

Richland School District One January 1 - December 31, 2027 BENEFITS GUIDE



SCAN ME



[Click Here to Visit the
Employee Benefits Center \(EBC\)](#)



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This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail.

Employee Benefits Center

A guide to your benefits!

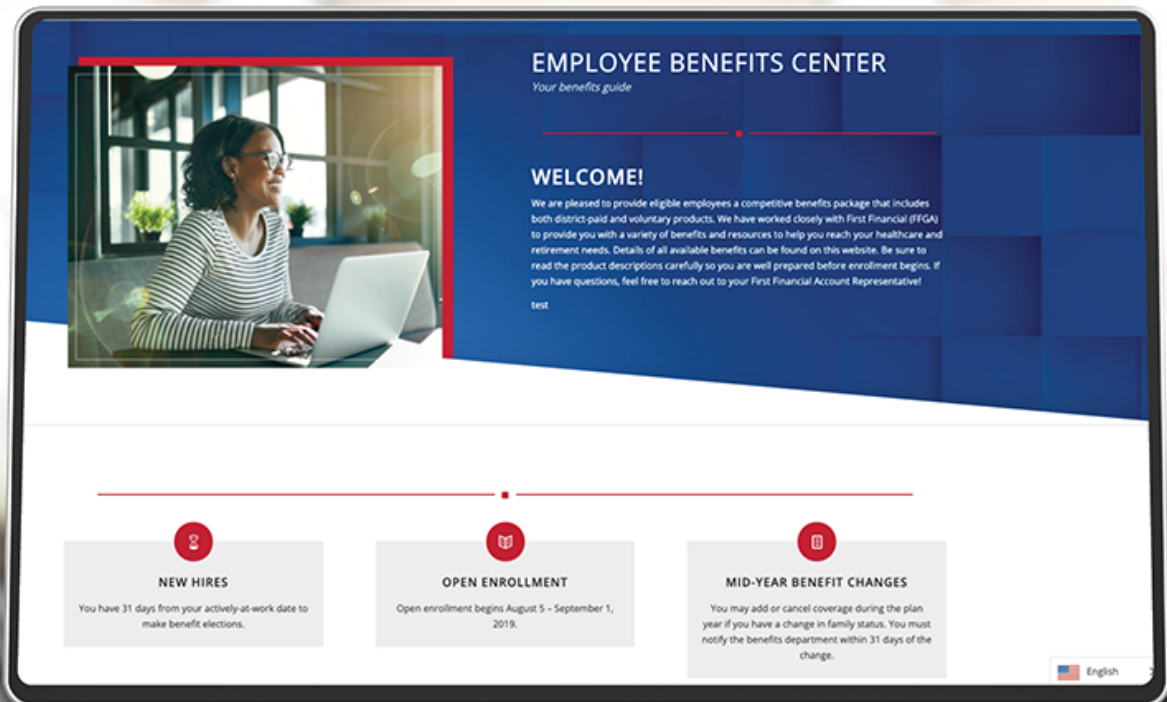
Richland School District One and FFGA are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer as well as find claim forms, important phone numbers and enrollment information.

There's no need to register for site access. Simply type the URL below into your browser and you will be directed to your Employee Benefits Center.



Scan the QR code to learn more about the plans that are available this year!

ffbenefits.ffga.com/richlandone



How to Enroll

Benefits Enrollment

On-Site Enrollment

When it's time to enroll in your benefits, your FFGA Account Representative will be on-site to assist you with making your elections. Visit your EBC for more information.

New Hires

You have 31 days from your actively-at-work date to make benefit elections.

South Carolina's state benefits are administered by the Public Employee Benefit Authority (PEBA). Learn about the benefits offered and enrollment details by visiting the PEBA website here: www.peba.sc.gov

What to Have for Your Enrollment Meeting

- Social Security number and birth dates for all dependents
- Questions about available benefits
- Birth Certificates/Marriage License for any changes to coverage
- Any life events/life status changes need to be completed with your benefits administrator at the district office

Benefit Eligibility & Coverage

Employee Coverage

Eligibility

Eligible employees must be actively at work on the plan effective date for new benefits to be effective.

New Employees

You have 31 days from your actively-at-work date to make benefit elections. Insurance coverage becomes effective on the first day of the month that follows a waiting period of 30 calendar days.

Existing Employees

When it's time to enroll in your benefits, your FFGA Account Representative will be available to assist you with making your elections. Your elections can be made anytime during annual enrollment online from your work or home computer. Before enrollment, take time to educate yourself on the available benefits and what options would work best for you and your family by visiting the Employee Benefits Center.

Mid-year Benefit Changes

You may add or cancel coverage during the plan year if you have a change in family status. You must notify the benefits department within 31 days of the change.

Qualifying Life Events Include:

- Changes in household, including marriage, divorce, legal separation, annulment, death of a spouse, birth, adoption, placement for adoption or death of a dependent child
- Loss of health coverage, attributable to your spouse's employment, losing existing health coverage including job-based, individual and student plans, losing eligibility for Medicare, Medicaid, or CHIP, turning 26 and losing coverage through a parent's plan

Declining Coverage

If you are eligible for benefits, but wish to **DECLINE** coverage, please complete the online enrollment either on your work or home computer. Under each option, you will need to select "waive." **You must still complete the beneficiary information.**

Section 125 Plans

Section 125 Plan Information & Rules

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

Here’s How It Works

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you’re already eligible – all you must do is enroll.

Is It Right For Me?

The savings you may experience with a Section 125 Plan are outlined in the example below. For instance, you could potentially take home about \$70 more each month if you participated in your employer’s Section 125 Plan – that’s a savings of \$840 a year!

You cannot change your benefit elections for the plan year unless the benefits office receives notification in writing within 31 days of the status change. If the benefits office is not notified within 31 days of the status change, no benefit change can be made until the next annual open enrollment.

- IRS specified changes in family status include:
- Change in legal married status
 - Change in number of dependents
 - Termination or commencement of employment
 - Dependent satisfies or ceases to satisfy dependent eligibility requirements
 - Change in residence or worksite that affects eligibility for coverage

Section 125 Plan Sample Paycheck		
	Without S125	With S125
Monthly Salary	\$2,000	\$2,000
Less Medical Deductions	-N/A	-\$250
Tax Gross Income	\$2,000	\$1,750
Less Taxes (Fed/State at 20%)	-\$400	-\$350
Less Estimated FICA (7.65%)	-\$153	-\$133
Less Medical Deductions	-\$250	-N/A
Take Home Pay	\$1,197	\$1,267

You could save \$70 per month in taxes by paying for your benefits on a pre-tax basis!

**The figures in the sample paycheck above are for illustrative purposes only.*

Texas Life

Permanent Life



Texas Life | www.texaslife.com | 800-283-9233

Texas Life Insurance - Permanent, Portable Life Insurance

The peace of mind voluntary, permanent life insurance provides is unmatched. It is a solid companion to your group life insurance plan. Texas Life provides life insurance that you can keep for a lifetime. The plan is easy to purchase, pay for, and keep through the convenience of payroll deduction. Coverage is affordable and dependable. Plus, Texas Life has over a century of experience protecting families and giving the peace of mind only permanent life insurance can provide.

Texas Life - Permanent Life Highlights

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121 if you pay the necessary premium on time.
- It is a permanent, universal life policy which means you can rest easy knowing your loved ones will be well taken care of when you're gone.

LIFE INSURANCE YOU CAN KEEP!

PURELIFE-PLUS

Life insurance can be an ideal way to provide money for your family when they need it most. PURELIFE-PLUS offers permanent insurance with a high death benefit and long guarantees¹ that can provide financial peace of mind for you and your loved ones. PURELIFE-PLUS is an ideal complement to any group term and optional term life insurance your employer might provide and has the following features:



IT'S AFFORDABLE
YOU OWN IT



YOU CAN TAKE IT
WITH YOU WHEN YOU
CHANGE JOBS OR RETIRE



YOU PAY FOR IT
THROUGH CONVENIENT
PAYROLL DEDUCTIONS



YOU CAN COVER YOUR
SPOUSE, CHILDREN AND
GRANDCHILDREN, TOO²



YOU CAN GET A LIVING
BENEFIT IF YOU BECOME
TERMINALLY ILL³



YOU CAN GET CASH TO COVER
LIVING EXPENSES IF YOU
BECOME CHRONICALLY ILL⁴

3 QUICK QUESTIONS

You can qualify by answering just
3 questions – no exams or needles.

DURING THE LAST SIX MONTHS, HAS THE PROPOSED INSURED:

- 1 Been actively at work on a full time basis, performing usual duties?
- 2 Been absent from work due to illness or medical treatment for a period of more than 5 consecutive working days?
- 3 Been disabled or received tests, treatment or care of any kind in a hospital or nursing home or received chemotherapy, hormonal therapy for cancer, radiation, dialysis treatment, or treatment for alcohol or drug abuse?

1. After the guarantee period, premiums may go down, stay the same or go up.
2. Coverage not available on children in WA or on grandchildren in WA or MD. In MD, children must reside with the applicant to be eligible for coverage.
3. Conditions apply.
4. Chronic Illness Rider available for an additional cost for employees only. Conditions apply. Rider not available in CA. Form ICC15-ULABR-CI-15 or Form Series ULABR-CI-15

Flexible Premium Adjustable Life Insurance to age 121. Policy Form ICC18-PRFNG-NI-18 or Form Series PRFNG-NI-18. Some limitations apply. See the PureLife-plus brochure for details. Texas Life is licensed to do business in the District of Columbia and every state but New York.



TEXASLIFE INSURANCE COMPANY

Since 1901 | 900 WASHINGTON | POST OFFICE BOX 830 | WACO, TEXAS 76703-0830

WOW!

LIFE INSURANCE YOU CAN KEEP!

PURELIFE-PLUS



IT'S AFFORDABLE
YOU OWN IT



YOU CAN TAKE IT WITH
YOU WHEN YOU CHANGE
JOBS OR RETIRE



YOU PAY FOR IT THROUGH
CONVENIENT PAYROLL DEDUCTIONS:
NO CHECKS TO WRITE OR LINKS TO CLICK



YOU CAN COVER YOUR SPOUSE, CHILDREN
AND GRANDCHILDREN, TOO¹



YOU CAN GET A LIVING BENEFIT IF YOU
BECOME TERMINALLY ILL²



YOU CAN GET CASH TO COVER
LIVING EXPENSES IF YOU BECOME
CHRONICALLY ILL³



YOU CAN QUALIFY BY ANSWERING JUST
3 QUESTIONS - NO EXAM OR NEEDLES

1. Coverage not available on children in WA or on grandchildren in WA or MD. In MD, children must reside with the applicant to be eligible for coverage.
2. Conditions apply.
3. Chronic Illness Rider available for an additional cost for employees only. Conditions apply. Rider not available in CA. Form ICC15-ULABR-CI-15 or Form Series ULABR-CI-15

Flexible Premium Adjustable Life Insurance to age 121. Policy Form ICC18-PRFNG-NI-18 or Form Series PRFNG-NI-18. Some limitations apply. See the PureLife-plus brochure for details. Texas Life is licensed to do business in the District of Columbia and every state but New York.



