

VHI Plan Description & Cost Summary

Prepared For Eagle Advantage Charter School

Proposal Effective Date: 9/1/2022

Proposal Expiration Date: 9/12/2022

Eligibility

Employees:	Each Active Full-Time Employee working 30 hours or more per week, except any person working on a temporary or seasonal basis. Employee must be under age 70 to enroll.
Spouse:	An Eligible employee's legal spouse. Spouse must be under age 70 to enroll. Coverage for domestic partners may be available upon request, unless prohibited by state law. Domestic and civil union partner coverage is automatically included on the plan where required by state law.
Dependent Children	Dependent Child means an Eligible employee's child(ren), from Birth to 26 years, including natural children, legally adopted children, children who are dependent on the Eligible employee during the waiting period before adoption, stepchildren, and foster children. Foster children must be in the Eligible employee's custody to be considered a Dependent. Also included are the Eligible employee's child(ren) beyond the limiting age who is incapable of self-sustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the Eligible employee for support and maintenance.

Employee must be insured under the Policy for Dependent spouse and/or children to be insured. A person may not have coverage as both an employee and a Dependent.

Our standard eligibility includes employees who are US citizens working in the US; contact your sales office if you have employees who are not US citizens working in the US, and you would like us to consider them in the eligibility.

Additional Information

Life Event Changes	We recognize that insurance needs may change at a time that does not coincide with an annual enrollment - like the employee's marriage or divorce, or the birth or adoption of the first dependent child to be insured. We call these "life event changes" and allow the employee to apply (or if already insured, to increase or decrease his/her amount of insurance) outside of the formal enrollment period. Requirements include that the election be made within 31 days after life event change, and that the application/increase be for an amount not to exceed your case guaranteed issue amount.
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Plan Design

All Employees Eligible to select the following plan.

Coverage: 24 Hour

Benefit	Standard
<i>Benefit Waiting Period</i>	None
<i>Benefit Waiting Period for Late Applicants</i>	None
<i>Pregnancy Limitation Period</i>	None
<i>Hospital Admission Amount</i>	\$1,000
<i>Hospital Admission Max Per Year</i>	1
<i>Hospital Confinement Amount</i>	\$100
<i>Hospital Confinement Days Max Per Year</i>	30
<i>Hospital Confinement ICU Amount</i>	\$200
<i>Hospital Confinement ICU Days Max Per Year</i>	10
<i>Minimum Hours for Confinement</i>	23
<i>Maximum Benefit per Plan Year</i>	Unlimited
<i>Nursery Admission Amount</i>	\$1,000
<i>Nursery Confinement Amount</i>	\$100
<i>Nursery Confinement Days Max Per Year</i>	10
<i>Nursery Admission Max Per Year</i>	1
<i>Portability</i>	Unlimited or when employee retires
<i>Pre-Existing Limitation</i>	None
<i>Pre-Existing Limitation for Late Applicants</i>	12 month look back/12 month exclusion
<i>Military Services Leave of Absence Continuation</i>	Included

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Monthly Cost Summary

	Standard
Employee Only	\$22.12
Employee and Spouse	\$39.22
Employee and Child(ren)	\$30.67
Family	\$47.08

Note: Premium/benefit is payable in US currency.

Participation Requirement and Rate Guarantee

Participation Requirement

You must have a minimum participation the lesser of 10% or 10 Insured employee lives.

Rate Guarantee

We guarantee the final premium rates for 24 months from the Policy effective date.

Renewability

The Policy is optionally renewable.

VHI Plan Exclusions and Limitations

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Termination of Individual Insurance

An Insured's coverage will terminate on the first of the following to occur:

- the date the Policy terminates
- the date the Insured ceases to be in a class eligible for this insurance
- the end of the period for which premium has been paid
- the date the Insured enters military service on active duty (not including Reserves or National Guard)

Policy Termination

You may cancel the policy at any time. We may cancel:

- 1) If the premium is not paid at the end of the grace period
- 2) if the number of Insureds (excluding Dependents) is less than the lesser of 10% or 10 Insured employee lives;
- 3) If Optionally Renewable, then on any Policy anniversary after coverage has been in force for twelve (12) months

Pre-Existing

Pre-Existing Condition means any medical condition, whether specifically diagnosed or not, for which an Insured received medical treatment, consultation, care or services, including diagnostic procedures, or took prescribed drugs or medicines, during the 12 months immediately prior to the Insured's effective date of insurance.

