

# Group Additional Life Insurance

Help protect your loved ones from financial hardship.

This coverage is designed to help provide financial support and stability to your family should you pass away. You can also cover your eligible spouse and child(ren). Life insurance is an easy, responsible way to help protect your family from financial hardship during a difficult time — and into the future.



## This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits if you become terminally ill or die
- An open and annual enrollment opportunity. See Open and Annual Enrollment section for additional details.

## ② About This Coverage

If you take no action you'll be covered under Basic Life insurance 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.

How Much Can I Apply For?  Your combined Basic Life and Additional Life amounts	For You:	<b>\$10,000</b> – <b>\$500,000</b> in increments of <b>\$10,000</b>		
cannot exceed a maximum of 8 times your annual earnings. 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.	For Your Spouse:	<b>\$10,000 – \$500,000</b> in increments of <b>\$10,000</b>		
	For Your Child(ren):	\$10,000		
What is the Guarantee Issue Maximum?	For You:	Up to <b>\$200,000</b>		
Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions.	For Your Spouse:	Up to <b>\$50,000</b>		

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

## ■ Open and Annual Enrollment

#### During Open Enrollment From November 1, 2021 Through November 15, 2021

**For You.** If you are currently enrolled in Additional Life insurance for an amount less than \$200,000, you may elect to increase your coverage up to, but not to exceed, the guarantee issue amount of \$200,000 without having to answer health questions. If you are not currently enrolled in Additional Life insurance, you may elect up to \$200,000 of coverage without having to answer health questions.

**For Your Spouse.** If your spouse is currently enrolled in Dependents Life insurance for an amount less than \$50,000, you may elect to increase coverage up to, but not to exceed, the guarantee issue amount of \$50,000 without having to answer health questions. If your Spouse is not currently enrolled in Dependents Life insurance, you may elect up to \$50,000 of coverage without having to answer health questions.

For Your Child(ren). If your child(ren) is/are not currently enrolled in Dependents Life insurance, you may elect the maximum coverage amount of \$10,000 without having to answer health questions.

During Collier County Board of County Commissioners's annual enrollment period: If you are enrolled in Additional Life insurance for an amount less than the \$200,000, you may elect to increase your coverage by one increment, but not to exceed the guarantee issue amount of \$200,000 without having to answer health questions. If your spouse is enrolled in Dependents Life insurance for an amount less than \$50,000, you may elect to increase your spouse's coverage by one increment, but not to exceed the guarantee issue amount of \$50,000 without having to answer health questions. If your child(ren) is/are not currently enrolled in Dependents Life insurance, you may elect the maximum coverage amount of \$10,000 without having to answer health questions.

If you, and/or your spouse and/or your child(ren) were previously declined coverage by The Standard, you, and/or your spouse and/or your child(ren) will need to submit a medical history statement in order to apply for any amount of coverage during the Annual Enrollment period. Visit www.standard.com/mhs to complete and submit a medical history statement online.

### **■** Additional Feature

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 Life Insurance Do You Need?

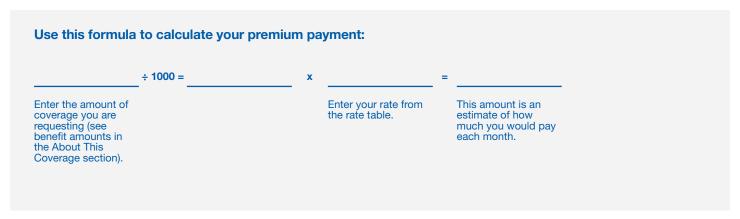
After a death in the family, there are many unexpected expenses. Your benefits could help your family pay for:

- Outstanding debt
- · 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.

## Show Much Your Coverage Costs

Your Basic Life insurance is paid for by Collier County Board of County 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 table below. Use the same formula to calculate the premium that you used for yourself, but use your age and your spouse's rate. NOTE: Coverage for your spouse terminates at age 75.

If you buy Dependents Life coverage for your child(ren), your monthly rate is \$0.20 per \$1,000, no matter how many children you're covering.

