

Southern Methodist University



Act Now to Help Protect What Matters Most



The life you're building for yourself and your family is precious. Every financial decision, every first step, every milestone — these are the things that matter. Think of insurance as a financial safety net that can help protect you when life doesn't go as planned. Enrolling in coverage now is a small thing you can do to help make sure you and your loved ones keep moving forward.

In this guide, you'll find details about your group insurance options from Standard Insurance Company (The Standard).



Protection from the Unexpected

Even with medical insurance, a serious illness or accident - or even a routine stay in the hospital - can be a drain on your finances. The following types of insurance pay a benefit to help you pay the bills. Use the payment however you like to cover out-of-pocket medical costs and other living expenses.

Accident insurance pays a lump sum directly to you so you can help cover out-of-pocket expenses as you or a family member recuperates after an accident.

Critical Illness insurance helps you manage expenses during a serious illness, such as a heart attack, stroke or cancer. Use the benefit, paid to you in a lump sum, for deductibles, copays, rent or groceries as you or a family member recovers.

Hospital Indemnity insurance can help you take care of the out-ofpocket costs of a stay in the hospital. It pays you a flat benefit regardless of any medical coverage you have.



Life insurance helps provide support and stability to your family if something were to happen to you or your spouse or children. It can help your family financially through a difficult time and provide support into the future.

Accidental Death and Dismemberment (AD&D) insurance helps protect against a sudden financial loss brought on by an accidental death. It can also help pay for the high cost of living associated with surviving an accident that results in a severe physical loss.



Protection for Your Paycheck

Your most valuable asset is your ability to earn an income. Disability insurance provides partial income replacement if you can't work because of a qualifying disability caused by an illness, injury or pregnancy. The benefit payments can help with bills that continue even

Your Employer-Paid **Benefits**

- Basic Life insurance
- Long Term Disability insurance

Benefits You Can Apply for Now:

- Accident insurance
- Critical Illness insurance
- Hospital Indemnity insurance
- Additional Life insurance
- Dependents Life insurance
- Accidental Death & Dismemberment insurance
- Short Term Disability insurance

when you can't work, like your mortgage or rent — expenses medical insurance won't cover.

Short Term Disability insurance pays a weekly benefit to help you keep your finances on track when you're out of work because of a disability.

Long Term Disability insurance pays a monthly benefit if you experience a disability that lasts for several months or even years.

Ready to Apply?

Once you've reviewed your options, the next step is to apply. Contact Benefits with any enrollment questions.

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When you buy insurance through work, you have access to competitive group rates and the convenience of premiums deducted right from your paycheck.



Group Accident Insurance

Keep your finances on track when an accident happens.

Here's how Accident insurance works

1. You have an accident.	2. We pay you benefits.	3. You focus on getting better.
You submit a claim. Your health insurance covers some costs after you meet your deductible. But you still may have copays and a lot of out-of-pocket expenses.	Once we approve your claim, we'll pay you directly, not your medical providers. You decide how you spend the money.	With extra financial support from The Standard, you can focus on your recovery instead of worrying about expenses.

Here's what it does:

- Pays you directly, so you can choose how to spend the money.
- · Take it with you if you leave your employer.
- Provides coverage without answering any medical questions.
- Gives you the option to cover your spouse and children.
- Pays an additional 25% of the total benefits paid if your child, 18 or under, is injured playing an organized sport that requires a registration form no annual limit.
- If you sustain multiple fractures and/or dislocations in a covered accident, you'll receive payment for each of those injuries.
- Critical Care Unit Admission and Daily Critical Care Unit Confinement benefits pay in addition to the Hospital Admission and Daily Hospital Confinement benefits.
- Pays for a health maintenance screening once per insured per calendar year for receiving one covered health screening.
- Simplifies claim submission by paying some related benefits without additional documentation on select approved claims.
- Provides 24-hour coverage, including coverage for accidents that occur on and off the job.

This coverage from Standard Insurance Company (The Standard) can help you stress less about unexpected medical bills.

Our Accident insurance includes 70+ benefits for covered injuries and treatment. You choose from 2 levels of coverage.

Emergency Care Benefits	Enhanced	Premier
Air ambulance	\$800	\$1,500
Blood, plasma and platelets - transfusion	\$300	\$600
Emergency dental - crown	\$200	\$350
Emergency dental - extraction	\$100	\$150
Emergency room	\$150	\$200
Ground ambulance	\$300	\$600
Initial physician's visit ¹	\$50	\$60
Major diagnostic exam	\$200	\$300
Urgent care visit	\$50	\$60
Outpatient X-ray	\$50	\$60

¹ Not payable if urgent care or emergency room visit benefits is payable.

Fracture Benefits Non-Surgical /Surgical	Enhanced	Premier
Ankle, arm (shoulder to elbow), arm (elbow to wrist), collarbone, elbow, foot, hand, kneecap, lower jaw, shoulder blade, sternum, wrist	\$550/ \$1,100	\$650/ \$1,300
Bones of face, coccyx, nose, vertebrae	\$500/ \$1,000	\$750/ \$1,500
Finger, toe	\$100/ \$200	\$200/ \$400
Нір	\$2,500/ \$5,000	\$3,000/ \$6,000
Leg (hip to knee)	\$2,000/ \$4,000	\$3,000/ \$6,000
Leg (knee to ankle), pelvis, vertebral column	\$1,200/ \$2,400	\$1,700/ \$3,400
Rib	\$400/ \$800	\$500/ \$1,000
Skull (depressed)	\$4,000/ \$8,000	\$5,250/ \$10,500

Skull (non-depressed)	\$1,500/ \$3,000	\$2,000/ \$4,000
Chip fracture (% of the non- surgical fracture amount)	25%	25%

Specific Injury Benefits	Enhanced	Premier
Burns, 2nd degree, <15%	\$200	\$500
Burns, 2nd degree, >15%	\$1,000	\$1,500
Burns, 3rd degree, <15%	\$5,000	\$7,500
Burns, 3rd degree, >15%	\$10,000	\$12,500
Coma	\$7,500	\$15,000
Concussion	\$150	\$200
Eye injuries: removal of foreign body or surgical repair	\$200	\$300
Lacerations, <2"	\$75	\$100
Lacerations, 2" - 6"	\$200	\$400
Lacerations, >6"	\$500	\$800
Skin grafts (% of burn benefit)	25%	50%

Group Accident Insurance

Surgical Benefits	Enhanced	Premier
Knee cartilage, repair ²	\$750	\$1,000
Knee cartilage, exploratory ²	\$200	\$250
Tendon, ligament, rotator cuff, repair of one ³	\$750	\$1,000
Tendon, ligament, rotator cuff, repair of two or more ³	\$1,000	\$1,500
Tendon, ligament, rotator cuff, exploratory ³	\$200	\$250
Ruptured disc, repair	\$750	\$1,000
Abdominal/thoracic, exploratory ⁴	\$200	\$400
Abdominal/thoracic, laparoscopic4	\$750	\$1,000
Abdominal/thoracic, open4	\$1,500	\$2,000
Outpatient surgical facility	\$150	\$500

² Once per covered accident, regardless of whether one or both knees require repair. If both exploratory and repair surgeries are performed, will pay repair benefit amount.

3 If two or more surgeries are required for the same covered accident, will

⁴ If more than one surgery is required for the same covered accident, will pay the highest benefit amount.