TEXASLIFE INSURANCE COMPANY

Since 1901 | 900 WASHINGTON | POST OFFICE BOX 830 | WACO, TEXAS 76703-0830

PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

Issue Age (ALB)	Semi-Monthly Premiums for Life Insurance Face Amounts Shown Includes Added Cost for Accidental Death Benefit (Ages 17-59) and Accelerated Death Benefit for Chronic Illness (All Ages)									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		6.53	11.93	17.33	22.73	33.53	44.33	55.13	65.93	75
21-22		6.67	12.20	17.74	23.28	34.35	45.43	56.50	67.58	74
23		6.80	12.48	18.15	23.83	35.18	46.53	57.88	69.23	75
24-25		6.94	12.75	18.57	24.38	36.00	47.63	59.25	70.88	74
26		7.22	13.30	19.39	25.48	37.65	49.83	62.00	74.18	75
27-28		7.35	13.58	19.80	26.03	38.48	50.93	63.38	75.83	74
29		7.49	13.85	20.22	26.58	39.30	52.03	64.75	77.48	74
30-31		7.63	14.13	20.63	27.13	40.13	53.13	66.13	79.13	73
32		8.04	14.95	21.87	28.78	42.60	56.43	70.25	84.08	74
33		8.32	15.50	22.69	29.88	44.25	58.63	73.00	87.38	74
34		8.73	16.33	23.93	31.53	46.73	61.93	77.13	92.33	75
35		9.28	17.43	25.58	33.73	50.03	66.33	82.63	98.93	76
36		9.55	17.98	26.40	34.83	51.68	68.53	85.38	102.23	76
37		9.97	18.80	27.64	36.48	54.15	71.83	89.50	107.18	77
38		10.38	19.63	28.88	38.13	56.63	75.13	93.63	112.13	77
39		11.07	21.00	30.94	40.88	60.75	80.63	100.50	120.38	78
40	5.38	11.75	22.38	33.00	43.63	64.88	86.13	107.38	128.63	79
41	5.76	12.72	24.30	35.89	47.48	70.65	93.83	117.00	140.18	80
42	6.20	13.82	26.50	39.19	51.88	77.25	102.63	128.00	153.38	81
43	6.59	14.78	28.43	42.08	55.73	83.03	110.33	137.63	164.93	82
44	6.97	15.74	30.35	44.97	59.58	88.80	118.03	147.25	176.48	83
45	7.36	16.70	32.28	47.85	63.43	94.58	125.73	156.88	188.03	83
46	7.80	17.80	34.48	51.15	67.83	101.18	134.53	167.88	201.23	84
47	8.18	18.77	36.40	54.04	71.68	106.95	142.23	177.50	212.78	84
48	8.57	19.73	38.33	56.93	75.53	112.73	149.93	187.13	224.33	85
49	9.06	20.97	40.80	60.64	80.48	120.15	159.83	199.50	239.18	85
50	9.61	22.34	43.55	64.77	85.98					86
51	10.27	23.99	46.85	69.72	92.58					87
52	10.99	25.78	50.43	75.08	99.73					88
53	11.54	27.15	53.18	79.20	105.23					88
54	12.09	28.53	55.93	83.33	110.73					88
55	12.69	30.04	58.95	87.87	116.78					89
56	13.24	31.42	61.70	91.99	122.28					89
57	13.90	33.07	65.00	96.94	128.88					89
58	14.51	34.58	68.03	101.48	134.93					89
59	15.17	36.23	71.33	106.43	141.53					89
60	15.59	37.29	73.45	109.62	145.78					90
61	16.31	39.08	77.03	114.98	152.93					90
62	17.19	41.28	81.43	121.58	161.73					90
63	18.07	43.48	85.83	128.18	170.53					90
64	19.00	45.82	90.50	135.19	179.88					90
65	20.05	48.43	95.73	143.03	190.33					90
66	21.20									90
67	22.47									91
68	23.84									91
69	25.22									91
70	26.65									91

CHILDREN AND GRANDCHILDREN (NON-TOBACCO)

Accidental Death Benefit included for ages 17 and older.

Grandchild coverage available through age 18.

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
15D-1	4.63	8.13	81
2-4	4.75	8.38	80
5-8	4.88	8.63	79
9-10	5.00	8.88	79
11-16	5.13	9.13	77
17-20	6.13	11.13	75
21-22	6.25	11.38	74
23	6.38	11.63	75
24-25	6.50	11.88	74
26	6.75	12.38	75

Indicates Spouse Coverage Available

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO

Accelerated Death Benefit for Chronic Illness Rider Form ICC15-ULABR-CI-15, ULABR-CI-15 or CA-ULABR-CI-18

Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

Issue Age (ALB)	Semi-Monthly Premiums for Life Insurance Face Amounts Shown Includes Added Cost for Accidental Death Benefit (Ages 17-59) and Accelerated Death Benefit for Chronic Illness (All Ages)									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		9.28	17.43	25.58	33.73	50.03	66.33	82.63	98.93	71
21-22		9.69	18.25	26.82	35.38	52.50	69.63	86.75	103.88	71
23		10.10	19.08	28.05	37.03	54.98	72.93	90.88	108.83	72
24-25		10.38	19.63	28.88	38.13	56.63	75.13	93.63	112.13	71
26		10.65	20.18	29.70	39.23	58.28	77.33	96.38	115.43	72
27-28		10.93	20.73	30.53	40.33	59.93	79.53	99.13	118.73	71
29		11.07	21.00	30.94	40.88	60.75	80.63	100.50	120.38	71
30-31		12.44	23.75	35.07	46.38	69.00	91.63	114.25	136.88	72
32		12.85	24.58	36.30	48.03	71.48	94.93	118.38	141.83	72
33		12.99	24.85	36.72	48.58	72.30	96.03	119.75	143.48	72
34		13.13	25.13	37.13	49.13	73.13	97.13	121.13	145.13	71
35		14.09	27.05	40.02	52.98	78.90	104.83	130.75	156.68	72
36		14.50	27.88	41.25	54.63	81.38	108.13	134.88	161.63	72
37		15.47	29.80	44.14	58.48	87.15	115.83	144.50	173.18	73
38		15.88	30.63	45.38	60.13	89.63	119.13	148.63	178.13	73
39		16.98	32.83	48.68	64.53	96.23	127.93	159.63	191.33	74
40	8.07	18.49	35.85	53.22	70.58	105.30	140.03	174.75	209.48	76
41	8.57	19.73	38.33	56.93	75.53	112.73	149.93	187.13	224.33	77
42	9.17	21.24	41.35	61.47	81.58	121.80	162.03	202.25	242.48	78
43	9.94	23.17	45.20	67.24	89.28	133.35	177.43	221.50	265.58	80
44	10.33	24.13	47.13	70.13	93.13	139.13	185.13	231.13	277.13	80
45	10.88	25.50	49.88	74.25	98.63	147.38	196.13	244.88	293.63	81
46	11.32	26.60	52.08	77.55	103.03	153.98	204.93	255.88	306.83	81
47	11.87	27.98	54.83	81.68	108.53	162.23	215.93	269.63	323.33	82
48	12.36	29.22	57.30	85.39	113.48	169.65	225.83	282.00	338.18	82
49	13.08	31.00	60.88	90.75	120.63	180.38	240.13	299.88	359.63	83
50	13.68	32.52	63.90	95.29	126.68					83
51	14.29	34.03	66.93	99.83	132.73					83
52	15.17	36.23	71.33	106.43	141.53					84
53	15.94	38.15	75.18	112.20	149.23					85
54	16.65	39.94	78.75	117.57	156.38					85
55	17.42	41.87	82.60	123.34	164.08					85
56	18.30	44.07	87.00	129.94	172.88					85
57	19.18	46.27	91.40	136.54	181.68					86
58	20.12	48.60	96.08	143.55	191.03					86
59	21.05	50.94	100.75	150.57	200.38					86
60	21.64	52.42	103.70	154.99	206.28					86
61	22.91	55.58	110.03	164.48	218.93	CHILDREN AND GRANDCHILDREN (TOBACCO) <i>Accidental Death Benefit included for ages 17 and older.</i> <i>Grandchild coverage available through age 18.</i>				86
62	24.12	58.60	116.08	173.55	231.03					87
63	25.33	61.63	122.13	182.63	243.13					87
64	26.54	64.65	128.18	191.70	255.23					87
65	27.86	67.95	134.78	201.60	268.43					87
66	29.29									88
67	30.83									88
68	32.42									88
69	34.13									88
70	35.94									89

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO

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Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
17-20	8.63	16.13	71
21-22	9.00	16.88	71
23	9.38	17.63	72
24-25	9.63	18.13	71
26	9.88	18.63	72

Indicates Spouse Coverage Available

Disability Insurance

Manhattan Life | www.manhattanlife.com | 800-669-9030

Why Do I Need Disability Insurance?

Have you ever wondered what would happen to your income if you had an accidental injury, sickness, or pregnancy? That is why you need disability coverage. It replaces a portion of income for the period you are unable to work due to those reasons. You can choose the benefit amount, which is the amount of your income to replace, and the waiting period that you begin receiving payments.

How do you decide if you need disability insurance? Consider these questions when making your decision:

- How much employer leave do you have?
- Do you have savings?
- Do you have other income you can rely on, such as from your spouse or from child support?
- How close are you to retirement?
- Could you go on Social Security Disability or take a Disability Retirement?
- What are your other sources of income?



Disability Income

Supplemental income protection



Protect your financial well-being with Voluntary Disability

A Disability plan will help with day-to-day expenses – housing, food, car payments, even additional medical costs – if you become disabled from an accident or illness. You will not have to worry about using your savings or incurring additional debt to cover these costs and care for your family.

Why do I need Disability coverage?

Most people can't afford to be disabled, even for a short time. Almost 90 percent of disabling accidents and illnesses are not work related, so you can't count on Workers Compensation to be there for you and your loved ones.

National Safety Council, Injury Facts 2008 Ed.

Because you can't know when a disabling illness or injury will impact your ability to bring home a paycheck, you can enroll in Disability coverage from ManhattanLife to help you and your family deal with the unexpected. You will be able to concentrate on your recovery after a sickness or accident and return to your job.

Here's how it works

Benefits from your ManhattanLife plan are paid in addition to any Disability coverage you already have. Your monthly coverage, elimination period, benefit period and any optional benefits will depend on the plan design your employer selects. You will find the plan to be easy and economical – your premiums are conveniently paid through payroll deduction.