Your Age (as of January 1)	Your Rate (Per \$1,000 of Total Coverage)
<35	\$0.09
35-39	\$0.13
40-44	\$0.19
45-49	\$0.26
50-54	\$0.48
55-59	\$0.72
60-64	\$1.01
65-69	\$1.59
70+	\$2.34

Your Age (as of January 1)	Spouse's Rate (Per \$1,000 of Total Coverage)
<35	\$0.09
35-39	\$0.13
40-44	\$0.19
45-49	\$0.26
50-54	\$0.48
55-59	\$0.72
60-64	\$1.01
65-69	\$1.59
70-74	\$2.34

### **Employee Life Monthly Premiums**

Coverage	Employee's Age as of January 1								
Amount	< 35	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	0.90	1.30	1.90	2.60	4.80	7.20	10.10	15.90	23.40
\$20,000	1.80	2.60	3.80	5.20	9.60	14.40	20.20	31.80	46.80
\$30,000	2.70	3.90	5.70	7.80	14.40	21.60	30.30	47.70	70.20
\$40,000	3.60	5.20	7.60	10.40	19.20	28.80	40.40	63.60	93.60
\$50,000	4.50	6.50	9.50	13.00	24.00	36.00	50.50	79.50	117.00
\$60,000	5.40	7.80	11.40	15.60	28.80	43.20	60.60	95.40	140.40
\$70,000	6.30	9.10	13.30	18.20	33.60	50.40	70.70	111.30	163.80
\$80,000	7.20	10.40	15.20	20.80	38.40	57.60	80.80	127.20	187.20
\$90,000	8.10	11.70	17.10	23.40	43.20	64.80	90.90	143.10	210.60
\$100,000	9.00	13.00	19.00	26.00	48.00	72.00	101.00	159.00	234.00
\$110,000	9.90	14.30	20.90	28.60	52.80	79.20	111.10	174.90	257.40
\$120,000	10.80	15.60	22.80	31.20	57.60	86.40	121.20	190.80	280.80
\$130,000	11.70	16.90	24.70	33.80	62.40	93.60	131.30	206.70	304.20
\$140,000	12.60	18.20	26.60	36.40	67.20	100.80	141.40	222.60	327.60
\$150,000	13.50	19.50	28.50	39.00	72.00	108.00	151.50	238.50	351.00
\$160,000	14.40	20.80	30.40	41.60	76.80	115.20	161.60	254.40	374.40
\$170,000	15.30	22.10	32.30	44.20	81.60	122.40	171.70	270.30	397.80
\$180,000	16.20	23.40	34.20	46.80	86.40	129.60	181.80	286.20	421.20
\$190,000	17.10	24.70	36.10	49.40	91.20	136.80	191.90	302.10	444.60
\$200,000	18.00	26.00	38.00	52.00	96.00	144.00	202.00	318.00	468.00
\$210,000	18.90	27.30	39.90	54.60	100.80	151.20	212.10	333.90	491.40
\$220,000	19.80	28.60	41.80	57.20	105.60	158.40	222.20	349.80	514.80
\$230,000	20.70	29.90	43.70	59.80	110.40	165.60	232.30	365.70	538.20
\$240,000	21.60	31.20	45.60	62.40	115.20	172.80	242.40	381.60	561.60
\$250,000	22.50	32.50	47.50	65.00	120.00	180.00	252.50	397.50	585.00
\$260,000	23.40	33.80	49.40	67.60	124.80	187.20	262.60	413.40	608.40
\$270,000	24.30	35.10	51.30	70.20	129.60	194.40	272.70	429.30	631.80
\$280,000	25.20	36.40	53.20	72.80	134.40	201.60	282.80	445.20	655.20
\$290,000	26.10	37.70	55.10	75.40	139.20	208.80	292.90	461.10	678.60
\$300,000	27.00	39.00	57.00	78.00	144.00	216.00	303.00	477.00	702.00
\$310,000	27.90	40.30	58.90	80.60	148.80	223.20	313.10	492.90	725.40
\$320,000	28.80	41.60	60.80	83.20	153.60	230.40	323.20	508.80	748.80
\$330,000	29.70	42.90	62.70	85.80	158.40	237.60	333.30	524.70	772.20
\$340,000	30.60	44.20	64.60	88.40	163.20	244.80	343.40	540.60	795.60
\$350,000	31.50	45.50	66.50	91.00	168.00	252.00	353.50	556.50	819.00
\$360,000	32.40	46.80	68.40	93.60	172.80	259.20	363.60	572.40	842.40
\$370,000	33.30	48.10	70.30	96.20	177.60	266.40	373.70	588.30	865.80
\$380,000	34.20	49.40	72.20	98.80	182.40	273.60	383.80	604.20	889.20
\$390,000	35.10	50.70	74.10	101.40	187.20	280.80	393.90	620.10	912.60
\$400,000	36.00	52.00	76.00	104.00	192.00	288.00	404.00	636.00	936.00
\$410,000	36.90	53.30	77.90	106.60	196.80	295.20	414.10	651.90	959.40
\$420,000	37.80	54.60	79.80	109.20	201.60	302.40	424.20	667.80	982.80
\$430,000	38.70	55.90	81.70	111.80	206.40	309.60	434.30	683.70	1,006.20
\$440,000	39.60	57.20	83.60	114.40	211.20	316.80	444.40	699.60	1,029.60
\$450,000	40.50	58.50	85.50	117.00	216.00	324.00	454.50	715.50	1,053.00
\$460,000	41.40	59.80	87.40	119.60	220.80	331.20	464.60	731.40	1,076.40
\$470,000	42.30	61.10	89.30	122.20	225.60	338.40	474.70	747.30	1,099.80
\$480,000	43.20	62.40	91.20	124.80	230.40	345.60	484.80	763.20	1,123.20
\$490,000	44.10	63.70	93.10	127.40	235.20	352.80	494.90	779.10	1,146.60
\$500,000	45.00	65.00	95.00	130.00	240.00	360.00	505.00	795.00	1,170.00