Hospital Benefits	Enhanced	Premier
Critical care unit admission	\$750	\$1,000
Daily rehab facility (per day)	\$100/up to 90 days	\$150/up to 90 days
Daily critical care unit confinement (per day)	\$200/up to 15 days	\$200/up to 15 days
Daily hospital confinement (per day)	\$200/up to 365 days	\$400/up to 365 days
Hospital admission	\$1,000	\$1,500

Dislocation Benefits Non- Surgical /Surgical	Enhanced	Premier
Ankle, collarbone (sternoclavicular), elbow, foot (except toes), hand (except fingers), lower jaw, shoulder, wrist	\$800/ \$1,600	\$1,000/ \$2,000
Collarbone (acromio/separation)	\$400/ \$800	\$500/ \$1,000
Finger, rib, toe	\$150/ \$300	\$200/ \$400
Hip	\$2,500/ \$5,000	\$3,500/ \$7,000
Knee (not knee cap)	\$900/ \$1,800	\$1,000/ \$2,000
Spine	\$400/ \$800	\$500/ \$1,000
Partial dislocation (% of non- surgical amount)	25%	25%

Follow-Up Care Benefits	Enhanced	Premier
Medical appliance (e.g., cane, wheelchair or brace)	\$100	\$200
Chiropractic care (per day)	\$50/ up to 2 days	\$60/ up to 2 days
Accident follow-up care (per day)	\$50/ up to 2 days	\$70/ up to 3 days
Hearing device	\$500	\$600
Prosthesis (one)	\$500	\$1,000
Prosthesis (two or more)	\$1,000	\$2,000
Therapy services (per day)	\$50/ up to 3 days	\$50/ up to 4 days

Additional Benefits	Enhanced	Premier
Lodging (per day up to 30 days per accident)	\$175	\$200
Transportation (per day up to 30 days per accident)	\$150	\$200

pay the highest benefit amount.

Group Accident Insurance

Accidental Death & Dismemberment Benefits	Enhanced	Premier
Accidental Death (you)	\$50,000	\$100,000
Accidental Death (spouse)	\$25,000	\$50,000
Accidental Death (child)	\$12,500	\$25,000

Repatriation Benefit	10%	10%
Seat Belt Benefit	10%	10%

Accidental Dismemberment Benefits (% of AD&D Benefit)	Enhanced	Premier
Loss of two or more fingers or toes	5%	5%
Loss of one finger or one toe	2%	2%
Loss of both hands or both feet	30%	30%
Loss of one hand or one foot	15%	15%
Loss of one hand and one foot	30%	30%
Loss of sight in both eyes or loss of hearing in both ears	30%	30%
Loss of sight in one eye or loss of hearing in one ear	15%	15%

Accidental Impairment Benefits (% of AD&D Benefit)	Enhanced	Premier
Uniplegia	15%	15%
Paraplegia	30%	30%
Triplegia	30%	30%
Hemiplegia	30%	30%
Quadriplegia	50%	50%

Value Added AD&D Benefits (% of AD&D Benefit)	Enhanced	Premier
Common Carrier Benefit (e.g., bus or subway)	100%	100%
Air Bag Benefit	10%	10%
Helmet Benefit	10%	10%

Here's what it would cost you:

Coverage for	Monthly Premiums for Enhanced Plan	Monthly Premiums for Premier Plan
You	\$10.68	\$15.66
You and your spouse	\$17.62	\$25.22
You and your children	\$19.79	\$29.24
You, your spouse and your children	\$31.29	\$46.06

See Accident insurance in action.

Ari was walking to their car on an icy morning. As they approached the car, their foot slipped on the ice, and they lost their balance. Instinctively, they extended their arm to break their fall. Unfortunately, the impact was too forceful, and they broke their wrist. Ari submitted documentation of their broken wrist to The Standard. In addition to receiving payment for their qualifying claim for a fractured wrist, The Standard automatically anticipated and sent payment for the following benefits, with no additional documentation required:

- Urgent care visit
- X-ray
- Follow-up visit



Their broken wrist required an additional follow-up visit with their doctor, three weeks after the first follow-up appointment. Ari submitted documentation for this second follow-up visit to The Standard to receive the benefit.

24-hour coverage – Includes coverage for accidents that occur on and off the job.

Accidental Death & Dismemberment — Includes a benefit for an accidental death or covered dismemberment for you or your dependents.

Health Maintenance Screening Benefit — Pays a benefit of \$150 once per calendar year when you or your dependents go to the doctor for a covered wellness screening, which may include a novel infectious disease test (including COVID-19) or a mammogram.

Important Details

Here's where you'll find the details about Accident Insurance.

Eligibility Requirements

To be eligible for this coverage, you must be 18 years old or older, a regular employee of Southern Methodist University actively working in the United States at least 20 hours per week, and a citizen or resident of the United States.

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

You can choose to cover your spouse who must be 18 years old or older. A spouse is a person to whom you are legally married, or your domestic partner as recognized by law or by your employer's domestic partnership policy, if applicable. You can also cover your children from birth through age 25. Your children cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, 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.

Exclusions

Benefits are not payable if an accident is caused by or contributed to any of the following:

- · War or any act of war
- Suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism
- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state your accident occurred
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness
- Travel or flight in or on any aircraft, except as a farepaying passenger on a commercial aircraft

- Engaging in high-risk sports or activities such as (but not limited to) bungee jumping, parachuting, base jumping, mixed martial arts or mountain climbing
- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident
- Riding in or driving any automobile in a race, stunt show or speed test
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function after a covered accident
- An accident that occurs while you or your dependent is incarcerated in a jail or penal or correctional institution

When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you may 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.

Group Accident Insurance

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

This is a limited benefit policy that does not provide comprehensive health insurance coverage.

Group Accident insurance underwritten by Standard Insurance Company is provided under policy form numbers: GP0614-ACC, GP0614-ACC FLORIDA, GP0614-ACC 0323, GP0614-ACC PA.

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Group Critical Illness Insurance

Plan for the Costs of a Serious Illness So You Can Focus on Getting Well.

You get a critical illness diagnosis

Your health insurance covers many of your treatment costs, but you still have a lot of expenses that your finances aren't ready for.

The Standard is there for you

The Standard helps shield your finances by paying benefits directly to you. And you get to decide how you spend that money.

3 Focus on getting better

With The Standard helping cover your out-of-pocket or everyday expenses, you get to concentrate on what's most important to you, getting better.

Here's what it does:

- Pays you directly, so you can choose how to spend the money
- Goes with you if you leave your employer
- Provides coverage without answering any medical questions
- Covers children at a 50% of your benefit amount at no additional cost
- Gives you the option to cover your spouse

This coverage from Standard Insurance Company (The Standard) helps fill the gap caused by out-of-pocket costs, creating a financial safety net for you and your family.

Here's how it works:

Cancer: Shayna beat cancer, but faced many costs she didn't expect. There were her medical plan's copays for doctor visits and what she owed for chemotherapy after meeting her deductible. She also bought hair prosthetics, paid for travel to specialists, and had alternative treatments. The benefits from Shayna's Critical Illness insurance helped cover the expenses. And, her plan also gave her access to Health Advocate™. Through this service, Shayna received the support of a personal guide who helped her make sense of her diagnosis and treatment options.

