



Standard Insurance Company
Additional Life and AD&D Coverage Highlights
 Oklahoma Higher Education Employee Interlocal Group

Additional Life and Accidental Death and Dismemberment (AD&D) 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. AD&D insurance can provide you and your family with extra protection in the event of death or dismemberment as a result of a covered accident. Standard Insurance Company (The Standard) has developed this document to provide you with information about the elective coverage you may select through Oklahoma Higher Education Employee Interlocal Group.

Eligibility Requirements

- Policy**
 - A minimum number of eligible employees must apply and qualify for the proposed plan before Additional Life coverage can become effective
- Employee**
 - You must be insured for Basic Life through The Standard
 - You must be an active employee of Oklahoma Higher Education Employee Interlocal Group who is benefits eligible as determined by your employer, regularly working 20 hours or more each week.
 - Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible
 - You may be insured as both an employee and a dependent
- Dependent**
 - Spouse means a person to whom you are legally married
 - Child means your child from live birth through age 25
 - Your child may 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	\$10,000	\$10,000	\$300,000	\$500,000*
Spouse	\$5,000	\$5,000	\$50,000	\$250,000
Child	\$2,500	\$2,500		\$10,000

*but not to exceed 5 times your Annual Earnings and not to exceed 6 times your Annual Earnings when combined with your Basic life Insurance

Note:

- Amounts of coverage elected above the Guarantee Issue amount are subject to medical underwriting approval. To submit a medical history statement online, visit: http://www.standard.com/mybenefits/mhs_ho.html.
- All late applications (applying 31 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 combined Basic and 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: <http://www.standard.com/lifeneeds>.

Annual Enrollment

For Oklahoma Higher Education Employee Interlocal Group's annual enrollment after 2019, if you are enrolled in or eligible for Additional Life you may elect to increase your coverage an additional \$20,000 up to \$300,000 without having to submit evidence of insurability. If you elect coverage for your spouse, you may increase your coverage an additional \$10,000 up to \$50,000 without having to submit evidence of insurability.

Employee Coverage Effective Date

To become insured, you must satisfy the eligibility requirements listed above, serve an eligibility waiting period, 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, 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.

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. Waiver of Premium does not apply to AD&D insurance.

- 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.

Additional AD&D Insurance Benefit Schedule

The amount of the Additional AD&D benefit for loss of your, or your dependents, life is equal to the amount payable for your Additional Life or your Dependents Life benefit on the date of the accident. The amount of the Additional AD&D benefit for other covered losses is a percentage of the amount payable for the Additional AD&D benefit on the date of the accident as shown below.

Loss:	Percentage Payable:
Loss of Life ¹	100%
One hand or one foot ²	50%
Sight in one eye, speech, or hearing in both ears	50%
Two or more of the losses listed above	100%
Thumb and index finger of the same hand ³	25%
Quadriplegia	100%
Hemiplegia	50%
Paraplegia	50%

¹Including loss of life by accidental exposure to adverse weather conditions or disappearance if the disappearance is caused by an accident that could have reasonably resulted in your death.

²Even if the severed part is surgically re-attached. This benefit is not payable if an Additional AD&D benefit is payable for Quadriplegia, Hemiplegia, or Paraplegia involving the same hand or foot.

³This benefit is not payable if an Additional AD&D benefit is payable for the loss of the entire hand.

The loss must be caused solely and directly by an accident and occurs independently of all other causes, within 365 days after the accident. Loss of life must be evidenced by a certified copy of the death certificate. All other losses must be certified by a physician in the appropriate specialty as determined by The Standard. No more than 100 percent of the AD&D benefit will be paid for all losses resulting from one accident.

Additional AD&D Insurance Exclusions

Subject to state variations, AD&D benefits are not payable for death or dismemberment caused or contributed to by:

- War or act of war, declared or undeclared, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Suicide or other intentionally self-inflicted injury
- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a physician
- Sickness or pregnancy existing at the time of the accident
- Heart attack or stroke
- Medical or surgical treatment for any of the above

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
- For Additional AD&D insurance for you, the date your Additional life insurance ends

In addition to the above requirements, your Dependents Life with AD&D 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 Life with AD&D Monthly Premiums