Exclusions

We will not pay benefits for any loss:

- caused by committing or attempting to commit suicide, while sane or insane, or intentionally self-inflicted injuries
- caused by or resulting from war or any act of war, declared or undeclared
- caused by or resulting from riding in, getting into or out of any aircraft unless:
 - an Insured is a passenger (not a pilot or crew member) in a tested and approved civilian aircraft being operated as passenger transport in compliance with the then current rules of the authority having jurisdiction over its operation
 - the aircraft is not owned, leased or operated by or on behalf of the policyholder, an Insured, or any other employer of the Insured, unless a specific written agreement has been obtained from us
- sustained during an Insured's commission or attempted commission of an assault or felony

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- sustained during an Insured's incarceration
- caused by elective surgery, except when required for appropriate care as determined by a Physician as a result of an Insured's Injury or Sickness

VHI Plan Defined Terms

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Admitted	Admission or Admitted means an Insured receiving treatment for a Sickness or Injury in a Hospital, including an observation room or ICU, for a period of more than 23 hours.
Benefit Waiting Period	The period of time as show on the Plan Description that an Insured must be covered under the Policy before benefits are payable.
Continuation of Insurance	An Insured employee may continue his/her coverage (and that of any Insured Dependents, if applicable) in accordance with the following but not longer than: ○ twelve months, if due to sickness or Injury; or ○ one (1) month, if due to temporary lay-off or approved leave of absence. Your Policy must remain in force for an Insured's coverage to continue. Premium must be paid during the continuation period or coverage will terminate.
Eligibility	An Eligible employee means an individual who is performing duties (on a full or part time basis as defined by terms of their employment) pertaining to his/her job in the place where, and in the manner in which, the job is normally performed. This includes approved time off such as vacation, jury duty and funeral leave, but does not include time off as a result of an injury or sickness.
Emergency Room	Emergency Room definition revised to include: Emergency room shall not be limited to health care services that are provided in a licensed hospital's emergency facility by an appropriate provider.
Family and Medical Leave Act (FMLA)	Employers that are subject to the Family and Medical Leave Act of 1993 are mandated to continue group health coverage during an approved period of family or medical leave, just as if the employee was on the job during that time. FMLA does not require you to continue this group coverage, but we make continuation available as an option. Coverage may continue for the Insured employee, and Insured Dependents if applicable, until the later of the end of the leave period required by the Family and Medical Leave Act of 1993, as amended, or any similar state law and in accordance with your policies for such leave provided premium continues to be paid. If you choose not to continue coverage while the Insured employee is on FMLA, coverage will be reinstated when the Insured employee returns from such leave. A leave of absence taken in accordance with the Family and Medical Leave Act of 1993 will run concurrently with any other applicable continuation of insurance provision in the Policy.
Hospital	Hospital means a legally operated institution for the care and treatment of injured or sick persons that has organized facilities for diagnosis and surgery or has a contract with another hospital for these facilities and has 24-hour nursing service. Hospital

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excludes any institution that is primarily a rest home, nursing home, convalescent home, or a home for the aged, a facility for treatment of alcoholism or drug addiction, or a facility for treatment of mental disorders.

Hospital Indemnity Insurance

We will pay one or more of the benefits listed on the benefit schedule if the Insured meets all of the requirements defined for payment under a specific benefit. Terms used in this section are defined in the Policy.

NOTE: Benefits, limitations and exclusions may vary by state.

Injury

Injury means a sudden, unforeseeable event that causes bodily injury to an Insured resulting directly from an accident independent of all other causes which occurs while the Insured's coverage under the Policy is in force.

Insured

Insured means person(s) covered under the Policy.

Physician

Physician means a duly licensed:

- medical or osteopathic doctor; or
- medical practitioner who is recognized by the law of the jurisdiction in which treatment is provided as qualified to treat the type of Injury or Sickness for which treatment is sought.

Physician may not be the Insured or a member of the Insured's immediate family.

Portability

If the Insured employee's coverage terminates because he/she ceases to be eligible (other than termination of the Policy or the Insured employee's retirement), he/she may port (elect to continue) coverage in effect prior to ceasing to be eligible. Evidence of insurability is not required. Dependent coverage, if applicable, may not be ported independent of the Insured employee. Portability must be elected within thirty-one (31) days from the date coverage terminates, provided premium payment is made. Please refer to the Policy/Certificate for specific information on Portability requirements.

Uniformed Services Employment and Reemployment Rights Act (USERRA)

We will continue the Insured employee's coverage and that of his/her Insured Dependents, if applicable, in accordance with USERRA and your policies surrounding USERRA provided the premium continues to be paid. If you choose not to continue the Insured employee's coverage and that of his/her Insured Dependents, if applicable, we will reinstate coverage when the Insured employee returns from such leave.

Please note that while the Insured employee is on military services leave, there is no coverage for any loss which occurs while on active duty if such loss is caused by or arises out of such military service, including but not limited to war or act of war, whether declared or undeclared.

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A leave of absence taken in accordance with USERRA will run concurrently with any other applicable continuation of insurance provision in the Policy.

The foregoing information represents a brief synopsis of benefit features, limitations and exclusions under the Group Hospital Indemnity policy. For more detailed information, please refer to the Policy. Group Hospital Indemnity coverage is provided by Policy form, LRS-9572-0519, et al through Reliance Standard Life Insurance Company.

Reliance Standard Life Insurance Company is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. In New York, insurance products and services are provided through First Reliance Standard Life Insurance Company, Home Office: New York, NY. Product features and availability may vary by state.