Here's an example of what this benefit could cover:

Example Of Out-Of-Pocket Expenses

Medical plan	\$1,400
Lost wages	\$5,000
Alternate treatments and diets not covered by medical plan	\$4,500
Total Out-Of-Pocket Expenses	\$10,900

Example Of Benefits

Critical Illness Benefit Option	\$10,000
Total Out-Of-Pocket Expenses	\$10,900
Remaining Out-Of-Pocket Expenses	\$900
Remaining Benefit For Other Expenses	\$0

These are the benefit options you may elect:

Coverage for	Coverage Amount
You	Flat amount of \$10,000, \$20,000 or \$30,000
Your spouse	Flat amount of \$5,000, \$10,000, or \$15,000, as long as it's not more than 50 percent of your coverage amount
Your children	Automatically covered at 50% of your coverage amount

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

Affordable Group Rates

Because you'll be buying this insurance through Southern Methodist University, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck.

The premiums per paycheck you would pay for Critical Illness insurance benefits are below.

	Employee Monthly Attained Age Premiums					
Coverage	Employee's	Age as of 1st	of the month c	oinciding with	or next follow	ving birthday
Amount	18-29	30-39	40-49	50-59	60-69	70+
\$10,000	\$3.10	\$4.80	\$10.20	\$21.40	\$39.80	\$97.00
\$20,000	\$6.20	\$9.60	\$20.40	\$42.80	\$79.60	\$194.00
\$30,000	\$9.30	\$14.40	\$30.60	\$64.20	\$119.40	\$291.00

Spouse Monthly Attained Age Premiums						
Coverage	Employee's	Age as of 1st	of the month c	oinciding with	or next follow	ving birthday
Amount	18-29	30-39	40-49	50-59	60-69	70+
\$5,000	\$1.55	\$2.40	\$5.10	\$10.70	\$19.90	\$48.50
\$10,000	\$3.10	\$4.80	\$10.20	\$21.40	\$39.80	\$97.00
\$15,000	\$4.65	\$7.20	\$15.30	\$32.10	\$59.70	\$145.50

With Critical Illness insurance, you can:

- Protect your loved ones. Cover your spouse up to \$15,000, as long as it's not more than 50 percent of your benefit amount. Your kids are automatically covered at 50 percent of the amount elected for yourself for the same critical illnesses that you are. Kids are also covered for 21 additional childhood diseases, including cystic fibrosis, Down syndrome, muscular dystrophy, spina bifida and cerebral palsy.
- Receive a benefit for taking care of your health.
 You and your covered loved ones receive a Health
 Maintenance Screening benefit of \$50 once per
 calendar year when visiting the doctor for a covered
 wellness screening, which may include a novel
 infectious disease test (including COVID-19) or a
 mammogram that typically cost you nothing under
 your medical insurance.
- Receive additional benefits. If you are diagnosed
 with a covered illness again after a treatment-free
 period of 6 months, you will receive 100 percent of the
 original benefit amount. If you are diagnosed with a
 different and subsequent covered illness after the
 diagnosis of the first critical illness, you will receive an
 additional Critical Illness insurance benefit.
- Access a Health Advocate*. Additional services available through Health Advocate, include access to specialists for a second opinion upon approval of a covered claim.
- Update your coverage as needed. As your life circumstances change, increase or decrease your coverage, in accordance with your employer's plan.

Covered Conditions

Receive 100 percent of your coverage amount for:

- · Heart attack
- Stroke
- Cancer (cancer that has spread beyond initial tissue)
- End stage renal (kidney) failure
- Major organ failure
- Coma
- · Paralysis of two or more limbs
- · Loss of sight
- Occupational HIV
- · Occupational Hepatitis

Receive 25 percent of your coverage amount for:

- Severe coronary artery disease with recommendation for bypass
- Cancer that has not spread beyond initial tissue, also known as Carcinoma in situ

Payment of benefits is subject to the terms and conditions of the group critical illness policy and insurance certificate. These plan documents are the final arbiter of coverages.

Diagnosis and recommendation must occur after your coverage becomes effective.

Please see your certificate for full medical definitions that guide eligibility for payment, which may differ slightly from commonly used terms.

^{*} Health Advocacy services are provided through an arrangement with Health Advocate, a leading health advocacy and assistance company. Health Advocate is not affiliated with The Standard or any insurance or third-party provider, and does not replace health insurance coverage, provide medical care or recommend treatment.

Important Details

Here's where you'll find the details about Critical Illness Insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage through direct bill if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be 18 years old or older, a regular employee of Southern Methodist University, actively working in the United States at least 20 hours per week, and a citizen or resident of the United States.

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

You can choose to cover your spouse, 18 years old or older, a person to whom you are legally married, or your domestic partner as recognized by law or by your employer's domestic partnership policy, if applicable. You can also cover your child(ren) from birth through age 25. Your child(ren) 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.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, 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 or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Annual Open Enrollment

You may enroll for coverage for you and your spouse up to the maximum amount if you enroll within 31 days after becoming eligible. However, if you do not enroll during this period or want to increase your coverage up to the maximum amount, you may do so during your employer's annual open enrollment period.

Reoccurrence Benefit

If you or your dependents receive a benefit for a covered critical illness and are later diagnosed with the same critical illness, a one-time reoccurrence benefit will be paid if you or your dependents have:

- Been continuously insured under the group policy between the initial and subsequent diagnosis or recommendation
- Served a 6-month treatment-free period in connection with the critical illness during which you or your dependents did not:
 - Consult a physician or other licensed medical professional
 - Receive medical treatment, services or advice
 - Undergo diagnostic procedures, including self-administered procedures
 - Take prescribed drugs or medications

Exclusions

Benefits are not payable if a critical illness is caused or contributed to by any of the following:

- · War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism
- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state the critical illness occurred, unless used or consumed according to the directions of a physician
- Elective surgery or other procedure which:
 - Does not promote the proper function of your or your dependent's body or prevent or treat sickness or injury
 - Is directed at improving your or your dependent's appearance, unless such surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurement

Note: This exclusion will not apply to a critical illness caused or contributed to by your or your dependent's donation of an organ or tissue.

When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you may 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.

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, if you meet the policy conditions, for one of the specific diseases or health conditions named in the policy. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

This is a limited benefit policy.

GP0614-CI, GP0614-CI FLORIDA, GP0614-CI FLL, GP0614-CI 1122, GP0614-CI MO, GP0614-CIw/GC0614-CI, GP0614-CI 042021, GP0614-CI PA, GP0614-CI AA

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

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7885814-1335189



Group Hospital Indemnity Insurance Keep your finances on track when you're in the hospital.

You're admitted to the

Your health insurance covers many costs of your stay and treatment. But you still have a lot of expenses, providers - upon approval of your including deductibles, copays, and other costs you couldn't predict.

We send you a check.

The Standard will send a check directly to you - not to your medical handle the costs of your hospital claim. You decide how you spend the money.

You focus on recovering.

With The Standard helping you stay, you get to concentrate on what matters most - your health.

Here's what it does:

- Pays you directly, so you can choose how to spend the money
- Goes with you if you leave your employer
- Provides coverage without answering any medical guestions
- Gives you the option to cover your spouse and children
- **Protects your HSA Account**
- Provides the convenience of having your premium payments deducted directly from your paycheck

This coverage from Standard Insurance Company (The Standard) can help protect your finances and provides you peace of mind.