Coverage Amount	Employee’s Age as of 1 st Day of the Month Following Change in Age										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-99
\$10,000	0.75	0.95	1.05	1.450	2.25	3.35	5.55	6.85	12.85	20.75	20.75
\$20,000	1.50	1.90	2.10	2.90	4.50	6.70	11.10	13.70	25.70	41.50	41.50
\$30,000	2.25	2.85	3.15	4.35	6.75	10.05	16.65	20.55	38.55	62.25	62.25
\$40,000	3.00	3.80	4.20	5.80	9.00	13.40	22.20	27.40	51.40	83.00	83.00
\$50,000	3.75	4.75	5.25	7.25	11.25	16.75	27.75	34.25	64.25	103.75	103.75
\$60,000	4.50	5.70	6.30	8.70	13.50	20.10	33.30	41.10	77.10	124.50	124.50
\$70,000	5.25	6.65	7.35	10.15	15.75	23.45	38.85	47.95	89.95	145.25	145.25
\$80,000	6.00	7.60	8.40	11.60	18.00	26.80	44.40	54.80	102.80	166.00	166.00
\$90,000	6.75	8.55	9.45	13.05	20.25	30.15	49.95	61.65	115.65	186.75	186.75
\$100,000	7.50	9.50	10.50	14.50	22.50	33.50	55.50	68.50	128.50	207.50	207.50
\$110,000	8.25	10.45	11.55	15.95	24.75	36.85	61.05	75.35	141.35	228.25	228.25
\$120,000	9.00	11.40	12.60	17.40	27.00	40.20	66.60	82.20	154.20	249.00	249.00
\$130,000	9.75	12.35	13.65	18.85	29.25	43.55	72.15	89.05	167.05	269.75	269.75
\$140,000	10.50	13.30	14.70	20.30	31.50	46.90	77.70	95.90	179.90	290.50	290.50
\$150,000	11.25	14.25	15.75	21.75	33.75	50.25	83.25	102.75	192.75	311.25	311.25
\$160,000	12.00	15.20	16.80	23.20	36.00	53.60	88.80	109.60	205.60	332.00	332.00
\$170,000	12.75	16.15	17.85	24.65	38.25	56.95	94.35	116.45	218.45	352.75	352.75
\$180,000	13.50	17.10	18.90	26.10	40.50	60.30	99.90	123.30	231.30	373.50	373.50
\$190,000	14.25	18.05	19.95	27.55	42.75	63.65	105.45	130.15	244.15	394.25	394.25
\$200,000	15.00	19.00	21.00	29.00	45.00	67.00	111.00	137.00	257.00	415.00	415.00
\$210,000	15.75	19.95	22.05	30.45	47.25	70.35	116.55	143.85	269.85	435.75	435.75
\$220,000	16.50	20.90	23.10	31.90	49.50	73.70	122.10	150.70	282.70	456.50	456.50
\$230,000	17.25	21.85	24.15	33.35	51.75	77.05	127.65	157.55	295.55	477.25	477.25
\$240,000	18.00	22.80	25.20	34.80	54.00	80.40	133.20	164.40	308.40	498.00	498.00
\$250,000	18.75	23.75	26.25	36.25	56.25	83.75	138.75	171.25	321.25	518.75	518.75
\$260,000	19.50	24.70	27.30	37.70	58.50	87.10	144.30	178.10	334.10	539.50	539.50
\$270,000	20.25	25.65	28.35	39.15	60.75	90.45	149.85	184.95	346.95	560.25	560.25
\$280,000	21.00	26.60	29.40	40.60	63.00	93.80	155.40	191.80	359.80	581.00	581.00
\$290,000	21.75	27.55	30.45	42.05	65.25	97.15	160.95	198.65	372.65	601.75	601.75
\$300,000	22.50	28.50	31.50	43.50	67.50	100.50	166.50	205.50	385.50	622.50	622.50
\$310,000	23.25	29.45	32.55	44.95	69.75	103.85	172.05	212.35	398.35	643.25	643.25
\$320,000	24.00	30.40	33.60	46.40	72.00	107.20	177.60	219.20	411.20	664.00	664.00