Disability Income Coverage

Coverage type	Disability Income Plus provides a disability income benefit as a result of an accident or sickness.		
Product	Policy Type:	Group	
	Policy Name:	Disability Income Plus	
	Policy Form:	M-8014	
Eligibility	Issue Age:	Employee:	18 – 70
	Criteria:	Employee is benefit eligible, actively at work full-time, working at least 20 hours per week. Employee only coverage.	
	Termination Age:	Age 70 unless actively at work, then on last day of active employment.	
Underwriting Offer	Employee:	Guaranteed Issue up to 65% of base salary to a max benefit of \$5,000.	
Target Participation	Minimum to Issue:	5 Employee applications or 1% of eligible Employees, whichever is greater.	
	Guarantee Issue:	Waived, expectation of 15% of all eligible enrolled by end of the enrollment.	
Benefit Amounts	Employee:	Minimum benefit of \$300 and maximum benefit of \$5,000* per month, not to exceed 65% of base monthly income.	

*If Enrollment technology does not support SI Underwriting all applications must be taken on paper applications.

Plan Design

Accident & Sickness – Elimination Period/Duration

0 Day Accident/7 Day Sickness (Illness)/3-month Duration
 14 Day Accident/14 Day Sickness (Illness)/3-month Duration

Partial Disability	50%, up to 6 months
Recurrent Disability	Recur within 180 days
Pre-existing Provision	12/12
Pregnancy	Treated as any other illness
Portability	Included, Not available in AK, VT
Waiver of Premium	After 90 Days
Mental Illness/Substance Abuse	Included

Benefit Definitions

OCCUPATIONAL INCOME: The Eligible Persons' monthly rate of earnings from His Employer as of the day before the start of Total Disability. Occupational Income including commissions will be averaged over a period of time (see certificate of coverage). Occupational Income does not include overtime pay, bonuses, or extra compensation other than commissions.

ACCIDENT & SICKNESS: Provides coverage for disabilities caused by either an accidental injury or sickness.

ELIMINATION PERIOD: The number of continuous days, beginning with the first day of a total disability, before any monthly benefit amount is payable. Separate elimination periods apply to injury and illness.

BENEFIT PERIOD: The period of time for which Monthly Income Benefits are payable for disability due to the same cause.

TOTAL DISABILITY: For the first 24 months of a disability that the Employee/member is unable to perform the substantial and material duties of his or her regular occupation, not working in any other occupation, and under the care of a physician for the disability. After 24 months of total disability, totally disabled means that the Employee/member is unable to perform the duties of any occupation, and under the care of a physician for the disability.

PARTIAL DISABILITY: Because of a covered sickness or injury, the Employee/member is working more than 20% but not more than 80% of the normal pre-disability schedule, and under the regular care of a physician.

RECURRENT DISABILITY: Total and/or partial disability that is due to the same or related causes as a prior period of disability, follows a prior period for which a monthly benefit was paid, and occurs within 180 days after the end of a prior period for which a monthly benefit was paid. The elimination period is waived, and benefits are immediately available for up to the remaining benefit from the previous disability.

PORTABILITY: Portable after six months of continuous coverage if group master policy remains in force and the insured is less than age 70, not Totally Disabled, and no longer Actively at work for the Employer. Participants may continue coverage by paying premiums on a direct billing method. All ported certificates will be subject to any rate increases on the Employer's Master Policy. Portability not available for groups located in AK and VT.

WAIVER OF PREMIUM: Premium is waived if the Employee is totally disabled for more than 90 days or the elimination period, whichever is longer. Waiver of Premium will continue while the insured is receiving a Total Disability Income Benefit.

MENTAL ILLNESS AND SUBSTANCE ABUSE: 100% of the Benefits for Total or Partial Disability shown on the schedule will be paid when disability is contributed to or caused by Mental or Emotional Disease or Disorder, Alcoholism or Drug Addiction. Limited to a 6-month benefit duration.

PRE-EXISTING CONDITION LIMITATION: If a member has a pre-existing condition that is diagnosed or symptoms occurred in the 12 months prior to the policy effective date, no benefits will be paid for the first 12 months of the policy effective date. Refer to the certificate of coverage for the specific pre-existing limitations.

Composite Rates

Disability Income Plus rates

Semi-Monthly deductions, Elimination Period: 0/7 90 days

Monthly Benefit	\$300	\$400	\$500	\$600	\$700	\$800	\$900	\$1,000	\$1,100	\$1,200
All Ages	\$4.18	\$5.57	\$6.96	\$8.36	\$9.75	\$11.14	\$12.53	\$13.93	\$15.32	\$16.71
Monthly Benefit	\$1,300	\$1,400	\$1,500	\$1,600	\$1,700	\$1,800	\$1,900	\$2,000	\$2,100	\$2,200
All Ages	\$18.11	\$19.50	\$20.89	\$22.28	\$23.68	\$25.07	\$26.46	\$27.86	\$29.25	\$30.64
Monthly Benefit	\$2,300	\$2,400	\$2,500	\$2,600	\$2,700	\$2,800	\$2,900	\$3,000	\$3,100	\$3,200
All Ages	\$32.03	\$33.43	\$34.82	\$36.21	\$37.60	\$39.00	\$40.39	\$41.78	\$43.18	\$44.57
Monthly Benefit	\$3,300	\$3,400	\$3,500	\$3,600	\$3,700	\$3,800	\$3,900	\$4,000	\$4,100	\$4,200
All Ages	\$45.96	\$47.35	\$48.75	\$50.14	\$51.53	\$52.92	\$54.32	\$55.71	\$57.10	\$58.50
Monthly Benefit	\$4,300	\$4,400	\$4,500	\$4,600	\$4,700	\$4,800	\$4,900	\$5,000		
All Ages	\$59.89	\$61.28	\$62.67	\$64.07	\$65.46	\$66.85	\$68.24	\$69.64		

Disability Income Plus rates

Semi-Monthly deductions, Elimination Period: 14/14 90 days

Monthly Benefit	\$300	\$400	\$500	\$600	\$700	\$800	\$900	\$1,000	\$1,100	\$1,200
All Ages	\$2.76	\$3.68	\$4.60	\$5.52	\$6.44	\$7.36	\$8.28	\$9.20	\$10.12	\$11.04
Monthly Benefit	\$1,300	\$1,400	\$1,500	\$1,600	\$1,700	\$1,800	\$1,900	\$2,000	\$2,100	\$2,200
All Ages	\$11.96	\$12.88	\$13.80	\$14.72	\$15.64	\$16.56	\$17.48	\$18.40	\$19.32	\$20.24
Monthly Benefit	\$2,300	\$2,400	\$2,500	\$2,600	\$2,700	\$2,800	\$2,900	\$3,000	\$3,100	\$3,200
All Ages	\$21.16	\$22.08	\$23.00	\$23.92	\$24.84	\$25.76	\$26.68	\$27.60	\$28.52	\$29.44
Monthly Benefit	\$3,300	\$3,400	\$3,500	\$3,600	\$3,700	\$3,800	\$3,900	\$4,000	\$4,100	\$4,200
All Ages	\$30.36	\$31.28	\$32.20	\$33.12	\$34.04	\$34.96	\$35.88	\$36.80	\$37.72	\$38.64
Monthly Benefit	\$4,300	\$4,400	\$4,500	\$4,600	\$4,700	\$4,800	\$4,900	\$5,000		
All Ages	\$39.56	\$40.48	\$41.40	\$42.32	\$43.24	\$44.16	\$45.08	\$46.00		

Cancer Insurance

Plan Options



American Fidelity | www.americanfidelity.com | 800-654-8489

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more.

Premiums are paid through convenient payroll deduction to ensure your policy remains in force if you should need it. Benefits are paid directly to you, so you can choose how to spend the money. Visit the Employee Benefits Center and view policy for more details.



Group Cancer Insurance

Focus on the fight.

A cancer diagnosis may be both a physical and emotional drain. But thanks to advances in medicine and procedures to treat cancer, more and more people are beating the disease. However, with these advances also comes the continuing rise in the cost of cancer treatment.

Limited Benefit Group Cancer Insurance offers a solution to help you and your family focus on fighting the disease.

Did You Know?

New cancer cases in America are diagnosed at the rate of about 5,255 per day.

American Cancer Society: Cancer Facts and Figures 2022, P4

Plan Benefit Highlights

- **Helps cover expenses**
for cancer treatment, transportation, hospitalization and more.
- **Benefits are paid directly to you**
to be used however you see fit.
- **Portable to take with you**
even if you leave employment.
- **Coverage options are available**
for you, your spouse and your children under age 26.

Benefits designed to help cover costs.

With over 25 benefits specifically designed to help with the financial impact of being diagnosed, **Group Cancer Insurance** may help pay for costs not covered by your primary medical insurance.

Examples:



Diagnostic and Prevention

Annual benefit to help pay for covered diagnostic testing or screening. This benefit also qualifies for quick processing.



Travel Expenses

This benefit may help pay for qualified transportation and lodging for the patient and family.

Plan Benefit Highlights

BENEFITS	BASIC	ENHANCED	ENHANCED PLUS
Radiation Therapy/Chemotherapy/Immunotherapy Actual charges per 12 month period	\$10,000	\$15,000	\$15,000
Administrative/Lab Work Per calendar month	\$50	\$75	\$75
Hormone Therapy Per treatment per calendar month up to a max of 12 per calendar year	\$50	\$50	\$50
Experimental Treatment	Paid in the same manner and under the same maximums as any other treatment		
Blood, Plasma, and Platelets Basic: Per day, up to \$10,000 per calendar year Enhanced and Enhanced Plus: Per day, up to \$15,000 per calendar year	\$200	\$300	\$300
Medical Imaging Per image up to 2 per calendar year	\$200	\$300	\$300
Surgical	\$20 surgical unit/ Max per operation: \$2,000	\$30 surgical unit/ Max per operation: \$3,000	\$40 surgical unit/ Max per operation: \$4,000
Anesthesia	25% of the amount paid for covered surgery		
Second and Third Surgical Opinion Per diagnosis	\$300	\$300	\$300
Outpatient Hospital or Ambulatory Surgical Center Per day of surgery	\$200	\$400	\$600
Bone Marrow or Stem Cell Transplant Patient Provided Per calendar year Donor Provided Per calendar year	\$500 \$1,500	\$1,000 \$3,000	\$1,500 \$4,500
Prosthesis Surgical 1 per site, lifetime max of 2 devices per covered person Non-surgical 1 per site, lifetime max of 3 devices per covered person Hair Prosthesis Once per life	\$1,000 \$100 \$100	\$1,500 \$150 \$150	\$2,000 \$200 \$200
Hospital Confinement Per day Day 1-30 Day 31+	\$100 \$200	\$200 \$400	\$300 \$600
U.S. Government/Charity Hospital or HMO Paid in lieu of most benefits per day Inpatient and outpatient	\$100	\$200	\$300
Extended Care Facility Per day, up to the same number of days of paid hospital confinement	\$100	\$200	\$300
Home Health Care Per day, up to the same number of days of paid hospital confinement	\$100	\$200	\$300
Hospice Care Basic: Per day, up to \$18,000 lifetime max Enhanced: Per day, up to \$36,000 lifetime max Enhanced Plus: Per day, up to \$54,000 lifetime max	\$100	\$200	\$300
Inpatient Special Nursing Services Per day	\$100	\$200	\$300

