30	18.90	28.70	41.30	70.70	86.10	142.10	92.37	63.95	42.63
\$285,000	7.84	10.69	13.54	19.24	29.21	42.04	71.96	87.64	144.64	94.01	65.09	43.39
\$290,000	7.98	10.88	13.78	19.58	29.73	42.78	73.23	89.18	147.18	95.66	66.23	44.15
\$295,000	8.11	11.06	14.01	19.91	30.24	43.51	74.49	90.71	149.71	97.31	67.37	44.91
\$300,000	8.25	11.25	14.25	20.25	30.75	44.25	75.75	92.25	152.25	98.96	68.51	45.68

Coverage Amount	Employee's Age as of January 1											
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75-79*	80+*
\$305,000	8.39	11.44	14.49	20.59	31.26	44.99	77.01	93.79	154.79	100.61	69.65	46.44
\$310,000	8.53	11.63	14.73	20.93	31.78	45.73	78.28	95.33	157.33	102.26	70.80	47.20
\$315,000	8.66	11.81	14.96	21.26	32.29	46.46	79.54	96.86	159.86	103.91	71.94	47.96
\$320,000	8.80	12.00	15.20	21.60	32.80	47.20	80.80	98.40	162.40	105.56	73.08	48.72
\$325,000	8.94	12.19	15.44	21.94	33.31	47.94	82.06	99.94	164.94	107.21	74.22	49.48
\$330,000	9.08	12.38	15.68	22.28	33.83	48.68	83.33	101.48	167.48	108.86	75.36	50.24
\$335,000	9.21	12.56	15.91	22.61	34.34	49.41	84.59	103.01	170.01	110.51	76.51	51.00
\$340,000	9.35	12.75	16.15	22.95	34.85	50.15	85.85	104.55	172.55	112.16	77.65	51.77
\$345,000	9.49	12.94	16.39	23.29	35.36	50.89	87.11	106.09	175.09	113.81	78.79	52.53
\$350,000	9.63	13.13	16.63	23.63	35.88	51.63	88.38	107.63	177.63	115.46	79.93	53.29
\$355,000	9.76	13.31	16.86	23.96	36.39	52.36	89.64	109.16	180.16	117.11	81.07	54.05
\$360,000	9.90	13.50	17.10	24.30	36.90	53.10	90.90	110.70	182.70	118.76	82.22	54.81
\$365,000	10.04	13.69	17.34	24.64	37.41	53.84	92.16	112.24	185.24	120.40	83.36	55.57
\$370,000	10.18	13.88	17.58	24.98	37.93	54.58	93.43	113.78	187.78	122.05	84.50	56.33
\$375,000	10.31	14.06	17.81	25.31	38.44	55.31	94.69	115.31	190.31	123.70	85.64	57.09
\$380,000	10.45	14.25	18.05	25.65	38.95	56.05	95.95	116.85	192.85	125.35	86.78	57.86
\$385,000	10.59	14.44	18.29	25.99	39.46	56.79	97.21	118.39	195.39	127.00	87.92	58.62
