

School District No. 1 Health and Welfare Trust

Evidence of Insurability (EOI) Requirements for Optional Term Life

When	Application Timeframe	Available Amounts			EOI Required		
		Employee ¹	Spouse ²	Child ²	Employee	Spouse	Child
Initial Enrollment	May 4, 2015 – May 29, 2015	\$10K-\$500K	\$10K-\$500K	\$2K - \$10K	>\$100K	>\$30K	None
Newly Eligible	60 Days	\$10K-\$500K	\$10K-\$500K	\$2K - \$10K	>\$100K	>\$30K	None
Annual Enrollment ³	60 Days	\$10K-\$500K	\$10K-\$500K	\$2K - \$10K	>\$10K ⁴	On any amount	On any amount
Family Status Change	31 Days	\$10K-\$500K	\$10K-\$500K	\$2K - \$10K	>\$100K less amounts currently in force	>\$30K less amounts currently in force	None

¹Not to exceed 5 times Annual Earnings

²Not to exceed 100% of the employee optional life amount

³Prior declines remain declined during Annual Enrollment

⁴Members must be currently enrolled to qualify for an additional \$10K without evidence; if not, all amounts are subject to evidence