BENEFITS	BASIC	ENHANCED	ENHANCED PLUS
Dread Disease Per day while hospital confined Day 1-30 Day 31+	\$100 \$200	\$200 \$400	\$300 \$600
Donor	\$1,000/donation		
Drugs and Medicine Inpatient Per confinement Outpatient \$50 per prescription up to maximum shown per calendar month	\$50 \$50	\$100 \$50	\$200 \$100
Attending Physician While hospital confined, per day	\$50	\$50	\$50
Transportation & Lodging (Patient & Family Member) Transportation \$1,500 max per round trip, max 12 trips per calendar year Lodging Per day, up to 90 days per calendar year	Coach fare or \$.50/mile by car \$50	Coach fare or \$.50/mile by car \$50	Coach fare or \$.50/mile by car \$75
Ambulance Ground Per trip, up to 2 per confinement Air Per trip, up to 2 per confinement	\$200 \$2,000	\$200 \$2,000	\$200 \$2,000
Physical or Speech Therapy Per visit, up to 4 per calendar month, lifetime max of \$1,000.	\$50	\$50	\$50
Diagnostic and Prevention One per calendar year	\$25	\$50	\$75
Cancer Screening Follow-Up One per calendar year	\$25	\$50	\$75
Waiver of Premium Employee only	After 90 days of continuous disability		
Internal Cancer Diagnosis One per covered person per lifetime, benefits reduce 50% at age 70	\$2,500	\$5,000	\$5,000
Heart Attack or Stroke Diagnosis One per covered person per lifetime, benefits reduce 50% at age 70	N/A	N/A	\$5,000
Hospital Intensive Care Unit Per day, up to 30 days per confinement; benefits reduced 50% at age 70 Ambulance		\$600 \$100	

Unless otherwise indicated, benefits are for a specified indemnity amount listed in the above schedule and are subject to applicable maximums. Refer to the following pages for more complete descriptions and limits to this plan.

MONTHLY PREMIUMS	BASIC	ENHANCED	ENHANCED PLUS
Individual	\$15.80	24.26	\$31.62
Family	\$26.86	41.26	\$53.80

The premium and benefit amounts vary depending upon the plan selected.

Plan Benefit Highlights

Only loss for Cancer Unless otherwise indicated, benefits are payable only for loss resulting from definitive Cancer diagnosis or treatment, including direct extension, metastatic spread, or recurrence. Proof must be submitted to support each claim. The Policy also covers other conditions or diseases directly caused by Cancer or the treatment of Cancer. The Policy does not cover any other disease, sickness or incapacity, even though after contracting Cancer it may have been aggravated or affected by Cancer or the treatment of Cancer except for conditions specifically covered under the Dread Disease Benefit; Hospital Intensive Care Unit Benefit; or Heart Attack or Stroke Diagnosis Benefit, if included.

Cancer means a disease that is manifested by autonomous growth (malignancy) in which there is uncontrolled growth, function or spread (local or distant) of cells in any part of the body. This includes Cancer in situ and malignant melanoma. It does not include other conditions which may be considered precancerous or have malignant potential such as leukoplakia; hyperplasia; acquired immune deficiency syndrome (AIDS); polycythemia; actinic keratosis; aplastic anemia; atypia; non-malignant monoclonal gammopathy; or pre-malignant lesions, benign tumors or polyps.

Such Cancer must be positively diagnosed by a legally licensed doctor of medicine certified by the American Board of Pathology or American Board of Osteopathic Pathology. Pathologic interpretation of the histology of skin lesions will be accepted by dermatologists certified by the American Board of Dermatopathology. Diagnosis must be made based on a microscopic examination of fixed tissue or preparations from the hemic system (either during life or post-mortem). The pathologist establishing the diagnosis shall base his judgment solely on the criteria of malignancy as accepted by the American Board of Pathology or the Osteopathic Board of Pathology after a study of the histocytologic architecture or pattern of the suspect tumor, tissue and/or specimen.

Radiation Therapy, Chemotherapy or Immunotherapy Benefit

We will pay the actual charges up to the benefit listed in the schedule per 12-month period. If Proof of Loss regarding actual charges for treatment is not submitted, we will pay the daily amount shown in your certificate for each day treatment is received, up to the actual charge's maximum per 12-month period. Upon receipt of actual charges Proof of Loss, we will pay the difference, up to the maximum per 12-month period. Actual charges are the amount paid by or on behalf of the Covered Person and accepted by the provider for services provided.

This benefit does not cover other related procedures such as treatment planning, treatment management or consultation, design and construction of treatment devices, radiation dosimetry calculation, lab tests, x-rays, scans, medical supplies, and equipment used in administration (IV solutions, needles, dressings, pumps, catheters, etc.).

Administrative and Lab Work Benefit Paid if the Covered Person is also receiving the Radiation Therapy, Chemotherapy or Immunotherapy Benefit during the same calendar month.

Hormone Therapy Benefit Drugs and medicines covered under the Drugs and Medicine Benefit or the Radiation Therapy, Chemotherapy or Immunotherapy Benefit are not included. This benefit does not cover associated administrative processes.

Experimental Treatment Benefit Benefits for experimental treatment prescribed by a physician for treatment of Cancer will be provided the same as non-experimental treatment. Coverage for treatments received outside the United States or its territories is not provided.

Blood, Plasma and Platelets Benefit Laboratory processes are not included. Colony-stimulating factors are not covered. Benefits for blood, plasma, and platelets are only provided under this benefit.

Medical Imaging Benefit Payable for a Covered Person who has been diagnosed with Cancer who receives either an MRI, CT scan, CAT scan, PET scan, or RAIU (thyroid) test requested by a Physician.

Surgical Benefit Payable when a surgical operation is performed for covered diagnosed Cancer, Skin Cancer, or reconstructive surgery due to Cancer. Benefits are calculated up to a maximum benefit by multiplying the surgical unit value assigned to the procedure, as shown in the most current Physician's Relative Value Table, by the unit dollar amount shown in your certificate schedule. Two or more surgical procedures performed through the same incision will be considered one operation and benefits will be limited to the most expensive procedure. Diagnostic surgeries that result in a negative diagnosis of Cancer are not covered under this benefit. Bone marrow surgeries, surgeries to implant a permanent prosthetic device, surgeries required for administration of Radiation Therapy, Chemotherapy or Immunotherapy are not covered under this benefit.

Anesthesia Benefit Services of an anesthesiologist for Skin Cancer or surgical prosthesis implantation are not covered.

Second and Third Surgical Opinion Benefit Payable once per diagnosis of Cancer for a second surgical opinion and a third if the second disagrees with the first. Surgical opinions for reconstructive, Skin Cancer or prosthesis surgeries are not covered.

Outpatient Hospital or Ambulatory Surgical Center Benefit Surgical procedures for Skin Cancer are not covered.

Bone Marrow or Stem Cell Transplant Benefit Harvesting of bone marrow or stem cells from a donor are not covered under this benefit.

Prosthesis Benefit Payable for a prosthetic device and, if surgery required, its surgical implantation. Prosthetic-related supplies such as special bras or ostomy pouches and supplies are not covered. Benefits for a hair prosthesis will only be covered under the Hair Prosthesis Benefit.

Hospital Confinement Benefit Pays when the Covered Person requires Hospital confinement for at least 18 continuous hours. We will not pay this benefit for outpatient treatment or a stay of less than 18 hours in an observation unit or emergency room. Hospital shall not include an institution, or part thereof, used by the Covered Person as a place for rehabilitation; a hospice unit, including any bed designated as a hospice or swing bed; a place for rest or for the aged; a nursing or convalescent home; a long-term nursing unit or geriatrics ward; or an extended care facility for the care of convalescent, rehabilitative or ambulatory patients.

U.S. Government or Charity Hospital or HMO Benefit Payable when an itemized list of services is not available and the Covered Person is confined in a charity Hospital or a Hospital owned or operated by the U.S. government as a result of Cancer or Dread Disease or covered under an HMO or Diagnostic Related Group where no charges are made to the Covered Person for treatment of Cancer or Dread Disease. This benefit will be paid in lieu of most benefits listed on the schedule.

Extended Care Facility Benefit Pays a daily benefit for Physician authorized confinement that begins within 14 days after Hospital confinement.

Home Health Care Benefit Pays a daily benefit for Physician authorized private nursing care that begins within 14 days of hospital confinement. This benefit does not include nutrition counseling, medical social services, medical supplies, prosthesis or orthopedic appliances, rental or purchase of durable medical equipment, drugs or medicines, child care, meals or housekeeping services or physical or speech therapy.

Hospice Care Benefit Pays a daily benefit when a Physician determines terminal illness with life expectancy of 6 months or less and approves hospice care at home or in a hospice facility. This benefit does not include well baby care, volunteer services, meals, housekeeping services, or family support after the death.

Inpatient Special Nursing Services Benefit Pays a daily benefit when receiving Physician authorized special nursing care (other than that regularly furnished by a Hospital) for at least eight consecutive hours during 24 hours.

Plan Benefit Highlights (cont.)

Dread Disease Benefit Covered Dread Diseases are Addison's Disease; Amyotrophic Lateral Sclerosis; Cystic Fibrosis; Diphtheria; Encephalitis; Grand Mal Epilepsy; Legionnaire's Disease; Meningitis; Multiple Sclerosis; Muscular Dystrophy; Myasthenia Gravis; Niemann-Pick Disease; Osteomyelitis; Poliomyelitis; Reye's Syndrome; Rheumatic Fever; Rocky Mountain Spotted Fever; Sickle Cell Anemia; Systemic Lupus Erythematosus; Tay-Sachs Disease; Tetanus; Toxic Epidermal; Toxic Shock Syndrome; Tuberculosis; Tularemia; Typhoid Fever; Whipple's Disease.

Donor Benefit Blood donor expenses are not covered.

Drugs and Medicine Benefit Pays a benefit for anti-nausea and pain medication for cancer treatment. It does not include associated administrative processes, drugs, or medicines covered under the Radiation Therapy, Chemotherapy or Immunotherapy Benefit or the Hormone Therapy Benefit.

Transportation and Lodging Benefits Pays a benefit for transportation by scheduled bus, plane or train, or by car and outpatient lodging for Radiation Therapy, Chemotherapy, or Immunotherapy treatment, Bone Marrow or Stem Cell Transplant, or surgery in a Hospital not available locally and at least 50 miles from the Covered Person's residence. Payable for the Covered Person and one adult family member. If traveling in the same car or lodging in the same room, the benefit is payable only to the Covered Person.

Ambulance Benefit If air and ground ambulance services are required on the same day, we will only pay the higher benefit amount. A Covered Person must be admitted as an inpatient and hospital confined for at least 18 consecutive hours.

Waiver of Premium Premium is waived if you are disabled due to Cancer for longer than 90 continuous days. This benefit does not apply if your spouse or children become disabled. We will require proof annually that you remain Disabled during that time.

Physical or Speech Therapy Benefit Therapy must be provided by a caregiver licensed in physical or speech therapy.