Here's how it works:

Ruptured Ulcer: Kim is out of town on a business trip when she experiences abdominal pain and a racing heartbeat. Diagnosis: ruptured gastric ulcer. She is rushed to the hospital, admitted and taken into surgery. She ends up being hospitalized for 10 days, three of which are in a critical care unit. Kim's spouse leaves their two kids with their daycare provider and flies to be at her side. The family now faces additional costs for medical bills, travel, and childcare amounting to \$3,850.

Here's what your plan would cover for this example:

Benefits Paid to You	Benefit Amount
Hospital admission	\$1,000
Hospital confinement (10 days)	\$2,500
Critical care unit confinement (3 days)	\$750
Total paid to you	\$4,250

Here's what it would cost you:

Coverage for	Monthly Premiums
You	\$17.85
You and your spouse	\$30.36
You and your children	\$25.71
You, your spouse and your children	\$45.44

Here's what it covers:

Benefits Paid to You	Benefit Amount
Hospital Admission ¹	\$1,000 Maximum 1 per calendar year
Lighty Hospital Continement '	\$250 per day Maximum 15 days per stay
Daily Critical Care Unit Confinement ^{1,2}	\$250 per day Maximum 15 days per stay

¹ Defined as a stay for at least 20 consecutive hours in a hospital setting.

Additional Benefits

Waiver of Premium - Premium waived if you are confined to a hospital for more than 30 days.

Health Maintenance Screening Benefit — Pays a \$50 benefit once per insured per calendar year for receiving a covered wellness screening, which may include a novel infectious disease test (including COVID-19) or a mammogram.

Protect your HSA Account — Hospital Indemnity insurance provides financial protection while you are building your HSA assets. Contact your employer to determine if this Hospital Indemnity plan impacts the taxability of your contributions to an HSA. It's protection that's also convenient: Your premium payments can be deducted directly from your paycheck.

² Payable in addition to the Hospital Admission and Daily Hospital Confinement benefit you may be eligible to receive.

Important Details

Here's where you'll find the details about Hospital Indemnity insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage through direct bill if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be 18 years old or older, a regular employee of Southern Methodist University actively working in the United States at least 20 hours per week, and a citizen or resident of the United States.

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

You can choose to cover your spouse, 18 years old or older, a person to whom you are legally married, or your domestic partner as recognized by law or by your employer's domestic partnership policy, if applicable. You can also cover your children from birth through age 25. 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. You cannot be insured as both an individual and a dependent.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, 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 or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Annual Open Enrollment

You may enroll for coverage for you and your dependents if you enroll within 31 days after becoming eligible. However, if you do not enroll during this period, you may do so during your employer's annual open enrollment period.

Waiver of Premium

Your insurance will continue without payment of premiums if you are confined in a hospital for more than 30 days in a row. We will waive payment of premium for your insurance from the 31st day of your confinement until the last day of the month you are in the hospital.

Exclusions

Benefits are not payable if an injury or sickness is caused or contributed to by any of the following:

- War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism
- · Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug, or alcohol in excess of the legal limit in the state in which the injury occurred, unless used or consumed according to the directions of a Health Care Provider.
- Travel or flight in or on any aircraft, except as a farepaying passenger on a commercial aircraft
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function resulting from an injury or sickness
- Any injury or sickness which arises out of or in the course of you or your dependent being incarcerated in a jail, penal or correctional institution
- Dental care or dental procedures, unless treatment is the result of an injury
- Routine newborn nursing or well-baby care
- Hospital confinement of a newborn child following the child's birth unless the confinement is as a result of an injury or sickness
- Riding in or driving any automobile in a race, stunt show or speed test

When Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you may 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.

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.

 For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

This is a limited benefit policy.

GP0614-HI, GP0614-HI FLL, GP0614 0423, GP0614-HI 0123, GP0614-HI PA

SI 17617-D-TX-750966 (8/25)

7885814-1335195





Health Maintenance Screening Benefit

Maintain Your Wellness

Regular checkups are important to maintain your health. With the Health Maintenance Screening Benefit¹, or the HMS Benefit, **you can keep wellness top of mind.** This benefit is offered with most Standard Insurance Company's Supplemental insurance products. After submitting a claim, you can receive benefit payments once per calendar year when you or your covered loved ones complete one of the screenings listed below.

Available Screenings²

- Abdominal aortic aneurysm ultrasound
- Ankle Brachial Index, or ABI, screening for peripheral vascular disease
- Biopsies for cancer
- Bone density screening
- Breast ultrasound
- Cancer antigen 125, or CA 125, blood test for ovarian cancer
- Cancer antigen 15-3, or CA 15-3, for breast cancer
- Carcinoembryonic antigen, or CEA, blood test for colon cancer
- Colonoscopy
- Complete Blood Count, or CBC

- Comprehensive Metabolic Panel, or CMP
- Novel infectious disease testing, such as COVID-19
- Electrocardiogram, or EKG
- Hemoccult stool analysis
- Hemoglobin AIC
- Human Papillomavirus, or HPV, vaccination
- Lipid panel
- Mammography
- Mental Health Assessment
- Pap smears or thin prep pap test
- Prostate specific, or PSA, test
- Stress test on a bicycle or treadmill



Schedule your health screening test today, submit your claim and receive your direct benefit payments.

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- 1 HMS is not available in all states or on all products.
- 2 Not all screenings are available in all states or on all products. Please reference your certificate.

Group Accident, Critical Illness and Hospital Indemnity insurance are limited benefit policies. Critical Illness insurance is called Specified Disease in Vermont. Hospital Indemnity insurance is not available in all states.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

GP0614-ACC, GP0614-ACC FLORIDA, GP0614-ACC 0323, GP0614-ACC PA, GP0614-CI, GP0614-CI FLORIDA, GP0614-CI FLL, GP0614-CI 1122, GP0614-CI MO, GP0614-CIw/GC0614-CI, GP0614-CI 042021, GP0614-CI PA, GP0614-CI AA, GP0614-HI, GP0614-HI FLL, GP0614-0423, GP0614-HI 0123, GP0614-HI

Health Maintenance Screening List Implementation

Standard Insurance Company Southern Methodist University Group Policy #750966 Effective Date January 1, 2015



Group Basic Life Insurance

Group Basic Life insurance from Standard Insurance Company helps provide financial protection by promising to pay a benefit in the event of an eligible member's covered death.

The cost of this insurance is paid by Southern Methodist University.

Eligibility

Definition of a Member	You are a member if you are an active benefit eligible employee of Southern Methodist University and regularly working at least 20 hours each week.
	You are not a member if you are a temporary or seasonal employee, a full-time member of the armed forces, a leased employee, an independent contractor or a part-time faculty member (e.g adjunct, visiting or lecturer).
Class Definition	Class 1 - All Members who are not in Classes 2, 3 or 4 (President)
	Class 2 - Members electing a maximum benefit of \$50,000
	Class 3 - Postdoctoral Fellows Members
Eligibility Waiting Period	You are eligible on the date you become a member.

