



## GROUP ADDITIONAL LIFE INSURANCE

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

Group Additional 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.

**Additional 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.

You're covered under Basic Life insurance if you take no action, provided you meet the eligibility requirements. But if Basic Life insurance doesn't meet your needs, you can apply for additional coverage. **Plan now to help your family cover future expenses like:**



**Tuition**



**Child Care**



**Housing Costs**



**Daily Living Expenses**

## Life Insurance

### How Much Can I Apply For?

**For You:**

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

**For Your Spouse:**

\$10,000-\$150,000 in increments of \$10,000

**For Your Children:**

\$5,000 - \$10,000 in increments of \$5,000

### 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 100,000

**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 or your dependents 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.

## Annual Enrollment

**For You.** During Franklin County Board of Commissioners' annual open enrollment period, if you are currently enrolled in Additional Life you may elect to increase your coverage amount by one unit (\$10,000) each year, without having to submit evidence of insurability.

**For Your Spouse.** During Franklin County Board of Commissioners' annual open enrollment period, if your spouse is currently enrolled in Dependents Life you may elect to increase your coverage amount by one unit (\$10,000) each year, without having to submit evidence of insurability.

# How Much Your Coverage Costs

Your Basic Life insurance is paid for by Franklin County Board of Commissioners. 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.

If you buy coverage for your spouse, your monthly rate is shown in the following table. Use the same formula to calculate the premium that you used for yourself, but use your spouse's age and your spouse's rate.

Age of member on last January 1	Your Rate (Per \$1,000 of Total Coverage)	Age of Spouse on Last January 1	Your Spouse's Rate (Per \$1,000 of Total Coverage)
<24	\$0.050	<24	\$0.050
25-29	\$0.060	25-29	\$0.060
30-34	\$0.067	30-34	\$0.067
35-39	\$0.072	35-39	\$0.072
40-44	\$0.100	40-44	\$0.100
45-49	\$0.150	45-49	\$0.150
50-54	\$0.230	50-54	\$0.230
55-59	\$0.430	55-59	\$0.430
60-64	\$0.660	60-64	\$0.660
65-69	\$1.034	65-69	\$1.034
70+	\$2.060	70+	\$2.060

If you buy Dependents Life coverage for your child(ren), your monthly rate is \$0.130 per \$1,000 of Dependents Life Insurance for each member electing Dependents Life Insurance for their children, regardless of the number of children covered.

To estimate your monthly premium, use the calculator below.

[Use this formula to estimate your monthly premium payment:](#)

$$\frac{\text{Enter the amount of coverage you are requesting (see benefit amounts on page 2)}}{\div 1000} = \text{_____} \times \frac{\text{Enter your rate from the rate table.}}{\text{_____}} = \text{_____}$$

This amount is an estimate of how much you would pay each month.

## 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).

## 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 coverage can become effective. If this requirement is not met, this plan will not become effective. To be eligible for coverage, you must be:

- Insured for Basic Life insurance through The Standard
- You are a Member if you are one of the following:
  1. An active employee of the Employer who is eligible for the Employer-sponsored medical plan, other than an elected or appointed official, board of director, trustee, public safety officer or executive director who is regularly working at least 30 hours each week; or
  2. An active elected or appointed official, board of director, trustee, public safety officer or executive director of the Employer who is eligible for the Employer-sponsored medical plan and regularly working at least 10 hours each week.
- **Class 1:** Franklin County Children's Services executive director
- **Class 2:** Franklin County and Prairie Township Members, including elected officials and Court of Appeals non-elected officials
- **Class 3:** Human services department of Pickaway County Members, including elected officials
- **Class 4:** All other Pickaway County Members and Pickaway County Board of DD Members, including elected officials, other than Senior Center Members
- **Class 5:** City of Grandview Heights Members, including elected officials
- **Class 6:** FOP Capital City Lodge Franklin County Sheriff Members
- **Class 7:** Jefferson Township elected officials
- **Class 8:** All other Jefferson Township Members

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

You may buy Life coverage for your eligible child(ren) and/or spouse. This is called Dependents Life insurance.

You can choose to cover your spouse, meaning a person to whom you are legally married, or your domestic partner as recognized by law.

You may also choose to cover your child. Child means your child from live birth through the end of the month in which they turn 26. Please note:

- Your child can be insured by more than one employee.
- Your spouse or child(ren) must not be a full-time member(s) of the armed forces.

- You can be insured as both an individual and a dependent.

### Medical Underwriting Approval

Required for:

- Coverage amounts higher than the guarantee issue amount, other than a \$10,000 increase during your Employer's Annual Enrollment Period.
- All late applications (applying 30 days after becoming eligible)
- Requests for coverage increases
- Reinstatements
- Employees eligible but not insured under the prior life insurance plan

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

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

### Coverage Effective Date

To become insured, you must:

- Meet the eligibility requirements listed in the previous sections,
- Serve an eligibility waiting period,\*
- Receive medical underwriting approval (if applicable),
- Apply for coverage and agree to pay premium, 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.

\*The eligibility waiting period varies; contact your Benefits and Wellness Representative for details.

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 Benefits and Wellness Representative or plan administrator for further information about the applicable coverage effective date for your insurance, including Dependents Life insurance.

**Portability**

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

**Conversion**

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

**Exclusions**

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

**When Your Insurance Ends**

Your insurance ends automatically when any of the following occur:

- The date the last period ends for which a premium was paid
- The last day of the calendar month in which 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 Benefits and Wellness 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 presented in this summary does not modify the group policy, certificate or the insurance coverage in any way.



For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at **standard.com**.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

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

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