\$390,000	10.73	14.63	18.53	26.33	39.98	57.53	98.48	119.93	197.93	128.65	89.07	59.38
\$395,000	10.86	14.81	18.76	26.66	40.49	58.26	99.74	121.46	200.46	130.30	90.21	60.14
\$400,000	11.00	15.00	19.00	27.00	41.00	59.00	101.00	123.00	203.00	131.95	91.35	60.90
\$405,000	11.14	15.19	19.24	27.34	41.51	59.74	102.26	124.54	205.54	133.60	92.49	61.66
\$410,000	11.28	15.38	19.48	27.68	42.03	60.48	103.53	126.08	208.08	135.25	93.63	62.42
\$415,000	11.41	15.56	19.71	28.01	42.54	61.21	104.79	127.61	210.61	136.90	94.78	63.18
\$420,000	11.55	15.75	19.95	28.35	43.05	61.95	106.05	129.15	213.15	138.55	95.92	63.95
\$425,000	11.69	15.94	20.19	28.69	43.56	62.69	107.31	130.69	215.69	140.20	97.06	64.71
\$430,000	11.83	16.13	20.43	29.03	44.08	63.43	108.58	132.23	218.23	141.85	98.20	65.47
\$435,000	11.96	16.31	20.66	29.36	44.59	64.16	109.84	133.76	220.76	143.50	99.34	66.23
\$440,000	12.10	16.50	20.90	29.70	45.10	64.90	111.10	135.30	223.30	145.15	100.49	66.99
\$445,000	12.24	16.69	21.14	30.04	45.61	65.64	112.36	136.84	225.84	146.79	101.63	67.75
\$450,000	12.38	16.88	21.38	30.38	46.13	66.38	113.63	138.38	228.38	148.44	102.77	68.51
\$455,000	12.51	17.06	21.61	30.71	46.64	67.11	114.89	139.91	230.91	150.09	103.91	69.27
\$460,000	12.65	17.25	21.85	31.05	47.15	67.85	116.15	141.45	233.45	151.74	105.05	70.04
\$465,000	12.79	17.44	22.09	31.39	47.66	68.59	117.41	142.99	235.99	153.39	106.19	70.80
\$470,000	12.93	17.63	22.33	31.73	48.18	69.33	118.68	144.53	238.53	155.04	107.34	71.56
\$475,000	13.06	17.81	22.56	32.06	48.69	70.06	119.94	146.06	241.06	156.69	108.48	72.32
\$480,000	13.20	18.00	22.80	32.40	49.20	70.80	121.20	147.60	243.60	158.34	109.62	73.08
\$485,000	13.34	18.19	23.04	32.74	49.71	71.54	122.46	149.14	246.14	159.99	110.76	73.84
\$490,000	13.48	18.38	23.28	33.08	50.23	72.28	123.73	150.68	248.68	161.64	111.90	74.60
\$495,000	13.61	18.56	23.51	33.41	50.74	73.01	124.99	152.21	251.21	163.29	113.05	75.36
\$500,000	13.75	18.75	23.75	33.75	51.25	73.75	126.25	153.75	253.75	164.94	114.19	76.13