Benefits

Basic Life Coverage Amount	Class 1 - 1.5 times your annual earnings to a maximum of \$750,000 Class 2 - 1.5 times your annual earnings to a maximum of \$50,000 Class 3 - \$10,000
Life Age Reductions	Basic Life insurance coverage amount reduces to 65 percent at age 65, to 45 percent at age 70, to 30 percent at age 75, to 20 percent at age 80, to 15 percent at age 85 and to 10 percent at age 90.

Other Basic Life Features and Services

- Accelerated Benefit
- · Life Services Toolkit
- · Portability of Insurance
- · Repatriation Benefit

- Right to Convert Provision
- Standard Secure Access account payment option
- Travel Assistance
- Waiver of Premium

This information is only a brief description of the group Basic Life insurance policy sponsored by Southern Methodist University. The controlling provisions will be in the group policy issued by The Standard. The group policy contains a detailed description of the limitations, reductions in benefits, exclusions and when The Standard and Southern Methodist University may increase the cost of coverage, amend or cancel the policy. A group certificate of insurance that describes the terms and conditions of the group policy is available for those who become insured according to its terms. For complete details of coverage, contact your human resources representative.

SI 13279-D-TX-750966-C1,C2,C3 (10/24)

7885814-1335202



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

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? 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 You:	1 – 5 times your annual earnings up to \$750,000
	For Your Spouse:	1 times your annual earnings or \$50,000, whichever is less
	For Your Child(ren):	\$10,000
What is the Guarantee Issue Maximum? Depending on your eligibility, this is the maximum amount of coverage you may apply for during initial enrollment without answering health questions. To apply for an amount over the guarantee issue, visit https://myeoi.standard.com/750966 to complete and submit a medical history statement online.	For You:	Up to 3 times your annual earnings or \$500,000 , whichever is less

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

How Much Life Insurance Do You Need?

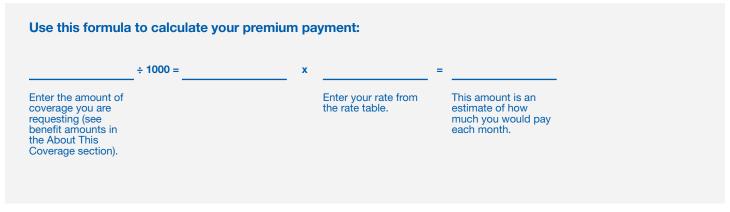
After a death in the family, there are many unexpected expenses. Your benefits could help your family pay for:

- · 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 Southern Methodist University. 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 spouse's age and your spouse's rate.

If you buy Dependents Life coverage for your child(ren), your monthly premium is \$1.90 for \$10,000, no matter how many children you're covering.

Age (as of January 1)	Your Rate (Per \$1,000 of Total Coverage)	Your Spouse's Rate (Per \$1,000 of Total Coverage)
<30	\$0.06	\$0.06
30–34	\$0.08	\$0.08
35–39	\$0.09	\$0.09
40–44	\$0.11	\$0.11
45–49	\$0.19	\$0.19
50–54	\$0.31	\$0.31
55–59	\$0.52	\$0.52
60–64	\$0.83	\$0.83
65–69	\$1.31	\$1.31
70–74	\$2.84	\$2.84
75-79	\$6.29	\$6.29
80-84	\$19.17	\$19.17
85-89	\$55.55	\$55.55
90-94	\$214.83	\$214.83
95+	\$284.07	\$284.07

Important Details

Here's where you'll find the details about the plan.

Eligibility Requirements

To be eligible for coverage, you must be insured for Basic Life insurance through The Standard, an active benefit eligible employee of Southern Methodist University, and regularly working at least 20 hours per week.

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, or your domestic partner as recognized by law.

You may also choose to cover your child. Child means your child from live birth through age 24. Please note:

- Your child cannot be insured by more than one employee.
- Your spouse and/or child(ren) must not be full-time member(s) of the armed forces.
- You cannot be insured as both an individual and a spouse.

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, if required
- Eligible but not insured under the prior life insurance plan

Visit https://myeoi.standard.com/750966 to complete and 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 insurance, your insurance, including any Dependents Life 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 human resources representative or plan administrator for further information about the applicable coverage effective date for your insurance, including any Dependents Life insurance.

*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 65 percent at age 65, to 45 percent at age 70, to 30 percent at age 75, to 20 percent at age 80, to 15 percent at age 85 and to 10 percent at age 90. Your spouse's coverage amount reduces by your spouse's age as follows: to 65 percent at age 65, to 45 percent at age 70, to 30 percent at age 75, to 20 percent at age 80, to 15 percent at age 85 and to 10 percent at age 90. If you or your spouse are age 65 or over, ask your Human Resources representative or plan administrator for the amount of coverage available.

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 spouse 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 human resources representative or plan administrator.

Group Insurance Certificate

If coverage becomes effective and you become insured, you may 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.

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

SI 12506-D-AL-TX-750966-C1,C2,C3 (8/25)

7885814-1335205

The Life Services Toolkit

Resources and Tools to Support You and Your Beneficiary



Group Life insurance through your employer gives you assurance that your family will receive some financial assistance in the event of a death. But coverage under a group Life policy from Standard Insurance Company (The Standard) does more than help protect your family from financial hardship after a loss. We have partnered with Health AdvocateSM to offer a lineup of additional services that can make a difference now and in the future.

Online tools and services can help you create a will, make advance funeral plans and put your finances in order. After a loss, your beneficiary can consult experts by phone or in person, and obtain other helpful information online.

The Life Services Toolkit is automatically available to those insured under a group Life insurance policy from The Standard.

Services to Help You Now

Visit the Life Services Toolkit website at <u>standard.com/mytoolkit</u> and enter user name "assurance" for information and tools to help you make important life decisions.

- Estate Planning Assistance: Online tools walk you through the steps to prepare a will and create other documents, such as living wills, powers of attorney and advance directives.
- **Financial Planning:** Consult online services to help you manage debt, calculate mortgage and loan payments, and take care of other financial matters with confidence.
- **Health and Wellness:** Timely articles about nutrition, stress management and wellness help employees and their families lead healthy lives.
- **Identity Theft Prevention:** Check the website for ways to thwart identity thieves and resolve issues if identity theft occurs.
- Funeral Arrangements: Use the website for guidance on how to begin, to educate yourself on funeral costs, find funeral-related services and make decisions about funeral arrangements in advance.

If you are a recipient of an Accelerated Death Benefit, you may access the services for beneficiaries outlined on the next page.



Life Services Toolkit is provided through an arrangement with Health AdvocateSM and is not affiliated with Standard Insurance Company. Health Advocate is solely responsible for providing and administering the included service. This service is only available while insured under Standard Insurance Company's life insurance policy. Standard Insurance Company may change providers or terminate service at any time.

1 An Accelerated Death Benefit or Accelerated Benefit allows a covered individual who becomes terminally ill to receive a portion of the Life insurance proceeds while living, if all other eligibility requirements are met.

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The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

Life Services EE D (1/25)

Services for Your Beneficiary

Life insurance beneficiaries² can access services for 12 months after the beneficiary receives the Life claim letter from The Standard. Recipients of an Accelerated Death Benefit can access services for 12 months after the date of payment.

These supportive services can help your beneficiary cope after a loss:

• **Grief Support:** Care Managers with advanced training are on call to provide confidential grief sessions virtually or in person. Your beneficiaries are eligible for up to three face-to-face sessions.