Diagnostic and Prevention Benefit Pays for a generally medically recognized screening test to detect Internal Cancer. This benefit is not payable for any test covered under the Medical Imaging Benefit.

Cancer Screening Follow-Up Benefit Payable for one follow-up invasive screening test when a Covered Person receives abnormal results from a covered screening test. For tests involving an incision or surgery, payable only for tests that result in a negative diagnosis of Cancer.

Internal Cancer Diagnosis Benefit Payable if a Physician diagnoses the Covered Person with Internal Cancer after coverage is active for that person.

Heart Attack or Stroke Diagnosis Benefit Payable if a Physician diagnoses the Covered Person as having a Heart Attack or Stroke after the coverage is active for that person. This benefit is payable only for the first occurrence of either the Heart Attack or Stroke.

This product may contain limitations, exclusions, and waiting periods. This product is not intended for people who are eligible for Medicaid coverage. This is a brief description of the coverage. For complete benefits and other provisions, please refer to your certificate. Policy provisions and benefits may vary if you reside in a state other than your employer's state of domicile. This policy is considered an employee welfare benefit plan and/or maintained by an association or employer intended to be covered by ERISA, and will be administrated and enforced under ERISA. Group policies issued to governmental entities may be exempt from ERISA guidelines.

Marketed by:



Underwritten and administered by:



American Fidelity Assurance Company
americanfidelity.com

Limitations and Exclusions

Pre-existing condition means a Specified Disease for which the Covered Person: (a) had treatment; (b) incurred expense; (c) took medication; or (d) received a diagnosis or advice from a Physician during the 12 months immediately before the Covered Person's Effective Date of coverage. The term "Pre-Existing Condition" will also include conditions related to such Specified Disease.

Pre-existing condition limitation No benefit will be payable for any loss caused by or resulting from a Pre-Existing Condition that occurs before a Covered Person has been continuously covered under the Policy for 12 consecutive months. Pre-Existing Conditions specifically named or described as excluded in any part of this contract are never covered. If you were covered under a group specified disease cancer policy within a thirty (30) day period prior to the effective date of our Group Limited Benefit specified disease cancer plan, credit will be given toward satisfaction of the Pre-Existing Condition limitation, for the period of the time that you were continuously covered under the prior carrier's policy, provided coverage is elected under our plan when you first became eligible. Increases or changes in coverage will be subject to an additional Pre-Existing Condition Limitation.

Hospital intensive care unit benefit limitations No benefits will be payable during the first two years of coverage for confinement caused by any heart condition diagnosed or treated before 30 days following the Effective Date of coverage. (The heart condition causing confinement need not be the same condition diagnosed or treated before the Effective Date). No benefits will be payable for confinement that begins within the first 30 days for a newborn born within ten months following the Effective Date of coverage.

Exclusions We will not pay benefits resulting from or caused by:

- (a) intentionally self-inflicted bodily injury, suicide or attempted suicide, whether sane or insane;
- (b) alcoholism or drug addiction;
- (c) any act of war, declared or undeclared, or any act related to war;
- (d) military service for any country at war;
- (e) participation in any activity or event while intoxicated or under the influence of any narcotic unless administered by a Physician or taken according to the Physician's instructions; or
- (f) participation in, or attempting to participate in, a felony, riot or insurrection (A felony is as defined by the law of the jurisdiction in which the activity takes place.)

Termination of Insurance Your coverage may continue for up to 1 year during a leave of absence approved in writing by your employer. Coverage will continue as long as the group policy remains in force, the premiums are paid, and you remain eligible for the coverage under the Policy. Your coverage will end when you no longer qualify as an insured, retire, you are not on active employment, your employment terminates or you die. Your dependent's coverage will end if your coverage ends, premiums are not paid, they no longer meet the definition of a dependent or the Policy is modified to exclude dependents. Your coverage can be terminated, or premiums may be increased on any premium due date with 31 days advance written notice.

Critical Illness Insurance

Manhattan Life | www.manhattanlife.com | 800-669-9030

Prepare For the Unexpected

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often times, a critical illness has a powerful impact on people's lives, affecting their livelihood and finances.

A critical illness plan can help with the treatment costs of covered illnesses. Benefits are paid directly to you, unless otherwise assigned, giving you the choice of how to spend the money. Plus, there are plans available to provide coverage for you, your spouse and dependent children.

Prepare now for the unexpected with a critical illness insurance plan. The plan helps you focus on getting well rather than worrying about finances. Visit the Employee Benefits Center and view policy for more details.



Critical Illness

Helping protect you and your family with lump sum coverage



Critical Illness/Cancer voluntary coverages pay benefits to you

With our Critical Illness and Cancer plans, you'll receive a benefit after a serious illness or a condition such as a heart attack, stroke, coronary artery disease, or cancer is diagnosed. During your recovery, you and your loved ones can rest a little easier knowing you won't have to deplete your bank accounts or take on additional debt to cover day-to-day living expenses.

Why do I need Critical Illness and Cancer coverages?

These plans can assist you with a variety of expenses so you can focus on getting better. You can use the benefit however you want:

- Make your mortgage payments.
- Hire extra help around the house, such as in-home caregivers.
- Help cover medical bills as well as therapy and training.
- Pay for travel to treatment facilities away from home – and for family visits.

In addition to the physical and emotional effects, people who are diagnosed with a serious condition may see a costly impact on their expenses. You may need additional help to absorb the expense of paying for drugs and other associated costs.

Here's how it works

All benefit payments are made directly to you, placing you in control at a time when you may feel that your options are limited. Some or all of the benefit is available to you after your initial diagnosis, so it's there when you need it most. You will save on your premiums because coverage through your employer typically is less expensive than purchasing on your own, and you can pay premiums through automatic payroll deduction. You can continue the coverage even if you change employers.

Critical Illness/Cancer Coverage

Coverage type	Voluntary Critical Illness insurance is a group policy that includes coverage for vascular, cancer, and other critical illnesses.		
Product	Policy Type:	Group	
	Policy Name:	Critical Illness	
	Policy Form:	M-8021	
Eligibility	Issue Ages:	Employee:	18 – 69
		Spouse:	18 – 69
		Child:	Under age 26
	Criteria:	- Employee is benefit eligible, actively at work full-time, working at least 20 hours per week. - Spouse and children not eligible if Employee is not issued coverage. - Spouse includes domestic partner where allowed by state and Employer.	
	Termination Age:	- Employee: Age 70 unless actively at work, then on last day of active employment. - Spouse: When Employee terminates. - Child: Age 26, or when Employee terminates, whichever is earlier.	
		Guarantee Issue	Simplified Issue*
Underwriting Offer	Employee:	\$30,000	\$50,000
	Spouse:	50% of employee's benefit	\$25,000
	Child(ren):	50% of the employee's benefit	\$25,000
Target Participation	Minimum to Issue:	5 enrolled or 1% of all eligible, whichever is greater.	
	Guarantee Issue:	Waived, expectation of 15% of all eligible enrolled by end of the enrollment.	
Benefit Amounts	Employee:	\$5,000 - \$50,000	
	Spouse:	\$2,500 - \$25,000, 50% of Employee election	
	Child(ren):	\$2,500, 50% of Employee election to \$25,000	

*If Enrollment technology does not support SI Underwriting all applications must be taken on paper applications.

Benefits and Features Conditions

Covered Conditions		Percent Payment
Cardiac Benefits	• Myocardial Infarction	100%
	• Coronary Heart Disease	25%
	• Sudden Cardiac Arrest	100%
Cerebral Vascular Disease Benefit	• Stroke	100%
	• Ruptured Brain Aneurysm	10%
	• Transient Ischemic Attack	10%
Cancer	• Invasive	100%
	• Non-Invasive	25%
	• Skin Cancer	\$250
	• Waiting period	Waived
Other Specified Illness Category	• Benign Brain Tumor	100%
	• Major Organ Failure	100%
	• End Stage Renal Failure*	100%
	• Coma	100%
	• Severe Burns	100%
	• Permanent Paralysis*	100%
	• Functional Loss of Hearing*	100%
	• Functional Loss of Speech*	100%
	• Functional Loss of Sight*	100%
	• Occupational HIV/Hepatitis*	100%

*not eligible for recurrence benefit.

Additional Occurrence Benefit	Included
Pre-existing Condition Limitation	Waived
Waiver of Premium for Disability	After 180 days
Portability	Included
Benefit Reduction	Waived

This is not a complete disclosure of plan qualifications and limitations. The amount of benefits provided depends on the plan selected. Premiums will vary according to the selection made. THIS POLICY PROVIDES LIMITED BENEFITS. Underwritten by ManhattanLife Insurance and Annuity Company, and ManhattanLife Insurance Company for FL, NJ, & NY. Applications will not be accepted under this offer until written acceptance of this offer, the Employer Agreement and minimum Participation Requirements are received in ManhattanLife's New Business Department.

Employer Elected Optional Benefits

Recurrence	Included
Wellness Screening	\$100
Infectious Disease	25% Benefit per condition. Covered Conditions: • Cerebrospinal Meningitis • Malaria • Encephalitis • Legionnaire's disease • Necrotizing Fasciitis • Osteomyelitis • Tuberculosis
Childhood Condition Benefit not eligible for recurrence benefit	25% Benefit per condition. Covered Conditions: • Cerebral Palsy • Cleft Lip/Cleft Palate • Cystic Fibrosis • Down Syndrome • Spina Bifida • Type 1 Diabetes
Progressive Disease not eligible for recurrence benefit	100% Benefit per condition. Covered Conditions: • ALS (Lou Gehrig's Disease) • Multiple Sclerosis • Advanced Dementia (including Alzheimer's) • Advanced Parkinson's

Benefit Definitions

ADDITIONAL OCCURRENCE BENEFIT: once benefits have been paid for a Critical Illness, a benefit is paid for an additional different Critical Illness when; 1) the Date of Diagnosis for the new Critical Illness is separated from the prior Critical Illness by at least 6 months, and 2) the new Critical Illness is not caused by a Critical Illness for which benefits have been paid, and 3) a benefit is not paid for more than one Critical Illness with in a period.

PRE-EXISTING CONDITION LIMITATION: If a Employee has a pre-existing condition that is diagnosed or symptoms occurred in the 12 months prior to the policy effective date, no benefits will be paid for the first 12 months of the policy effective date. Refer to the certificate of coverage for specific pre-existing limitations. This has been waived for this offer.

WAIVER OF PREMIUM FOR DISABILITY: This waives an Employee's premium if he or she becomes totally disabled as a result of a confirmed critical illness that continues for at least 180 consecutive days after the effective date of coverage. Total Disability must start while policy is in force and begins before the certificate anniversary following the insureds 60th birthday. Employees issue ages 18-55..

PORTABILITY: Portable after six months of continuous coverage if group master policy remains in force and the insured is less than age 70, not Totally Disabled, and no longer Actively at work for the Employer. Participants may continue coverage by paying premiums on a direct billing method. All ported certificates will be subject to any rate increases on the Employer's Master Policy. Insured's policy terminates at age 70, dependents on ported certificates terminate when the spouse attained age is 70 or the child attained age is 25. If the policy terminates the ported Certificate terminates.