* Coverage amounts for ages 70 and over reduce due to age reduction (see Age Reductions section).

Coverage Amount	Dependent Rates per Pay Period (24 Pay Periods)
\$5,000	0.81
\$10,000	0.95

Employee/Spouse Rates per Pay Period (18 Pay Periods) - Additional Life and AD&D Coverage

Coverage Amount	Employee's Age as of January 1											
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75-79*	80+*
\$20,000	0.73	1.00	1.27	1.80	2.73	3.93	6.73	8.20	13.53	8.80	6.09	4.06
\$25,000	0.92	1.25	1.58	2.25	3.42	4.92	8.42	10.25	16.92	11.00	7.61	5.08
\$30,000	1.10	1.50	1.90	2.70	4.10	5.90	10.10	12.30	20.30	13.20	9.14	6.09
\$35,000	1.28	1.75	2.22	3.15	4.78	6.88	11.78	14.35	23.68	15.39	10.66	7.11
\$40,000	1.47	2.00	2.53	3.60	5.47	7.87	13.47	16.40	27.07	17.59	12.18	8.12
\$45,000	1.65	2.25	2.85	4.05	6.15	8.85	15.15	18.45	30.45	19.79	13.70	9.14
\$50,000	1.83	2.50	3.17	4.50	6.83	9.83	16.83	20.50	33.83	21.99	15.23	10.15
\$55,000	2.02	2.75	3.48	4.95	7.52	10.82	18.52	22.55	37.22	24.19	16.75	11.17
\$60,000	2.20	3.00	3.80	5.40	8.20	11.80	20.20	24.60	40.60	26.39	18.27	12.18
\$65,000	2.38	3.25	4.12	5.85	8.88	12.78	21.88	26.65	43.98	28.59	19.79	13.20
\$70,000	2.57	3.50	4.43	6.30	9.57	13.77	23.57	28.70	47.37	30.79	21.32	14.21
\$75,000	2.75	3.75	4.75	6.75	10.25	14.75	25.25	30.75	50.75	32.99	22.84	15.23
\$80,000	2.93	4.00	5.07	7.20	10.93	15.73	26.93	32.80	54.13	35.19	24.36	16.24
\$85,000	3.12	4.25	5.38	7.65	11.62	16.72	28.62	34.85	57.52	37.39	25.88	17.26
\$90,000	3.30	4.50	5.70	8.10	12.30	17.70	30.30	36.90	60.90	39.59	27.41	18.27
\$95,000	3.48	4.75	6.02	8.55	12.98	18.68	31.98	38.95	64.28	41.78	28.93	19.29
\$100,000	3.67	5.00	6.33	9.00	13.67	19.67	33.67	41.00	67.67	43.98	30.45	20.30
\$105,000	3.85	5.25	6.65	9.45	14.35	20.65	35.35	43.05	71.05	46.18	31.97	21.32
\$110,000	4.03	5.50	6.97	9.90	15.03	21.63	37.03	45.10	74.43	48.38	33.50	22.33
\$115,000	4.22	5.75	7.28	10.35	15.72	22.62	38.72	47.15	77.82	50.58	35.02	23.35
\$120,000	4.40	6.00	7.60	10.80	16.40	23.60	40.40	49.20	81.20	52.78	36.54	24.36
\$125,000	4.58	6.25	7.92	11.25	17.08	24.58	42.08	51.25	84.58	54.98	38.06	25.38
\$130,000	4.77	6.50	8.23	11.70	17.77	25.57	43.77	53.30	87.97	57.18	39.59	26.39
\$135,000	4.95	6.75	8.55	12.15	18.45	26.55	45.45	55.35	91.35	59.38	41.11	27.41
\$140,000	5.13	7.00	8.87	12.60	19.13	27.53	47.13	57.40	94.73	61.58	42.63	28.42
\$145,000	5.32	7.25	9.18	13.05	19.82	28.52	48.82	59.45	98.12	63.78	44.15	29.44
\$150,000	5.50	7.50	9.50	13.50	20.50	29.50	50.50	61.50	101.50	65.98	45.68	30.45