Our Care Managers may offer your beneficiaries additional grief support through support kits sent to their home, based on each individual's needs. As part of this program, age-appropriate books can be sent for children and teens.

- Legal Services: In addition to online estate planning tools, your beneficiaries can obtain legal assistance from experienced attorneys.
 They can schedule an initial office visit or a telephone consultation for up to 30 minutes with a network attorney. Beneficiaries who wish to retain a participating attorney after the initial consultation receive a 25% rate reduction from the attorney's normal hourly or fixed-fee rates.
- **Financial Assistance:** Your beneficiaries can schedule up to 30-minute telephone sessions with financial counselors who can help with issues such as budgeting strategies, and credit and debt management.
- **Support Services:** During an emotional time, your beneficiaries can receive help planning a funeral or memorial service. WorkLife advisors can guide them to resources to help manage household repairs and chores, find child care and elder care providers or organize a move or relocation.
- Online Resources: Your beneficiaries can easily access additional services and features on the Life Services Toolkit website for beneficiaries, including online resources about funeral costs, find funeral-related services and make decisions about funeral arrangements.



Beneficiaries can participate in phone consultations or in-person meetings with trained grief counselors.

For beneficiary services, visit standard.com/mytoolkit (user name: support) or call the assistance line at 800.378.5742

2 32

² The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates, charities.

Travel Assistance

Explore the World with Confidence

Things can happen on the road. Passports get stolen or lost. Unforeseen events or circumstances derail travel plans. Medical problems surface at the most inconvenient times. Travel Assistance can help you navigate these issues and more at any time of the day or night.1

You and your spouse are covered with Travel Assistance — and so are kids through age 25 — with your group insurance from Standard Insurance Company (The Standard).2

Security That Travels with You

Travel Assistance is available when you travel more than 100 miles from home or internationally for up to 180 days for business or pleasure. It offers aid before and during your trip, including:



Visa, weather and currency exchange information, health inoculation recommendations, country-specific details and security and travel advisories



Credit card and passport replacement and missing baggage and emergency cash coordination



Help replacing prescription medication or lost corrective lenses and advancing funds for hospital admission



Emergency evacuation to the nearest adequate medical facility and medically necessary repatriation to the employee's home, including repatriation of remains³



Connection to medical care providers, interpreter services, local attorneys and assistance in coordinating a bail bond



Return travel companion if travel is disrupted due to emergency transportation services or care of minor children if left unattended due to prolonged hospitalization



Assistance with the return of your personal vehicle if your emergency transportation services leave it stranded



Evacuation arrangements in the event of a natural disaster, political unrest and social instability

Contact Travel Assistance

800.872.1414

United States, Canada, Puerto Rico, U.S. Virgin Islands and Bermuda

Everywhere else +1.609.986.1234

Text:

+1.609.334.0807

Email:

medservices@assistamerica.com

Get the App

Get the most out of Travel Assistance with the Assist America Mobile App.

Click one of the links below or scan the QR code to download the app. Enter your reference number and name to set up your account. From there, you can use valuable travel resources including:

- One-touch access to Assist America's Emergency **Operations Center**
- Worldwide travel alerts
- Mobile ID card
- Embassy locator

Reference Number: 01-AA-STD-5201







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- 1 Travel Assistance is provided through an arrangement with Assist America, Inc. and is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program Description. Assist America, Inc. is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.
- 2 Spouses and children traveling on business for their employers are not eligible to access these services during those trips.
- 3 Participants are responsible for arranging transportation from the point of injury or illness to the initial point of medical care or assessment and the cost related to this transportation. Any emergency evacuation services provided by Assist America, Inc. must be arranged by Assist America, Inc.

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. Travel Assistance EE

(8/24)



Group Accidental Death & Dismemberment Insurance

Enhance Your Safety Net With Protection Against Unexpected Loss

Accidental Death & Dismemberment (AD&D) insurance helps protect against the sudden financial loss often brought on by an accidental death. It can also help you pay for unexpected expenses associated with surviving an accident that results in a severe physical loss. You can elect to cover your eligible spouse and children as well.



This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- · Coverage for accidental death and dismemberment

② About This Coverage

How Much Can I Apply For?	For You:	\$10,000 – \$500,000 in increments of \$10,000
Note: You can't buy more coverage for your spouse and child(ren) than you buy for yourself. The coverage amount for child(ren) cannot exceed \$25,000.	For Your Family:	
	Spouse:	60% of your AD&D coverage amount
	Child:	20% of your AD&D coverage amount for each child

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

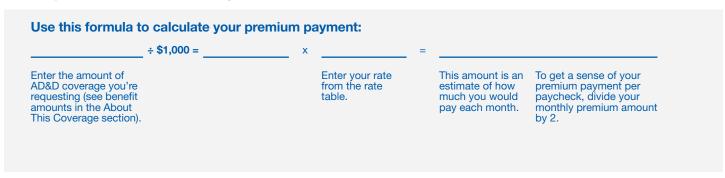
■ Additional Features

Your coverage comes with some added features:

Seat Belt and Air Bag Benefits	The Standard may pay an additional benefit if you die while wearing a seat belt, provided certain conditions are met. If the car's air bags deploy during an accident, an air bag benefit may also be payable.
Family Benefits Package	This package is designed to help surviving family members maintain their standard of living and pursue their dreams. Included in the package are benefits to help with child care, career adjustment for your spouse and higher education for your children.
Public Transportation	The Standard may pay an additional benefit if you die as a result of an accident that occurs while you're riding as a fare-paying passenger on public transportation.
Occupational Assault	The Standard may pay a benefit if you die or are dismembered as a result of an act of workplace violence that is punishable by law.

S How Much Your Coverage Costs

Because this insurance is offered through Southern Methodist University, you'll have access to competitive group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. How much your premium costs depends on the benefit amount you elect.



If you buy coverage for your family (spouse and children), your monthly rate is shown in the table below. Use the same formula to calculate the premium that you used for yourself, but use the appropriate rate for the premium you are calculating.

Coverage for	Cost per \$1,000 of Coverage
You	\$0.020
You and your family	\$0.035

Important Details

Here's where you'll find the details about the plan.

Eligibility Requirements

To be eligible for coverage, you must be an active benefit eligible employee of Southern Methodist University and regularly working at least 20 hours per week.

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

If you buy AD&D insurance for yourself, you can also buy AD&D coverage for your family - your spouse and child(ren). Your spouse is defined as a person to whom you are legally married, or your domestic partner as recognized by law. Child means your unmarried child from live birth through age 24. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

Coverage Effective Date

To become insured, you must

- Meet the eligibility requirements listed in the previous sections,
- Serve an eligibility waiting period*,
- · 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 insurance, including AD&D insurance for your dependents, 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, including AD&D insurance for your dependents.

*Defined as date you become a member

Age Reductions

Under this plan, your coverage amount reduces to 50 percent at age 75 and to 25 percent at age 80. If you are age 75 or over, ask your human resources representative or plan administrator for the amount of coverage available.

AD&D Benefits

The amount of your or your dependent's AD&D benefit for losses covered under this plan is a percentage of the amount of your or your dependent's AD&D insurance in effect on the date of the covered accident as shown below.

No more than 100 percent of the AD&D benefit will be paid for all losses resulting from one accident.