Optional Benefit Definition(s):

RECURRENCE: This provides a one-time additional benefit for the same condition if a covered participant is treatment-free for at least Twelve (12) months.

WELLNESS SCREENING: Pays a cash benefit when a member has one or more of the 21 covered screening tests. This screening benefit is payable once per covered person per calendar year.

INFECTIOUS DISEASE BENEFIT: Pays a benefit when a Covered Person has been diagnosed by a Physician with an Infectious Disease. An Infectious Disease means the following infectious or contagious diseases that are caused by organisms, such as bacteria, viruses, fungi, or parasites.

CHILDHOOD CONDITION BENEFITS: Pays a benefit upon a covered dependent child's initial date of diagnosis on or after the policy effective date for one of the childhood conditions listed.

PROGRESSIVE DISEASE: Pays a benefit when a covered person is unable to perform two or more Activities of Daily Living due to one of the Progressive Diseases listed in the offer above. These must be diagnosed by a Physician after the effective date of this policy.

Critical Illness & Cancer South Carolina

Displaying Semi-Monthly payroll deductions including Recurrence, Infectious Disease, Progressive Disease, Childhood Conditions, Sudden Cardiac Arrest, Skin Cancer, and \$100 Wellness Screening Benefit.

Issue Age	Employee - UniTobacco									
Benefit:	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$2.10	\$2.83	\$3.56	\$4.28	\$5.01	\$5.74	\$6.47	\$7.20	\$7.93	\$8.65
30-39	\$2.89	\$4.35	\$5.82	\$7.29	\$8.76	\$10.23	\$11.70	\$13.17	\$14.64	\$16.11
40-49	\$4.98	\$8.44	\$11.91	\$15.38	\$18.85	\$22.32	\$25.79	\$29.26	\$32.72	\$36.19
50-59	\$8.66	\$15.68	\$22.69	\$29.71	\$36.73	\$43.75	\$50.76	\$57.78	\$64.80	\$71.82
60-64	\$12.99	\$24.23	\$35.46	\$46.69	\$57.92	\$69.15	\$80.39	\$91.62	\$102.85	\$114.08
65-69	\$16.31	\$30.75	\$45.19	\$59.63	\$74.07	\$88.51	\$102.95	\$117.39	\$131.83	\$146.27

Issue Age	Employee & Spouse - UniTobacco									
Benefit:	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.43	\$4.53	\$5.62	\$6.71	\$7.80	\$8.90	\$9.99	\$11.08	\$12.17	\$13.27
30-39	\$4.63	\$6.84	\$9.04	\$11.25	\$13.45	\$15.65	\$17.86	\$20.06	\$22.27	\$24.47
40-49	\$7.81	\$13.02	\$18.22	\$23.42	\$28.63	\$33.83	\$39.03	\$44.23	\$49.44	\$54.64
50-59	\$13.41	\$23.93	\$34.46	\$44.99	\$55.51	\$66.04	\$76.56	\$87.09	\$97.62	\$108.14
60-64	\$19.97	\$36.82	\$53.67	\$70.52	\$87.36	\$104.21	\$121.06	\$137.91	\$154.76	\$171.60
65-69	\$24.99	\$46.65	\$68.31	\$89.97	\$111.63	\$133.29	\$154.95	\$176.61	\$198.27	\$219.93

*Spouse Amount is 50% of Employee Amount.

Issue Age	Employee & Children - UniTobacco									
Benefit:	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$2.10	\$2.83	\$3.56	\$4.28	\$5.01	\$5.74	\$6.47	\$7.20	\$7.93	\$8.65
30-39	\$2.89	\$4.35	\$5.82	\$7.29	\$8.76	\$10.23	\$11.70	\$13.17	\$14.64	\$16.11
40-49	\$4.98	\$8.44	\$11.91	\$15.38	\$18.85	\$22.32	\$25.79	\$29.26	\$32.72	\$36.19
50-59	\$8.66	\$15.68	\$22.69	\$29.71	\$36.73	\$43.75	\$50.76	\$57.78	\$64.80	\$71.82
60-64	\$12.99	\$24.23	\$35.46	\$46.69	\$57.92	\$69.15	\$80.39	\$91.62	\$102.85	\$114.08
65-69	\$16.31	\$30.75	\$45.19	\$59.63	\$74.07	\$88.51	\$102.95	\$117.39	\$131.83	\$146.27

*Child Amount is 50% of Employee Amount.

Issue Age	Family - UniTobacco									
Benefit:	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.43	\$4.53	\$5.62	\$6.71	\$7.80	\$8.90	\$9.99	\$11.08	\$12.17	\$13.27
30-39	\$4.63	\$6.84	\$9.04	\$11.25	\$13.45	\$15.65	\$17.86	\$20.06	\$22.27	\$24.47
40-49	\$7.81	\$13.02	\$18.22	\$23.42	\$28.63	\$33.83	\$39.03	\$44.23	\$49.44	\$54.64
50-59	\$13.41	\$23.93	\$34.46	\$44.99	\$55.51	\$66.04	\$76.56	\$87.09	\$97.62	\$108.14
60-64	\$19.97	\$36.82	\$53.67	\$70.52	\$87.36	\$104.21	\$121.06	\$137.91	\$154.76	\$171.60
65-69	\$24.99	\$46.65	\$68.31	\$89.97	\$111.63	\$133.29	\$154.95	\$176.61	\$198.27	\$219.93

*Spouse Amount is 50% of Employee Amount. Child Amount is 50% of Employee Amount.

Note: Final implementation rate may vary slightly due to rounding

Accident Insurance

American Fidelity | www.americanfidelity.com | 800-654-8489

The costs associated with an injury can add up. Between hospital visits, exams and treatment, out-of-pocket costs could put you in a financial hardship. An accident plan pays benefits directly to you so you can determine where to spend the money. It's comforting to know that an accident insurance policy can be there through all stages of your care, from initial treatment to follow-up care. Accident coverage is available to you through payroll deduction and may provide a benefit for costs associated with:

- Concussions
- Lacerations
- Broken teeth
- Emergency room visits
- Ambulance, ground or air
- Intensive care unit





Group Accident Insurance

24-Hour Coverage

Marketed by:



**AMERICAN
FIDELITY** 
a different opinion

Are you financially prepared for an accident?

Accidents happen all the time and are always unexpected. Even though you can't plan for an accident, you can help prepare for unexpected medical expenses. **Limited Benefit Accident Only Insurance** provides coverage to help with unforeseen accident costs.

ACCIDENTAL INJURY*

Hypothetical Example

A bad fall off a bicycle leads to a broken arm and head injury, resulting in a fractured radius and concussion. Treatment is received within three days.

	LEVEL 1	LEVEL 2	LEVEL 3
Initial Treatment	\$100	\$150	\$200
X-Rays (two different days)	\$100	\$200	\$300
Anesthesia	\$100	\$200	\$300
Hospital Admission (day one)	\$500	\$1,000	\$1,500
Hospital Confinement (days two through four)	\$300	\$600	\$900
Concussion	\$250	\$300	\$350
Open Reduction Radius Fracture Repair	\$600	\$800	\$1,000
Appliance – Arm Brace	\$100	\$150	\$200
Follow-Up Treatment (three visits)	\$150	\$150	\$150
TOTAL	\$2,200	\$3,550	\$4,900

ACCIDENT SCREENING BENEFIT*

This benefit is paid directly to you once per policy per calendar year and covers several tests, including, but not limited to:

- Routine Physical Exam
- Bone Density Screening
- Sports Physical Exam
- Stress Test

LEVEL 1	LEVEL 2	LEVEL 3
\$50	\$50	\$75

Plan Benefit Highlights*

ACCIDENTAL DEATH & DISMEMBERMENT

LEVEL 1	For Employee / Spouse	For Child
Common Carrier	\$50,000	\$25,000
Other Accident	\$20,000	\$10,000
Dismemberment	\$1,750 to \$25,000	\$875 to \$12,500
LEVEL 2	For Employee / Spouse	For Child
Common Carrier	\$100,000	\$50,000
Other Accident	\$40,000	\$20,000
Dismemberment	\$3,500 to \$50,000	\$1,750 to \$25,000
LEVEL 3	For Employee / Spouse	For Child
Common Carrier	\$150,000	\$75,000
Other Accident	\$60,000	\$30,000
Dismemberment	\$5,250 to \$75,000	\$2,625 to \$37,500

*The benefit amounts vary depending on the plan level selected at the time of application.

Plan Benefit Highlights

The benefit amounts vary depending on the plan level selected at the time of application.

BENEFITS	LEVEL 1	LEVEL 2	LEVEL 3
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TREATMENTS

Initial Treatment Up to four treatments per Calendar Year	\$100	\$150	\$200
Follow Up Treatment Up to four treatments per Covered Accident	\$50	\$50	\$100

MEDICAL IMAGING

CT, CAT, MRI, PET, US, SPECT	\$100	\$150	\$200
X-Rays Up to two days	\$50	\$100	\$150

HOSPITAL

ICU Admission	\$1,000	\$1,500	\$2,000
Hospital Admission	\$500	\$1,000	\$1,500
ICU Confinement Up to 30 days	\$200	\$400	\$600
Hospital Confinement Up to 365 days	\$100	\$200	\$300
Rehabilitation Up to 30 days	\$50	\$100	\$150

SURGICAL

Internal Injuries Surgery Open abdominal/thoracic surgery	\$1,000	\$1,500	\$2,000
Exploratory Surgery	\$250	\$300	\$350
Tendons, Ligaments, and Rotator Cuff Surgery One tendon, ligament, or rotator cuff	\$400	\$400	\$400
More than one tendon, ligament, or rotator cuff	\$600	\$600	\$600
Ruptured Disc or Torn Knee Cartilage Surgery	\$500	\$500	\$500
Miscellaneous Surgery	\$200	\$200	\$200
Outpatient Hospital or Ambulatory Surgical Center	\$100	\$200	\$300
Anesthesia	\$100	\$200	\$300

AMBULANCE

Ground/Water	\$500	\$500	\$500
Air	\$1,500	\$1,500	\$1,500

TRANSPORTATION, LODGING, AND MEALS

Transportation Up to three round trips per Covered Accident	\$300	\$300	\$300
Family Member Lodging and Meals Per day of Covered Accident, up to 30 days combined	\$200	\$200	\$200

BENEFITS	LEVEL 1	LEVEL 2	LEVEL 3
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INJURY TREATMENTS

Fractures Depending on open or closed reduction and bone involved <i>Chip fracture (25% of closed reduction amount)</i>	\$112.50 to \$3,000	\$150 to \$4,000	\$225 to \$6,000
Dislocations Depending on open or closed reduction and joint involved <i>With local or no anesthesia (25% of closed reduction amount)</i>	\$112.50 to \$3,000	\$150 to \$4,000	\$225 to \$6,000
Lacerations (Depending on severity and length of laceration)	\$25-\$400	\$50-\$500	\$75-\$600
Severe Burns, 2nd & 3rd Degree Skin grafts are 50% of benefit	\$100 to \$10,000	\$100 to \$10,000	\$100 to \$10,000