\$155,000	5.68	7.75	9.82	13.95	21.18	30.48	52.18	63.55	104.88	68.17	47.20	31.47
\$160,000	5.87	8.00	10.13	14.40	21.87	31.47	53.87	65.60	108.27	70.37	48.72	32.48
\$165,000	6.05	8.25	10.45	14.85	22.55	32.45	55.55	67.65	111.65	72.57	50.24	33.50
\$170,000	6.23	8.50	10.77	15.30	23.23	33.43	57.23	69.70	115.03	74.77	51.77	34.51
\$175,000	6.42	8.75	11.08	15.75	23.92	34.42	58.92	71.75	118.42	76.97	53.29	35.53
\$180,000	6.60	9.00	11.40	16.20	24.60	35.40	60.60	73.80	121.80	79.17	54.81	36.54
\$185,000	6.78	9.25	11.72	16.65	25.28	36.38	62.28	75.85	125.18	81.37	56.33	37.56
\$190,000	6.97	9.50	12.03	17.10	25.97	37.37	63.97	77.90	128.57	83.57	57.86	38.57
\$195,000	7.15	9.75	12.35	17.55	26.65	38.35	65.65	79.95	131.95	85.77	59.38	39.59
\$200,000	7.33	10.00	12.67	18.00	27.33	39.33	67.33	82.00	135.33	87.97	60.90	40.60
\$205,000	7.52	10.25	12.98	18.45	28.02	40.32	69.02	84.05	138.72	90.17	62.42	41.62
\$210,000	7.70	10.50	13.30	18.90	28.70	41.30	70.70	86.10	142.10	92.37	63.95	42.63
\$215,000	7.88	10.75	13.62	19.35	29.38	42.28	72.38	88.15	145.48	94.56	65.47	43.65
\$220,000	8.07	11.00	13.93	19.80	30.07	43.27	74.07	90.20	148.87	96.76	66.99	44.66
\$225,000	8.25	11.25	14.25	20.25	30.75	44.25	75.75	92.25	152.25	98.96	68.51	45.68
\$230,000	8.43	11.50	14.57	20.70	31.43	45.23	77.43	94.30	155.63	101.16	70.04	46.69
\$235,000	8.62	11.75	14.88	21.15	32.12	46.22	79.12	96.35	159.02	103.36	71.56	47.71
\$240,000	8.80	12.00	15.20	21.60	32.80	47.20	80.80	98.40	162.40	105.56	73.08	48.72
\$245,000	8.98	12.25	15.52	22.05	33.48	48.18	82.48	100.45	165.78	107.76	74.60	49.74
\$250,000	9.17	12.50	15.83	22.50	34.17	49.17	84.17	102.50	169.17	109.96	76.13	50.75
\$255,000	9.35	12.75	16.15	22.95	34.85	50.15	85.85	104.55	172.55	112.16	77.65	51.77
\$260,000	9.53	13.00	16.47	23.40	35.53	51.13	87.53	106.60	175.93	114.36	79.17	52.78
\$265,000	9.72	13.25	16.78	23.85	36.22	52.12	89.22	108.65	179.32	116.56	80.69	53.80
\$270,000	9.90	13.50	17.10	24.30	36.90	53.10	90.90	110.70	182.70	118.76	82.22	54.81
\$275,000	10.08	13.75	17.42	24.75	37.58	54.08	92.58	112.75	186.08	120.95	83.74	55.83
\$280,000	10.27	14.00	17.73	25.20	38.27	55.07	94.27	114.80	189.47	123.15	85.26	56.84
\$285,000	10.45	14.25	18.05	25.65	38.95	56.05	95.95	116.85	192.85	125.35	86.78	57.86
\$290,000	10.63	14.50	18.37	26.10	39.63	57.03	97.63	118.90	196.23	127.55	88.31	58.87
\$295,000	10.82	14.75	18.68	26.55	40.32	58.02	99.32	120.95	199.62	129.75	89.83	59.89
\$300,000	11.00	15.00	19.00	27.00	41.00	59.00	101.00	123.00	203.00	131.95	91.35	60.90