Any loss must be caused solely and directly by an accident within 365 days of the accident. A certified copy of the death certificate is needed to prove loss of life.

Covered loss:	Percentage of AD&D benefit payable:
Life ¹	100%
One hand or one foot ²	50%
Sight in one eye, speech or hearing	ng in both ears 50%
Two or more of the losses listed a	above 100%
Thumb and index finger of the sa	me hand ³ 25%
Quadriplegia	100%
Hemiplegia	66 2/3%
Paraplegia	66 2/3%
Uniplegia	50%
Triplegia	75%

All other losses must be certified by a physician in the appropriate specialty determined by The Standard.

- 1 Includes loss of life caused by accidental exposure to adverse weather conditions or disappearance if disappearance is caused by an accident that reasonably could have resulted in your death.
- 2 Even if the severed part is surgically re-attached. This benefit is not payable if an AD&D benefit is payable for quadriplegia, hemiplegia, paraplegia, uniplegia or triplegia involving the same hand or foot.
- 3 This benefit is not payable if an AD&D benefit is payable for the loss of the entire hand.

Exclusions

You are not covered for death or dismemberment caused or contributed to by any of the following:

- Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot
- Suicide or other intentionally self-inflicted injury, while sane or insane
- War or act of war (declared or undeclared), whether civil or international, and any substantial armed conflict between organized forces of a military nature
- Voluntary 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

Group Accidental Death & Dismemberment Insurance

- · Heart attack or stroke
- Medical or surgical treatment for any of the above
- Boarding, leaving or being in or on any kind of aircraft, unless you are a fare-paying passenger on a commercial aircraft

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 AD&D 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 may 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.

GP494-ADD/S399, GP310-ADD, GP609-ADD

SI 15455-D-TX-750966 (8/25)

7885814-1335212



Group Short Term Disability Insurance

Protect your income and those who depend on it.

This coverage replaces a portion of your income when you can't work because of a qualifying disability. Even if you're healthy now, it's important to protect yourself and the people who count on your income. This insurance can help you pay the bills when you're unable to work.



This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits for a qualifying disability that is not work-related

② About This Coverage

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

What Your Benefit Provides

This is the benefit you'd receive if you were to suffer a qualifying disability. Eligible earnings are your weekly insured predisability earnings, as defined by the group policy. Your benefit amount will be reduced by deductible income; see the Important Details section for a list of deductible income sources.

60% of your eligible earnings, up to a maximum benefit of \$2,500 per week. Plan minimum \$15 per week.

Benefit Waiting Period

If you suffer a qualifying disability, your benefit waiting period is the length of time you must be continuously disabled before you can begin receiving your weekly benefit.

14 days for accidental injury

14 days for physical disease, pregnancy or mental disorder

Extended Benefit Waiting Period

This applies if you do not apply for this coverage within 31 days of becoming eligible, were eligible for coverage under a prior plan for more than 31 days but were not insured, or if your insurance ends because you failed to pay your premium and is later reinstated.

60 days for any qualifying disability caused by physical disease, pregnancy or mental disorder occurring during the first 12 months of coverage.

How Long Your Benefits Last

This is the maximum length of time you could be eligible to receive a weekly disability benefit.

90 days

■ Additional Features

Your coverage comes with some added features:

Return to Work Incentive	Your disability benefit will not be reduced by any work earnings you receive until the combined amount of the benefit and your work earnings exceeds 100% of your predisability earnings.
Help with Returning to Work	If a worksite modification would enable you to return to work, we can help your employer make approved modifications by covering some or all of the cost.
Health Advocacy Select	While you're out on short term disability claim, you can connect with a Personal Health Advocate who'll help you navigate the complexities of the healthcare system. From start to finish, you'll work with one person sparing you the headache of explaining your concerns to someone who might be unfamiliar with your situation.
	NOTE: Health Advocacy services are provided through an arrangement with a service provider, which is not affiliated with The Standard or any insurance or third-party. Health Advocate does not replace health insurance coverage, provide medical care or recommend treatment.

Show Much Your Coverage Costs

Because this insurance is offered through Southern Methodist University, you'll have access to competitive group rates that 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 benefit amount.

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Enter your weekly earnings (cannot be more than \$4,167).		Enter your rate from the rate table.		This amount is an estimate of how much you'd pay each month.

Your Age (as of January 1)	Rate per \$10 of weekly benefit
<25	\$0.13
25–29	\$0.54
30–34	\$0.57
35–44	\$0.28
45–49	\$0.13
50–54	\$0.14
55–59	\$0.18
60–64	\$0.19
65–69	\$0.22
70+	\$0.230

Not being able to work also means not being able to earn a paycheck.

As you consider Short Term Disability insurance, think about the expenses you would need to cover if you were to become disabled:

- Mortgage or rent
- Utilities
- Groceries
- Medical bills
- Car insurance
- · Childcare costs

To estimate your insurance needs, you'll need to consider your unique circumstances.

Use our online calculator at www.standard.com/disability/needs.

Important Details

Here's where you'll find the details about the plan.

Eligibility Requirements

To be eligible for coverage, you must be a regular benefit eligible employee of Southern Methodist University, actively working at least 20 hours per week, and a citizen or resident of the United States or Canada.

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

Employee Coverage Effective Date

To become insured, you must:

- · Meet the eligibility requirements listed above
- Serve an eligibility waiting period*
- · Apply for coverage and agree to pay premiums
- 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 or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

*Defined as first day that follows 90 consecutive days as a member

Definition of Disability

You will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity the material duties of your own occupation, and
- You suffer a loss of at least 20% in your predisability earnings when working in your own occupation.

You are not considered disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury, while sane or insane

- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- The loss of your professional or occupational license or certification
- An activity arising out of or in the course of any employment for wage or profit

Limitations

Short Term Disability benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty, as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution
- Able to work and earn at least 20% of your predisability earnings in your own occupation but you elect not to
- Eligible to receive benefits for your disability under a workers' compensation law or similar law

When Your Benefits End

Your Short Term Disability benefits end automatically on the date any of the following occur:

- You are no longer disabled
- Your maximum benefit period ends
- Long term disability benefits become payable to you under a Long Term Disability plan
- Benefits become payable under any other disability insurance plan under which you become insured through employment during a period of temporary recovery
- You fail to provide proof of continued disability and entitlement to benefits
- You pass away

Deductible Income

Your benefits will be reduced if you have deductible income, which is income you receive or are eligible to receive while receiving Short Term Disability benefits. Deductible income includes:

- Sick pay, annual or personal leave pay, severance pay or other forms of salary continuation (including donated amounts) paid that exceeds 100% of your indexed predisability earnings when added to your Short Term Disability benefit
- Amounts under unemployment compensation law
- Amounts because of your disability from any other group insurance
- Any retirement or disability benefits received from your employer's retirement plan which are not attributable to your contributions
- Amounts under any state disability income benefit law or similar law
- Earnings from work activity while you are disabled, plus the earnings you could receive if you work as much as your disability allows
- Earnings or compensation included in your predisability earnings which you receive or are eligible to receive while Short Term Disability benefits are payable
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

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 the group policy (or your employer's coverage under the group policy) terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date Southern Methodist University ends participation in the group policy

Group Insurance Certificate

If coverage becomes effective and you become insured, you may 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.