### Employee Life Monthly Premiums (Continued)

		Emplo	yee's Age	as of lai	nuary 1	
Coverage Amount	75-79*	80-84*	85-89*	90-94*	95-99*	100+*
\$10,000	14.04	8.19	6.55	4.68	1.87	1.17
\$20,000	28.08	16.38	13.10	9.36	3.74	2.34
\$30,000	42.12	24.57	19.66	14.04	5.62	3.51
\$40,000	56.16	32.76	26.21	18.72	7.49	4.68
\$50,000	70.20	40.95	32.76	23.40	9.36	5.85
\$60,000	84.24	49.14	39.31	28.08	11.23	7.02
\$70,000	98.28	57.33	45.86	32.76	13.10	8.19
\$80,000	112.32	65.52	52.42	37.44	14.98	9.36
\$90,000	126.36	73.71	58.97	42.12	16.85	10.53
\$100,000	140.40	81.90	65.52	46.80	18.72	11.70
\$110,000	154.44	90.09	72.07	51.48	20.59	12.87
\$120,000	168.48	98.28	78.62	56.16	22.46	14.04
\$130,000	182.52	106.47	85.18	60.84	24.34	15.21
\$140,000	196.56	114.66	91.73	65.52	26.21	16.38
\$150,000	210.60	122.85	98.28	70.20	28.08	17.55
\$160,000	224.64	131.04	104.83	74.88	29.95	18.72
\$170,000	238.68	139.23	111.38	79.56	31.82	19.89
\$180,000	252.72	147.42	117.94	84.24	33.70	21.06
\$190,000	266.76	155.61	124.49	88.92	35.57	22.23
\$200,000	280.80	163.80	131.04	93.60	37.44	23.40
\$210,000	294.84	171.99	137.59	98.28	39.31	24.57
\$220,000	308.88	180.18	144.14	102.96	41.18	25.74
\$230,000	322.92	188.37	150.70	107.64	43.06	26.91
\$240,000	336.96	196.56	157.25	112.32	44.93	28.08
\$250,000	351.00	204.75	163.80	117.00	46.80	29.25
\$260,000	365.04	212.94	170.35	121.68	48.67	30.42
\$270,000	379.08	221.13	176.90	126.36	50.54	31.59
\$280,000	393.12	229.32	183.46	131.04	52.42	32.76
\$290,000	407.16	237.51	190.01	135.72	54.29	33.93
\$300,000	421.20	245.70	196.56	140.40	56.16	35.10
\$310,000	435.24	253.89	203.11	145.08	58.03	36.27
\$320,000	449.28	262.08	209.66	149.76	59.90	37.44
\$330,000	463.32	270.27	216.22	154.44	61.78	38.61
\$340,000	477.36	278.46	222.77	159.12	63.65	39.78
\$350,000	491.40	286.65	229.32	163.80	65.52	40.95
\$360,000	505.44	294.84	235.87	168.48	67.39	42.12
\$370,000	519.48	303.03	242.42	173.16	69.26	43.29
\$380,000	533.52	311.22	248.98	177.84	71.14	44.46
\$390,000	547.56	319.41	255.53	182.52	73.01	45.63
\$400,000	561.60	327.60	262.08	187.20	74.88	46.80
\$410,000	575.64	335.79	268.63	191.88	76.75	47.97
\$420,000	589.68	343.98	275.18	196.56	78.62	49.14
\$430,000	603.72	352.17	281.74	201.24	80.50	50.31
\$440,000	617.76	360.36	288.29	205.92	82.37	51.48
\$450,000	631.80	368.55	294.84	210.60	84.24	52.65
\$460,000	645.84	376.74	301.39	215.28	86.11	53.82
\$470,000	659.88	384.93	307.94	219.96	87.98	54.99
\$480,000	673.92	393.12	314.50	224.64	89.86	56.16
\$490,000	687.96	401.31	321.05	229.32	91.73	57.33
\$500,000	702.00	409.50	327.60	234.00	93.60	58.50

