



Supplemental (Additional) Life and Dependents Life 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. Standard Insurance Company (The Standard) has developed this document to provide you with information about the elective coverage you may select through Boston College.

Benefits Eligibility Requirements

- Employee**
 - You must be insured for Basic Life through The Standard
 - You must be a benefits eligible part-time or full-time employee of Boston College working at least 20 hours each week
 - Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible
 - You cannot be insured as both an employee and a dependent

- Dependent**
 - Spouse means a person to whom you are legally married
 - Child means your child (by birth, marriage, or legal adoption) from live birth through the last day of the calendar month in which your child reaches age 26.
 - Your child cannot 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 payroll deduction

Coverage Amount Guidelines

Within the coverage amount guidelines shown below, you select the amount of Supplemental (Additional) Life and Dependents Life insurance for which you are interested in applying.

	Minimum	Incremental Unit	Guarantee Issue Amount	Maximum
Employee	\$1,000	\$1,000	\$300,000, or 1 times your basic annual earnings, whichever is less	Lesser of 4 times your basic annual earnings or \$900,000

	Unit 1	Unit 2	Unit 3	Guarantee Issue Amount
Spouse	\$10,000	\$20,000	\$30,000	All
Child	\$5,000	\$10,000	\$15,000	All

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. To print a medical history statement, visit: www.standard.com/eforms/12982_648974.pdf.
- Except as described below for Annual Enrollment Periods and Family Status Changes, all late applications (applying more than 60 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.
- Your combined Basic Life and Supplemental (Additional) Life amounts may not exceed a maximum of \$1,400,000.
- Medical underwriting is not required for your Child(ren).

During Annual Enrollment Periods:

Unless your or your Spouse's medical underwriting was previously disapproved by us, during the annual enrollment period:

- If you are insured for less than \$300,000 of Supplemental (Additional) Life Insurance, you may apply for an increase by any multiple of \$1,000 not to exceed 1 times your Annual Earnings, up to \$300,000, without medical underwriting approval. Medical underwriting approval is required for amounts over \$300,000. Medical underwriting approval is also required if you are not already insured for Supplemental (Additional) Life Insurance.
- You may apply for \$10,000 of Dependents Life Insurance for your Spouse, or increase by one unit, without medical underwriting approval.

Following a Family Status Change:

Unless your or your Spouse's medical underwriting was previously disapproved by us, during the first 31 days following a family status change:

- If you are eligible but not insured for Supplemental (Additional) Life Insurance, you may apply for any amount of coverage up to the Guarantee Issue Amount, without medical underwriting approval. Medical underwriting approval is required for amounts over the Guarantee Issue Amount.
- If you are insured for less than \$300,000 of Supplemental (Additional) Life Insurance, you may apply for an increase by any multiple of \$1,000 not to exceed 1 times your Annual Earnings, up to \$300,000, without medical underwriting approval. Medical underwriting approval is required for amounts over \$300,000.
- You may apply for \$10,000 of Dependents Life Insurance for your Spouse, or increase by one unit, without medical underwriting approval.

Coverage Amount Needed

Your family has a unique set of circumstances and financial demands. To help you figure out the amount of Supplemental (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>.

Employee Coverage Effective Date

To become insured, you must satisfy the eligibility requirements listed above, 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 including Dependents Life 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 Benefits Office for more information regarding these requirements that must be satisfied for your insurance to become effective.

Life Age Reductions

There are no age reductions.

Life Insurance Features and Benefits

Please see your Benefits Office 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 65, and complete a waiting period of 180 days, your Supplemental (Additional) Life insurance may continue without premium payment until age 70 provided you give us satisfactory proof that you remain totally disabled.
Accelerated Benefit	If you become terminally ill, you may be eligible to receive up to 75 percent of your combined Basic and Supplemental (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 without medical underwriting approval.
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.

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 terminates

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.

If you die during the conversion period of the Right To Convert provision of the group policy, The Standard will pay a death benefit equal to the maximum amount you had a right to convert, whether or not you applied for an individual policy.

For more details on when insurance ends, contact your Benefits Office.

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 Rates

If you elect Supplemental (Additional) Life insurance, your monthly rate for this plan is indicated in the table below. Premiums for this coverage will be deducted directly from your paycheck.

Employee's Age* Previous January 1st	Rate (Per \$1,000 of Total Coverage)
<25	\$0.030
25-29	\$0.030
30-34	\$0.030
35-39	\$0.040
40-44	\$0.060
45-49	\$0.080
50-54	\$0.140
55-59	\$0.230
60-64	\$0.390
65-69	\$0.850
70+	\$2.060

To calculate your premium:

1. Amount Elected: Write this amount on the Supplemental (Additional) Life requested amount line on your Enrollment and Change Form. Line 1: _____
2. Line 1 divided by \$1,000 = Line 2. Line 2: _____
3. Select your rate from the rate table and enter on Line 3. Line 3: _____
4. Line 2 multiplied by Line 3 = Your monthly cost. Line 4: _____

*Use your age as of the previous January 1st. For example, someone born on March 17, 1970 was age 44 as of 1/01/15, and would use the age 40-44 premium rate for all of 2015. In January 2016 the rate for age 45-49 will begin.

Dependents Rates

If you elect Dependents Life insurance for your eligible dependents, your monthly rate for this coverage is determined as follows regardless of the number of eligible dependents covered. Premiums for this coverage will be deducted directly from your paycheck.

- Unit 1 (\$10,000 Spouse/\$5,000 Child): \$2.55 monthly
- Unit 2 (\$20,000 Spouse/\$10,000 Child): \$5.10 monthly
- Unit 3 (\$30,000 Spouse/\$15,000 Child): \$7.65 monthly



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