Coverage Amount	Employee's Age as of 1 st Day of the Month Following Change in Age										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-99
\$330,000	24.75	31.35	34.65	47.85	74.25	110.55	183.15	226.05	424.05	684.75	684.75
\$340,000	25.50	32.30	35.70	49.30	76.50	113.90	188.70	232.90	436.90	705.50	705.50
\$350,000	26.25	33.25	36.75	50.75	78.75	117.25	194.25	239.75	449.75	726.25	726.25
\$360,000	27.00	34.20	37.80	52.20	81.00	120.60	199.80	246.60	462.60	747.00	747.00
\$370,000	27.75	35.15	38.85	53.65	83.25	123.95	205.35	253.45	475.45	767.75	767.75
\$380,000	28.50	36.10	39.90	55.10	85.50	127.30	210.90	260.30	488.30	788.50	788.50
\$390,000	29.25	37.05	40.95	56.55	87.75	130.65	216.45	267.15	501.15	809.25	809.25
\$400,000	30.00	38.00	42.00	58.00	90.00	134.00	222.00	274.00	514.00	830.00	830.00
\$410,000	30.75	38.95	43.05	59.45	92.25	137.35	227.55	280.85	526.85	850.75	850.75
\$420,000	31.50	39.90	44.10	60.90	94.50	140.70	233.10	287.70	539.70	871.50	871.50
\$430,000	32.25	40.85	45.15	62.35	96.75	144.05	238.65	294.55	552.55	892.25	892.25
\$440,000	33.00	41.80	46.20	63.80	99.00	147.40	244.20	301.40	565.40	913.00	913.00
\$450,000	33.75	42.75	47.25	65.25	101.25	150.75	249.75	308.25	578.25	933.75	933.75
\$460,000	34.50	43.70	48.30	66.70	103.50	154.10	255.30	315.10	591.10	954.50	954.50
\$470,000	35.25	44.65	49.35	68.15	105.75	157.45	260.85	321.95	603.95	975.25	975.25
\$480,000	36.00	45.60	50.40	69.60	108.00	160.80	266.40	328.80	616.80	996.00	996.00
\$490,000	36.75	46.55	51.45	71.05	110.25	164.15	271.95	335.65	629.65	1016.75	1016.75
\$500,000	37.50	47.50	52.50	72.50	112.50	167.50	277.50	342.50	642.50	1037.50	1037.50

Spouse Life with AD&D Monthly Premiums

Coverage Amount	Employee's Age as of 1 st Day of the Month Following Change in Age										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-99
\$5,000	0.38	0.48	0.53	0.725	1.13	1.68	2.78	3.43	6.43	10.375	10.375
\$10,000	0.75	0.95	1.05	1.45	2.25	3.35	5.55	6.85	12.85	20.750	20.750
\$15,000	1.13	1.43	1.58	2.18	3.38	5.03	8.33	10.28	19.28	31.125	31.125
\$20,000	1.50	1.90	2.10	2.90	4.50	6.70	11.10	13.70	25.70	41.500	41.500
\$25,000	1.88	2.38	2.63	3.63	5.63	8.38	13.88	17.13	32.13	51.875	51.875
\$30,000	2.25	2.85	3.15	4.35	6.75	10.05	16.65	20.55	38.55	62.250	62.250
\$35,000	2.63	3.33	3.68	5.08	7.88	11.73	19.43	23.98	44.98	72.625	72.625
\$40,000	3.00	3.80	4.20	5.80	9.00	13.40	22.20	27.40	51.40	83.000	83.000
\$45,000	3.38	4.28	4.73	6.53	10.13	15.08	24.98	30.83	57.83	93.375	93.375
\$50,000	3.75	4.75	5.25	7.25	11.25	16.75	27.75	34.25	64.25	103.750	103.750
\$55,000	4.13	5.23	5.78	7.98	12.38	18.43	30.53	37.68	70.68	114.125	114.125
\$60,000	4.50	5.70	6.30	8.70	13.50	20.10	33.30	41.10	77.10	124.500	124.500
\$65,000	4.88	6.18	6.83	9.43	14.63	21.78	36.08	44.53	83.53	134.875	134.875
\$70,000	5.25	6.65	7.35	10.15	15.75	23.45	38.85	47.95	89.95	145.250	145.250
\$75,000	5.63	7.13	7.88	10.88	16.88	25.13	41.63	51.38	96.38	155.625	155.625
\$80,000	6.00	7.60	8.40	11.60	18.00	26.80	44.40	54.80	102.80	166.000	166.000
\$85,000	6.38	8.08	8.93	12.33	19.13	28.48	47.18	58.23	109.23	176.375	176.375
\$90,000	6.75	8.55	9.45	13.05	20.25	30.15	49.95	61.65	115.65	186.750	186.750
\$95,000	7.13	9.03	9.98	13.78	21.38	31.83	52.73	65.08	122.08	197.125	197.125
\$100,000	7.50	9.50	10.50	14.50	22.50	33.50	55.50	68.50	128.50	207.500	207.500
\$105,000	7.88	9.98	11.03	15.23	23.63	35.18	58.28	71.93	134.93	217.875	217.875
\$110,000	8.25	10.45	11.55	15.95	24.75	36.85	61.05	75.35	141.35	228.250	228.250
\$115,000	8.63	10.93	12.08	16.68	25.88	38.53	63.83	78.78	147.78	238.625	238.625
\$120,000	9.00	11.40	12.60	17.40	27.00	40.20	66.60	82.20	154.20	249.000	249.000
\$125,000	9.38	11.88	13.13	18.13	28.13	41.88	69.38	85.63	160.63	259.375	259.375
\$130,000	9.75	12.35	13.65	18.85	29.25	43.55	72.15	89.05	167.05	269.750	269.750
\$135,000	10.13	12.83	14.18	19.58	30.38	45.23	74.93	92.48	173.48	280.125	280.125
\$140,000	10.50	13.30	14.70	20.30	31.50	46.90	77.70	95.90	179.90	290.500	290.500
\$145,000	10.88	13.78	15.23	21.03	32.63	48.58	80.48	99.33	186.33	300.875	300.875
\$150,000	11.25	14.25	15.75	21.75	33.75	50.25	83.25	102.75	192.75	311.250	311.250
\$155,000	11.63	14.73	16.28	22.48	34.88	51.93	86.03	106.18	199.18	321.625	321.625
\$160,000	12.00	15.20	16.80	23.20	36.00	53.60	88.80	109.60	205.60	332.000	332.000
\$165,000	12.38	15.68	17.33	23.93	37.13	55.28	91.58	113.03	212.03	342.375	342.375