<sup>\*</sup> Coverage amounts for ages 75 and over reduce due to age reduction (see Life Insurance Age Reductions section).

Spouse Life Monthly Premiums

Coverage	womany	. romani	E	mployee'	s Age as	of Januar	y 1		
Coverage Amount	< 35	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	0.90	1.30	1.90	2.60	4.80	7.20	10.10	15.90	23.40
\$20,000	1.80	2.60	3.80	5.20	9.60	14.40	20.20	31.80	46.80
\$30,000	2.70	3.90	5.70	7.80	14.40	21.60	30.30	47.70	70.20
\$40,000	3.60	5.20	7.60	10.40	19.20	28.80	40.40	63.60	93.60
\$50,000	4.50	6.50	9.50	13.00	24.00	36.00	50.50	79.50	117.00
\$60,000	5.40	7.80	11.40	15.60	28.80	43.20	60.60	95.40	140.40
\$70,000	6.30	9.10	13.30	18.20	33.60	50.40	70.70	111.30	163.80
\$80,000	7.20	10.40	15.20	20.80	38.40	57.60	80.80	127.20	187.20
\$90,000	8.10	11.70	17.10	23.40	43.20	64.80	90.90	143.10	210.60
\$100,000	9.00	13.00	19.00	26.00	48.00	72.00	101.00	159.00	234.00
\$110,000	9.90	14.30	20.90	28.60	52.80	79.20	111.10	174.90	257.40
\$120,000	10.80	15.60	22.80	31.20	57.60	86.40	121.20	190.80	280.80
\$130,000	11.70	16.90	24.70	33.80	62.40	93.60	131.30	206.70	304.20
\$140,000	12.60	18.20	26.60	36.40	67.20	100.80	141.40	222.60	327.60
\$150,000	13.50	19.50	28.50	39.00	72.00	108.00	151.50	238.50	351.00
\$160,000	14.40	20.80	30.40	41.60	76.80	115.20	161.60	254.40	374.40
\$170,000	15.30	22.10	32.30	44.20	81.60	122.40	171.70	270.30	397.80
\$180,000	16.20	23.40	34.20	46.80	86.40	129.60	181.80	286.20	421.20
\$190,000	17.10	24.70	36.10	49.40	91.20	136.80	191.90	302.10	444.60
\$200,000	18.00	26.00	38.00	52.00	96.00	144.00	202.00	318.00	468.00
\$210,000	18.90	27.30	39.90	54.60	100.80	151.20	212.10	333.90	491.40
\$220,000	19.80	28.60	41.80	57.20	105.60	158.40	222.20	349.80	514.80
\$230,000	20.70	29.90	43.70	59.80	110.40	165.60	232.30	365.70	538.20
\$240,000	21.60	31.20	45.60	62.40	115.20	172.80	242.40	381.60	561.60
\$250,000	22.50	32.50	47.50	65.00	120.00	180.00	252.50	397.50	585.00
\$260,000	23.40	33.80	49.40	67.60	124.80	187.20	262.60	413.40	608.40
\$270,000	24.30	35.10	51.30	70.20	129.60	194.40	272.70	429.30	631.80
\$280,000	25.20	36.40	53.20	72.80	134.40	201.60	282.80	445.20	655.20
\$290,000	26.10	37.70	55.10	75.40	139.20	208.80	292.90	461.10	678.60
\$300,000	27.00	39.00	57.00	78.00	144.00	216.00	303.00	477.00	702.00
\$310,000	27.90	40.30	58.90	80.60	148.80	223.20	313.10	492.90	725.40
\$320,000	28.80	41.60	60.80	83.20	153.60	230.40	323.20	508.80	748.80
\$330,000	29.70	42.90	62.70	85.80	158.40	237.60	333.30	524.70	772.20
\$340,000	30.60	44.20	64.60	88.40	163.20	244.80	343.40	540.60	795.60
\$350,000	31.50	45.50	66.50	91.00	168.00	252.00	353.50	556.50	819.00
\$360,000	32.40	46.80	68.40	93.60	172.80	259.20	363.60	572.40	842.40
\$370,000	33.30	48.10	70.30	96.20	177.60	266.40	373.70	588.30	865.80
\$380,000	34.20	49.40	72.20	98.80	182.40	273.60	383.80	604.20	889.20