ADDITIONAL BENEFITS

Appliances Crutches, leg braces, etc.	\$100	\$150	\$200
Blood, Plasma, and Platelets	\$200	\$300	\$400
Concussion	\$250	\$300	\$350
Traumatic Brain Injury	\$500	\$1,000	\$1,500
Coma	\$5,000	\$10,000	\$15,000
Emergency Dental Work Broken teeth repaired with crown or extraction of a broken natural tooth	\$100	\$200	\$300
Epidural Pain Management	\$50	\$75	\$100
Eye Injury Injury with surgical repair or removal of foreign body by physician, for one or both eyes	\$200	\$250	\$300
Gunshot Wound	\$500	\$500	\$500
Paralysis Paraplegia/Uniplegia Quadriplegia	\$10,000 \$20,000	\$10,000 \$20,000	\$10,000 \$20,000
Physical, Occupational, or Speech Therapy Per day of treatment, up to eight days combined	\$25	\$25	\$25
Prosthesis Up to two devices	\$500	\$500	\$500
Organized Sports Benefit	Additional 25% of benefit payable	Additional 25% of benefit payable	Additional 25% of benefit payable

MONTHLY PREMIUMS	LEVEL 1	LEVEL 2	LEVEL 3
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Employee	\$6.98	\$9.60	\$13.66
Employee & Spouse	\$14.00	\$19.44	\$27.58
Employee & Child(ren)	\$21.62	\$30.20	\$42.60
Family	\$31.18	\$43.82	\$61.90

The premium and benefit amounts vary depending on the plan level selected at the time of application.

Plan Benefit Highlights

A Covered Person (thereafter referred to as "Person") under **Limited Benefit Accident Only Insurance** policy may be eligible for the following benefits when a Covered Accident (thereafter referred to as "Accident") happens. All benefits are paid once per Person per Accident unless otherwise specified. All benefits are only paid as a result of Injuries received in an Accident that occurs while coverage is active. All treatment, procedures, and medical equipment must be diagnosed, recommended, and treated by a physician.

Initial Treatment Benefit Payable for the first treatment received within 30 days of the Accident. The initial treatment must be administered by a physician or medical professional. Not payable for initial treatment received via telemedicine. This benefit is payable once per Person per Accident, up to four initial treatment(s) per Person per calendar year.

Follow-Up Treatment Benefit Payable for up to four follow-up treatments. Not payable for a visit in which a Physical, Occupational, or Speech Therapy benefit is paid. This benefit will only be payable if the Initial Treatment Benefit was paid for the Covered Accident. This benefit is not payable for follow-up treatment received via Telemedicine.

Accident Screening Benefit Payable when a Person receives one of the following screenings rendered by a physician: bone density screening; Epworth Sleepiness Scale for the purpose of diagnosing a sleeping disorder; hemoglobin A1C; routine physical exam; sports physicals; or stress test. This benefit is payable once per policy per calendar year. This benefit doesn't cover dental or eye exams and is not payable for services performed as treatment for an injury. An Accident is not required for this benefit to be payable.

Accidental Death and Dismemberment Benefit The applicable benefits apply when an Accidental Death or Dismemberment occurs within 90 days of an Accident. In the event that Accidental Death and Dismemberment results from the same Accident, only the Accidental Death Benefit will be payable. Common Carrier means any type of licensed, motorized conveyance operated on a regular schedule for which a transportation charge is made (does not include courtesy transportation, taxis, privately-chartered vehicles, ridesharing programs, or conveyance owned by a Person or family member.)

Ambulance Benefit If air and ground/water ambulance transportation is required for the same Accident, only the highest benefit will be payable.

Anesthesia Benefit Payable for the services of an anesthesiologist for a surgery performed due to an Accident. Hospital confinement is not required to receive this benefit. Only one Anesthesia Benefit is payable per Person in a 24-hour period even if more than one surgical procedure is performed. This benefit is not payable for local anesthesia.

Appliances Benefit Payable for one of the following as prescribed by a physician: wheelchair, motorized scooter, walker, walking boot, leg brace, back brace, cane, or crutches used to aid a covered person. Not payable for prosthetic devices. Not payable for appliances prescribed by a physician via telemedicine.

Blood, Plasma, and Platelets Benefit Payable for blood, plasma, and platelets. This benefit does not provide benefits for immunoglobulins.

Severe Burns Benefit Payable for 2nd and 3rd degree burns when treated within three days of the Accident. Not payable for severe burns that are treated by a physician via telemedicine.

Coma Benefit Must be diagnosed by a physician and continue for at least 14 days. Coma does not include medically induced coma or a coma that results directly from alcohol or drug use.

Concussion Benefit Payable when a concussion is sustained within seven days of the Accident. If both a Concussion and a Traumatic Brain Injury occur in the same Accident, only the highest benefit will be paid.

Dislocation Benefit Amount payable varies by the joint involved, type of treatment, and type of anesthesia. If a Person receives more than one dislocation in an Accident, the benefit for all dislocations will be payable up to two times the highest benefit amount shown in the

certificate for the dislocation involved. No other amount will be payable under this benefit. Benefits are payable only for the first dislocation of a joint which occurs while this policy is active.

Emergency Dental Work Benefit Payable for repair by crown or extraction to natural teeth, free of decay, when treated by a physician or dentist. Initial dental treatment must be received within three days of the Accident.

Epidural Pain Management Benefit Payable when an epidural injection into the epidural space is received for management of pain due to an injury. This benefit is not payable for an epidural administered before a surgical procedure.

Exploratory Surgery Benefit Payable when an exploratory surgical operation without surgical repair is performed.

Eye Injury Benefit Payable for one or both eyes requiring surgery or removal of foreign object by a physician. If permanent loss of use of one or both eyes occurs, benefits will be paid under the Dismemberment Benefit.

Family Member Lodging and Meals Benefit Payable for lodging and meals for a family member to be near a Person who is confined in a non-local Hospital. The Hospital must be at least 50 miles away, one way, using the most direct route from the family member's residence.

Fracture Benefit Varies based on the bone involved, type of fracture, and type of treatment. If more than one bone is fractured, the benefit amount payable is up to two times the amount for the bone involved that has the highest benefit amount.

Gunshot Wound Benefit Payable if gunshot wound doesn't cause death and is caused by a shot from a conventional firearm. Requires treatment within 24 hours of Accident and hospital confinement. If dismemberment occurs within 90 days of the Accident the highest benefit will be payable.

Hospital Admission Benefit Payable for the first day a Person is confined to a Hospital.

Hospital Confinement Benefit A daily benefit is payable for a Hospital confinement up to 365 days. This benefit is not payable for the same day a Hospital Admission or ICU Admission Benefit is payable.

Intensive Care Unit (ICU) Admission Benefit A daily benefit is payable for an ICU confinement up to 30 days. This benefit is not payable for the same day a Hospital Admission or ICU Admission Benefit is payable. This benefit is payable in addition to the Hospital Confinement Benefit.

Intensive Care Unit (ICU) Confinement Benefit A daily benefit is payable for an ICU confinement up to 30 days. This benefit is not payable for the same day a Hospital Admission or ICU Admission Benefit is payable. This benefit is payable in addition to the Hospital Confinement Benefit.

Internal Injuries Benefit Payable for an open abdominal or thoracic surgery performed within three days of the Accident.

Lacerations Benefit This benefit varies based on the method of repair and total length of all lacerations due to an Accident. Not payable for lacerations that are treated by a physician via telemedicine.

Medical Imaging Benefit Payable for a Computerized Tomography (CT or CAT), Magnetic Resonance Imaging (MRI), Single-Photon Emission Computed Tomography (SPECT), Positron Emission Tomography (PET) or an ultrasound for diagnosing an injury due to an Accident.

Miscellaneous Surgery Benefit Payable when a Person receives a surgery requiring general anesthesia due to an Accident that is not payable under any other benefit. Epidural injections are not payable under this benefit.

Organized Sports Benefit Any benefit payable under the policy will be increased by the Organized Sports Benefit percentage if the Injury results from participation in an organized sport of amateur athletic supervised organized practices or competitions (i.e., no pay, profit, or sponsorship in a professional or semi-professional capacity).

Plan Benefit Highlights (cont.)

Outpatient Hospital or Ambulatory Surgical Center Benefit Payable when a surgical procedure is performed on an outpatient basis in a Hospital or ambulatory surgical center. Only one Outpatient Hospital or Ambulatory Surgical Center Benefit is payable in a 24-hour period even if more than one surgical procedure is performed. This benefit will not be payable for surgery performed in an emergency room, urgent care facility, or in a physician's office.

Paralysis Benefit The duration of the paralysis must be a minimum of 90 consecutive days. If more than one type of paralysis occurs due to the same Accident, only the highest benefit will be paid. Payable once per lifetime per Person.

Physical, Occupational, or Speech Therapy Benefit Payable for one treatment per day for up to eight treatments by a licensed physical, occupational, or speech therapist for all therapies combined. If treatment in an emergency room, physician's office, or urgent care facility occurs in the same visit, only the highest applicable benefit is payable.

Prosthesis Benefit Payable for up to two devices. This benefit is not payable for hearing aids, dental aids, eyeglasses, false teeth, cosmetic aids such as wigs, or joint replacements such as artificial hips or knees.

Rehabilitation Benefit Payable for each day a Person is an inpatient in a rehabilitation unit. The treatment must begin immediately after the date of discharge from the Hospital. This benefit is payable for up to 30 days. This benefit is not payable for any day for which a Hospital Admission, Hospital Confinement, ICU Admission, ICU Confinement, or Physical, Occupational, and Speech Therapy Benefit is payable (if such benefits are applicable).

Tendons, Ligaments, and Rotator Cuff Surgery Benefit Payable for the repair of one or more tendons, ligaments, or rotator cuffs.

Ruptured Disc or Torn Knee Cartilage Benefit Payable for surgical repair. Benefit is two times amount when both are repaired due to same Accident.

Transportation Benefit Payable for the Person's transportation when specialized treatment and Hospital confinement in a non-local Hospital is required. A non-local Hospital must be at least 50 miles away, one way, using the most direct route, from the Person's home. Travel must be by scheduled bus, plane, train, or car. The treatment must be prescribed by a physician and not be available locally. This benefit is payable up to three round trips per Person per Accident. This benefit is not payable on any day that an Ambulance Benefit is payable.

Traumatic Brain Injury (TBI) Benefit Payable for a Person who is confined for at least 48 hours as the result of a TBI. Diagnosis by a physician and confinement must occur within three days of the Accident. If both a TBI and concussion occur in the same Accident, only the highest benefit will be paid.

X-Ray Benefit Payable once per day up to two days for an x-ray performed due to Injuries sustained in an Accident. This benefit does not cover any tests payable under the Medical Imaging Benefit or any other screening or medical imaging tests.