GP399-STD, GP899-STD, GP309-STD, GP209-STD, GP399/ASSOC, GP399-STD/TRUST

SI 12503-D-TX-750966 (8/25)

7885814-1335214

Standard Insurance Company Southern Methodist University Group Policy #750966 Effective Date January 1, 2015



Group Long Term Disability Insurance

Group Long Term Disability insurance from Standard Insurance Company helps provide financial protection for insured members by promising to pay a monthly benefit in the event of a covered disability.

The cost of this insurance is paid by Southern Methodist University.

Eligibility

Definition of a Member	You are a member if you are an active benefit eligible employee of Southern Methodist University, actively working at least 20 hours each week, and a citizen or resident of the United States or Canada.
	You are not a member if you are a part-time faculty member (e.g adjunct, visiting or lecturer), a postdoctoral fellow, a temporary or seasonal employee, a full-time member of the armed forces, a leased employee or an independent contractor.
Eligibility Waiting Period	You are eligible on the first day that follows 90 consecutive days as a member.

Benefits

Monthly Benefit	60 percent of the first \$25,000 of monthly predisability earnings, reduced by deductible income (e.g., work earnings, workers' compensation, state disability, etc.)
Maximum Monthly Benefit	\$15,000
Minimum Monthly Benefit	\$100
Benefit Waiting Period	90 days

Definition of Disability

For the benefit waiting period and the first 24 months that Long Term Disability benefits are payable, you will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity the material duties of your own occupation, and
- You suffer a loss of at least 20 percent of your predisability earnings when working in your own occupation.

You are not considered disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

After the own occupation period of disability, you will be considered disabled if, as a result of a physical disease, injury, pregnancy or mental disorder, you are unable to perform with reasonable continuity the material duties of any occupation.

Maximum Benefit Period

If you become disabled before age 62, Long Term Disability benefits may continue during disability until age 65 or 3 years 6 months, if longer. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins:

Age	Maximum Benefit Period
62	3 years 6 months
63	3 years
64	2 years 6 months
65	2 years
66	1 year 9 months
67	1 year 6 months
68	1 year 3 months
69+	1 year

Other Features and Services

- 24 hour coverage, including coverage for work-related disabilities
- Employee Assistance Program
- Reasonable Accommodation Expense Benefit
- Rehabilitation Incentive Benefit
- Rehabilitation Plan Provision

- Return to Work Incentive
- · Survivors Benefit
- Temporary Recovery Provision
- Waiver of Premium while Long Term Disability benefits are payable

This information is only a brief description of the group Long Term Disability insurance policy sponsored by Southern Methodist University. The controlling provisions will be in the group policy issued by The Standard. The group policy contains a detailed description of the limitations, reduction in benefits, exclusions and when The Standard and Southern Methodist University may increase the cost of coverage, amend or cancel the policy. A group certificate of insurance that describes the terms and conditions of the group policy is available for those who become insured according to its terms. For more complete details of coverage, contact your human resources representative.

SI 13271-D-TX-750966 (10/24)

7885814-1335216

A helping hand when you need it.



Rely on the support, guidance and resources of your Employee Assistance Program.

There are times in life when you might need a little help coping or figuring out what to do.

Take advantage of the Employee Assistance Program,¹ which includes WorkLife Services and is available to you and your family in connection with your group insurance from Standard Insurance Company (The Standard).

It's confidential — information will be released only with your permission or as required by law.

Connection to Resources, Support and Guidance

You, your dependents (including children to age 26)² and all household members can contact the program's master's-level counselors 24/7. Reach out through the mobile EAP app or by phone, online, live chat, and email. You can get referrals to support groups, a network counselor, community resources or your health plan. If necessary, you'll be connected to emergency services.

Your program includes up to three counseling sessions per issue. Sessions can be done in person, on the phone or through video.

EAP services can help with:



Depression, grief, loss and emotional well-being



Family, marital and other relationship issues



Life improvement and goal-setting



Addictions such as alcohol and drug abuse



Stress or anxiety with work or family



Financial and legal concerns



Identity theft and fraud resolution



Online will preparation and other legal documents



Contact **EAP**

888.293.6948 (TTY Services: 711) 24 hours a day, seven days a week

healthadvocate.com/standard3

NOTE: It's a violation of your company's contract to share this information with individuals who are not eligible for this service.

With EAP, personal assistance is immediate, confidential and available when you need it.

WorkLife Services

WorkLife Services are included with the Employee Assistance Program. Get help with referrals for important needs like education, adoption, daily living and care for your pet, child or elderly loved one.

Online Resources

Visit healthadvocate.com/standard3 to explore a wealth of information online, including videos, guides, articles, webinars, resources, self-assessments and calculators.

- 1 The EAP service is provided through an arrangement with Health AdvocateSM, which is not affiliated with The Standard. Health AdvocateSM is solely responsible for providing and administering the included service. EAP is not an insurance product and is provided to groups of 10–2,499 lives. This service is only available while insured under The Standard's group policy.
- 2 Individual EAP counseling sessions are available to eligible participants 16 years and older; family sessions are available for eligible members 12 years and older, and their parent or guardian. Children under the age of 12 will not receive individual counseling sessions.

Standard Insurance Company | 1100 SW Sixth Avenue, Portland, OR 97204 | 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.

Employee Assistance Program-3 EE

(3/23)



When you're sick or injured, your main focus should be on your health - not untangling medical bills, scheduling appointments and coordinating your care with specialists and other providers.



Help is Only a Phone Call Away

Fortunately, you don't have to take on the healthcare system by yourself. While you're out on a short term disability claim, you can connect with a Personal Health Advocate who'll help you navigate the complexities of the healthcare system. Simply take advantage of Health Advocacy Select, a service that's included with your group Short Term Disability insurance coverage through Standard Insurance Company (The Standard).

An Expert by Your Side

At no additional cost, you can contact Health Advocate^{SM1} and be assigned a Personal Health Advocate, typically a registered nurse, who will remain on your case until it's fully resolved. From start to finish, you'll work with one person sparing you the headache of explaining your concerns to someone who might be unfamiliar with your situation.

Your Personal Health Advocate can assist you in guickly and efficiently working through healthcare management issues.

Some ways they can help you are:

- Understand and take maximum advantage of your medical benefits.
- Make sense of your diagnosis and research treatment options.
- Find and schedule appointments with the right doctors and specialists, particularly for complex medical conditions where a second opinion is appropriate.
- Locate specialists for high-risk pregnancies and find pediatricians.
- Manage your out-of-pocket expenses by finding alternative services and cost information.
- Locate necessary post pregnancy support in the event of a difficult delivery or when complications arise.
- Resolve medical claims and billing issues.
- Find resources for services that may not be covered through your employer's health benefits program.

All cases are managed in compliance with state and federal privacy laws. Your personal medical information is kept strictly confidential.



Personal Health Advocates available Monday - Friday, 8 a.m. – 10 p.m., Eastern at:

844.450.5543

Standard Insurance Company 1100 SW Sixth Avenue Portland, OR 97204

standard.com

¹ Health Advocacy services are provided through an arrangement with Health AdvocateSM, a leading health advocacy and assistance company. Health Advocate is not affiliated with The Standard or any insurance or third-party provider, and does not replace health insurance coverage, provide medical care or recommend treatment.

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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.

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