Coverage Amount	Employee's Age as of 1 st Day of the Month Following Change in Age										
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-99
\$170,000	12.75	16.15	17.85	24.65	38.25	56.95	94.35	116.45	218.45	352.750	352.750
\$175,000	13.13	16.63	18.38	25.38	39.38	58.63	97.13	119.88	224.88	363.125	363.125
\$180,000	13.50	17.10	18.90	26.10	40.50	60.30	99.90	123.30	231.30	373.500	373.500
\$185,000	13.88	17.58	19.43	26.83	41.63	61.98	102.68	126.73	237.73	383.875	383.875
\$190,000	14.25	18.05	19.95	27.55	42.75	63.65	105.45	130.15	244.15	394.250	394.250
\$195,000	14.63	18.53	20.48	28.28	43.88	65.33	108.23	133.58	250.58	404.625	404.625
\$200,000	15.00	19.00	21.00	29.00	45.00	67.00	111.00	137.00	257.00	415.000	415.000
\$205,000	15.38	19.48	21.53	29.73	46.13	68.68	113.78	140.43	263.43	425.375	425.375
\$210,000	15.75	19.95	22.05	30.45	47.25	70.35	116.55	143.85	269.85	435.750	435.750
\$215,000	16.13	20.43	22.58	31.18	48.38	72.03	119.33	147.28	276.28	446.125	446.125
\$220,000	16.50	20.90	23.10	31.90	49.50	73.70	122.10	150.70	282.70	456.500	456.500
\$225,000	16.88	21.38	23.63	32.63	50.63	75.38	124.88	154.13	289.13	466.875	466.875
\$230,000	17.25	21.85	24.15	33.35	51.75	77.05	127.65	157.55	295.55	477.250	477.250
\$235,000	17.63	22.33	24.68	34.08	52.88	78.73	130.43	160.98	301.98	487.625	487.625
\$240,000	18.00	22.80	25.20	34.80	54.00	80.40	133.20	164.40	308.40	498.000	498.000
\$245,000	18.38	23.28	25.73	35.53	55.13	82.08	135.98	167.83	314.83	508.375	508.375
\$250,000	18.75	23.75	26.25	36.25	56.25	83.75	138.75	171.25	321.25	518.750	518.750

Child Rates

If you elect Dependents Life with AD&D insurance for your eligible child(ren), your monthly rate for this coverage is \$0.23 per \$1,000 of benefit regardless of the number of eligible children covered. Premiums for this coverage will be deducted directly from your paycheck.

* Monthly AD&D rate of \$0.03per \$1,000 of AD&D benefit has been included in the above rate.



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. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers.

Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group Disability, Life, Dental and Vision insurance and Individual Disability insurance. We provide insurance to more than 24,800 groups, covering over 8 million employees nationwide.* Our first group policy, written in 1951 and still in force today, stands as a testament to our commitment to building long-term relationships.

To learn more about products from The Standard, Contact your human resources department or visit us at www.standard.com.

* As of June 30, 2013, based on internal data developed by Standard Insurance Company.

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1100 SW Sixth Avenue
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GP190-LIFE/S399, GP399-LIFE/TRUST,
GP899-LIFE, GP190-LIFE/A997/S399