Coverage Amount	Employee's Age as of January 1											
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*	70-74*	75-79*	80+*
\$305,000	11.18	15.25	19.32	27.45	41.68	59.98	102.68	125.05	206.38	134.15	92.87	61.92
\$310,000	11.37	15.50	19.63	27.90	42.37	60.97	104.37	127.10	209.77	136.35	94.40	62.93
\$315,000	11.55	15.75	19.95	28.35	43.05	61.95	106.05	129.15	213.15	138.55	95.92	63.95
\$320,000	11.73	16.00	20.27	28.80	43.73	62.93	107.73	131.20	216.53	140.75	97.44	64.96
\$325,000	11.92	16.25	20.58	29.25	44.42	63.92	109.42	133.25	219.92	142.95	98.96	65.98
\$330,000	12.10	16.50	20.90	29.70	45.10	64.90	111.10	135.30	223.30	145.15	100.49	66.99
\$335,000	12.28	16.75	21.22	30.15	45.78	65.88	112.78	137.35	226.68	147.34	102.01	68.01
\$340,000	12.47	17.00	21.53	30.60	46.47	66.87	114.47	139.40	230.07	149.54	103.53	69.02
\$345,000	12.65	17.25	21.85	31.05	47.15	67.85	116.15	141.45	233.45	151.74	105.05	70.04
\$350,000	12.83	17.50	22.17	31.50	47.83	68.83	117.83	143.50	236.83	153.94	106.58	71.05
\$355,000	13.02	17.75	22.48	31.95	48.52	69.82	119.52	145.55	240.22	156.14	108.10	72.07
\$360,000	13.20	18.00	22.80	32.40	49.20	70.80	121.20	147.60	243.60	158.34	109.62	73.08
\$365,000	13.38	18.25	23.12	32.85	49.88	71.78	122.88	149.65	246.98	160.54	111.14	74.10
\$370,000	13.57	18.50	23.43	33.30	50.57	72.77	124.57	151.70	250.37	162.74	112.67	75.11
\$375,000	13.75	18.75	23.75	33.75	51.25	73.75	126.25	153.75	253.75	164.94	114.19	76.13
\$380,000	13.93	19.00	24.07	34.20	51.93	74.73	127.93	155.80	257.13	167.14	115.71	77.14
\$385,000	14.12	19.25	24.38	34.65	52.62	75.72	129.62	157.85	260.52	169.34	117.23	78.16
\$390,000	14.30	19.50	24.70	35.10	53.30	76.70	131.30	159.90	263.90	171.54	118.76	79.17
\$395,000	14.48	19.75	25.02	35.55	53.98	77.68	132.98	161.95	267.28	173.73	120.28	80.19
\$400,000	14.67	20.00	25.33	36.00	54.67	78.67	134.67	164.00	270.67	175.93	121.80	81.20
\$405,000	14.85	20.25	25.65	36.45	55.35	79.65	136.35	166.05	274.05	178.13	123.32	82.22
\$410,000	15.03	20.50	25.97	36.90	56.03	80.63	138.03	168.10	277.43	180.33	124.85	83.23
\$415,000	15.22	20.75	26.28	37.35	56.72	81.62	139.72	170.15	280.82	182.53	126.37	84.25
\$420,000	15.40	21.00	26.60	37.80	57.40	82.60	141.40	172.20	284.20	184.73	127.89	85.26
\$425,000	15.58	21.25	26.92	38.25	58.08	83.58	143.08	174.25	287.58	186.93	129.41	86.28
\$430,000	15.77	21.50	27.23	38.70	58.77	84.57	144.77	176.30	290.97	189.13	130.94	87.29
\$435,000	15.95	21.75	27.55	39.15	59.45	85.55	146.45	178.35	294.35	191.33	132.46	88.31
\$440,000	16.13	22.00	27.87	39.60	60.13	86.53	148.13	180.40	297.73	193.53	133.98	89.32
\$445,000	16.32	22.25	28.18	40.05	60.82	87.52	149.82	182.45	301.12	195.73	135.50	90.34
\$450,000	16.50	22.50	28.50	40.50	61.50	88.50	151.50	184.50	304.50	197.93	137.03	91.35
\$455,000	16.68	22.75	28.82	40.95	62.18	89.48	153.18	186.55	307.88	200.12	138.55	92.37
\$460,000	16.87	23.00	29.13	41.40	62.87	90.47	154.87	188.60	311.27	202.32	140.07	93.38
\$465,000	17.05	23.25	29.45	41.85	63.55	91.45	156.55	190.65	314.65	204.52	141.59	94.40
\$470,000	17.23	23.50	29.77	42.30	64.23	92.43	158.23	192.70	318.03	206.72	143.12	95.41
\$475,000	17.42	23.75	30.08	42.75	64.92	93.42	159.92	194.75	321.42	208.92	144.64	96.43
\$480,000	17.60	24.00	30.40	43.20	65.60	94.40	161.60	196.80	324.80	211.12	146.16	97.44
\$485,000	17.78	24.25	30.72	43.65	66.28	95.38	163.28	198.85	328.18	213.32	147.68	98.46
\$490,000	17.97	24.50	31.03	44.10	66.97	96.37	164.97	200.90	331.57	215.52	149.21	99.47
\$495,000	18.15	24.75	31.35	44.55	67.65	97.35	166.65	202.95	334.95	217.72	150.73	100.49
\$500,000	18.33	25.00	31.67	45.00	68.33	98.33	168.33	205.00	338.33	219.92	152.25	101.50

* Coverage amounts for ages 70 and over reduce due to age reduction (see Age Reductions section).

Coverage Amount	Dependent Rates per Pay Period (18 Pay Periods)
\$5,000	1.08
\$10,000	1.27

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