\$390,000	35.10	50.70	74.10	101.40	187.20	280.80	393.90	620.10	912.60
\$400,000	36.00	52.00	76.00	104.00	192.00	288.00	404.00	636.00	936.00
\$410,000	36.90	53.30	77.90	106.60	196.80	295.20	414.10	651.90	959.40
\$420,000	37.80	54.60	79.80	109.20	201.60	302.40	424.20	667.80	982.80
\$430,000	38.70	55.90	81.70	111.80	206.40	309.60	434.30	683.70	1,006.20
\$440,000	39.60	57.20	83.60	114.40	211.20	316.80	444.40	699.60	1,029.60
\$450,000	40.50	58.50	85.50	117.00	216.00	324.00	454.50	715.50	1,053.00
\$460,000	41.40	59.80	87.40	119.60	220.80	331.20	464.60	731.40	1,076.40
\$470,000	42.30	61.10	89.30	122.20	225.60	338.40	474.70	747.30	1,099.80
\$480,000	43.20	62.40	91.20	124.80	230.40	345.60	484.80	763.20	1,123.20
\$490,000	44.10	63.70	93.10	127.40	235.20	352.80	494.90	779.10	1,146.60
\$500,000	45.00	65.00	95.00	130.00	240.00	360.00	505.00	795.00	1,170.00

Child Life Monthly Premium

Coverage
Amount Premium
\$10,000 2.00

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

- An active employee of Collier County Board of County Commissioners
- Regularly working at least 30 hours per week
- Insured for Basic Life insurance through The Standard to qualify for Additional Life insurance

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. You can choose to cover your spouse, meaning a person to whom you are legally married. Child means your child from live birth through age 25. 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 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** 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.

If you are not actively at work on the day before the scheduled effective date of your insurance, 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.

\*Defined as first of the month that follows the date you become a member

#### Life Insurance Age Reductions

Under this plan, your coverage amount reduces to 40 percent at age 70. Your spouse's coverage amount reduces by your spouse's age as follows: to 40 due to age but coverage terminates at age 70. If you or your spouse are age 70 or over, ask your human resources representative or plan administrator for the amount of coverage available.

#### **Waiver of Premium**

Your 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 Life insurance coverage may continue without cost until age 70, 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 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 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 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.

#### **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.

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.

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

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SI 12506-D-AL-FL-759079 (10/21)