Limitations and Exclusions

No benefits will be provided for loss incurred due to an Accident that is caused by or occurs as a result of:

- (1) intentionally self-inflicted bodily injury, suicide or attempted suicide, whether sane or insane;

- (2) participation in any form of flight aviation other than as a fare-paying passenger in a fully licensed/passenger-carrying aircraft;
- (3) war or act of war declared or undeclared while serving in the military or an auxiliary unit thereto;
- (4) participation in any activity or event while under the influence of any narcotic, drug, or controlled substance unless administered by a physician or taken according to the physician's instructions;
- (5) voluntary ingestion, injection, inhalation or absorption of any narcotic, drug, controlled substance, poison, gas, fume, narcotic, drug or controlled substance as defined in the Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless administered on the advice of a physician and used as directed;
- (6) participation in, or attempting to participate in, a felony, riot or insurrection. (A felony is as defined by the law of the jurisdiction in which the activity takes place.);
- (7) participation in any sport for pay or profit or sponsorship, in a professional or semi-professional capacity;
- (8) treatment received outside the United States and its territories, Canada, or Mexico;
- (9) participation in any contest of speed in a power driven vehicle for pay or profit;
- (10) participation in parachuting, bungee jumping, rappelling, mountain climbing or hang gliding.

Benefits will not be paid for services rendered by a Covered Person or immediate family member of a Covered Person.

A Covered Accident is defined as an Injury caused by an Accident, for which benefits are provided, which is independent of any disease, illness, or bodily infirmity or any other cause and that takes place while the Person is covered under the policy.

A hospital is not an institution, or part thereof, used as: a hospice unit, including any bed designated as a hospice or a swing bed; a convalescent home; a rest or nursing facility; a rehabilitative facility; an extended-care facility; a skilled nursing facility; or a facility primarily affording custodial, educational care, or care or treatment for persons suffering from mental diseases or disorders, or care for the aged.

Eligibility Includes you, your lawful spouse and each natural child, legally adopted child or stepchild who is under 26 years of age.

Continuation of Coverage Coverage for you and your covered dependents may be continued for up to one year during a leave of absence approved in writing by your employer. Coverage will continue as long as the group policy remains in force, the premiums are paid, and you remain eligible for the coverage under the policy.

Portability Upon becoming no longer eligible for coverage, you will have 30 days to request continuation of coverage. Providing you pay premiums when due, you may continue your coverage provided under the policy upon leaving employment until: the date the policy is terminated or the date you fail to pay the required premium, whichever date is earlier. You must have been continuously covered for 12 consecutive months prior to the date your coverage under the policy ends.

Termination of Coverage Your coverage will end when you no longer qualify as an insured, premiums are not paid, you retire, you are not on active employment, or your employment terminates. Your dependent's coverage will end if your coverage ends, premiums are not paid, they no longer meet the definition of a dependent, or the policy is modified to exclude dependents. Your coverage can be terminated or premiums may be increased on any premium due date with 31 days' advance written notice to the policyholder.

Underwritten by American Fidelity Assurance Company. This is a brief description of the coverage. This product contains limitations and exclusions. For complete benefits and other provisions, please refer to your certificate. This coverage does NOT replace Workers' Compensation Insurance. This product is inappropriate for people who are eligible for Medicaid coverage.



American Fidelity Assurance Company
americanfidelity.com

Identity Theft Protection

Experian | experian.myfinancialexpert.com | 855-797-0052

Millions of Americans report having their identity stolen each year. People are online and mobile more than any time in history, so it's no surprise that identity theft is on the rise. And it goes far beyond simply having your credit card number stolen. While credit card fraud is one of the highest reported types of identity theft, it also includes bank, loan, phone and tax-related fraud.

Identity theft insurance won't prevent your identity from being stolen. But it will be there to alert you if any suspicious activity is noticed under your name. The plan includes credit bureau monitoring, social security number usage and lost wallet protection. Accounts are monitored daily so you can rest easy knowing your identity is being protected even while you sleep. The sooner you can take action to close your accounts, the quicker you can recover your identity.

It takes years to establish a good reputation with credit lenders and employers. Make sure it remains yours by taking advantage of the identity theft insurance offered through your employer.





MY FINANCIAL
EXPERT™

Device Security, Identity Protection & Restoration + Financial Wellness

2026

Employee Benefits Plan Guide



RICHLAND ONE
ENGAGE • EDUCATE • EMPOWER

Proactive data protection for you & your devices

Technology has made identity theft a greater threat than ever. Today, personal data management is the key to guarding sensitive information and preventing fraud. Put technology and data to work for you with strategic digital privacy tools, identity protection, and restoration services.

Device & Data Security



Safe Browser

Browse the web without fear of threats. Get the support of ad and tracker blocking features—plus notifications if a site may be harmful.



Unlimited Devices



Ad-Blocker



Phishing & Malware Protection



Password Manager

Build a vault of logins, bank accounts, and credit card numbers with an airtight password manager that makes sure information is secure and protected. Enjoy access to a strong password generator that is fully compatible with auto-fill features for supported browsers.



Unlimited Devices



Unlimited Entries; Accounts, Logins, Passwords, Etc.



Secure VPN (Virtual Private Network)

Make sure private Wi-Fi networks stay private. An ironclad VPN protects data that is in transit to and from the device it is installed on.



Unlimited Devices



Digital Identity Manager™ (Data Broker Removal)

Remove your personal information from public websites that make it easier for identity thieves, hackers, and spammers to gain access.

- Find your exposed information
- Take control and reclaim your data
- Reduce future risk and manage exposure



Ongoing Personal Data Monitoring



Automated / Assisted Data Removal



Identity Health Score¹

Get a clear understanding of your unique risk factors, plus a personalized and prioritized action plan to help take control of your identity and better protect yourself.



Personalized Action Plan

¹ The Identity Health Score is different than a credit score and has no impact on your credit score.

Stay vigilant with identity monitoring & alert features

The convenience of being connected to everything puts us all one step closer to the ones who want to steal our identities. You'll have access to consistent monitoring, instant notifications, and resources for retrieval you'll need to protect your information.

Identity Monitoring & Alerts



Account Takeover Monitoring

Receive alerts that can help you stay aware of:

- Account applications, openings, and takeovers
- Suspicious account activity and potential fraud as it happens



Court Records Monitoring

Notifies you if your information, such as name and date of birth, is found in U.S. County, State, or City court records.



Sex Offender Monitoring

View a map of registered sex offenders living in your neighborhood and receive notifications when new offenders move in.



Change of Address Monitoring

If someone makes a change request with the USPS that matches your personal information, you will get an alert.



Alternative Loan Monitoring (Payday Loans)

Get an alert if someone uses your identity to get approved for a high-interest, short-term loans.



Dark Web Monitoring¹

Notifies you if you or your child's personal information is found on any of the thousands of websites or millions of data points we scan.



Social Security Number Monitoring¹

Identity thieves can use your SSN to get credit, make purchases, and more. We'll notify you if a new name, nickname, or address becomes linked to your number.



Social Media Monitoring¹

Notifies you if something posted on Facebook, LinkedIn, or X puts you at risk for ID theft or compromise your privacy.



¹ Child monitoring includes up to 10 children under the age of 18. One-time Parent/Legal Guardian verification may be required.

Get help becoming whole again

Services are available to assist you in reclaiming what's rightfully yours.

Identity Theft & Fraud Restoration



Full-Service Fraud Restoration

Access a regulatory trained agent that can help assist through nearly every step of the restoration process—multilingual services available.



Elder Fraud Restoration

Professional restoration agents ready to help senior family members recover from the rising threat of fraud and identity theft.



Up to \$3 Million Identity Theft Insurance (Expense Reimbursement)¹

Identity theft can be a costly experience – taking time and money to recover. With a no-deductible Identity Theft Insurance¹ policy, you could get reimbursed for unexpected out-of-pocket expenses such as legal fees, lost income, fraudulent transactions, and stolen funds.

🏧 Cash Recovery (Checking, Savings, HSA, & 401K)

💰 Lost Wallet with up to \$500 Emergency Cash¹

🌐 Cyber Extortion

😞 Cyber Bullying

👤 Deceased/Ghosting Identity Theft

📄 Employment/Application Identity Theft

👴 Elder/Senior Fraud Expense Recovery

¹ The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company under group or blanket policy(ies). The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. [Review the Summary of Benefits.](#)

Additional protection resources

Help strengthen your protection with these integrated services.

Additional Resources



Security Freeze

Freeze your credit file for free. A security freeze, often known as a credit freeze, limits access to your credit reports—helping protect you against identity theft.



Child Credit Security Freeze¹

You have the right to place a security freeze on your minor child's credit report to help protect their credit until they come of age. A freeze blocks processing of credit applications made in the child's name.



Bank Security Freeze

Help prevent unauthorized account openings. You can place a security freeze on your consumer report to assist you in managing access to your data.



Utilities Security Freeze

Help better protect yourself and limit access to your utilities data, such as payment and account history, reported by member service providers in the telecommunications, pay TV, and utility industries.



Employment Security Freeze

If you are an employee or individual seeking employment, your employer may use employment verification services to confirm your identity and that you are authorized to work in the United States. Help prevent unauthorized access with an employment data security freeze.



Tax ID Protection

Protect yourself against potential fraud with an Identity Protection PIN (IP PIN) from the Internal Revenue Service® (IRS) that helps prevent someone else from filing a tax return using your personal information.

 ¹ Child credit freeze assistance via call center by legal parent or guardian.

Strengthen your financial defenses with proactive monitoring and alerts

Get proactive monitoring services to help strengthen your financial defenses and receive notifications as soon as we detect suspicious credit or financial activity which could be an early indication of potential fraud.

Credit Monitoring & Alerts



Tri-Bureau Credit Monitoring

Leverage the access and greater oversight of all three bureaus with notifications of key changes to your credit reports.



Experian Credit MonitoringSM

With always-on monitoring you'll get alerts to track your progress or help spot signs of potential ID theft to help protect your future.



Credit Limit, Utilization, & Balance (C.L.U.B.) Alerts

Get real-time notification of key changes to your credit limits, account balances, or how much available credit you've used.



Positive Activity & Dormant Account Alerts

Receive notice when an account balance is at zero for more than six months or when improvements happen that could indicate healthy financial habits.



Authorization Alerts

Get notified in real time when your personal information is used to apply for new credit—so you can defend against potential fraud.



Inquiry Alerts

Get real-time notifications when a new credit application, known as a hard inquiry, is found on your Experian credit file.



Experian CreditLock¹

Boost your financial by blocking fraudsters from using your information to get new credit and help prevent identity theft.



Tri-Bureau Credit Freeze Assistance

Get help from a professional support agent to help freeze the credit files of you and your family members.

¹ Experian CreditLock is a separate service from [Security Freeze](#). To learn more about the differences between CreditLock and Security Freeze [click here](#).

Improve how lenders see you to help your approval odds

Take control and improve how lenders see you with a credit education experience from Experian. Innovative features provide you direct access to the reports and scores lenders use to make credit approval decisions.

Credit Education



Tri-Bureau Credit Report & VantageScore® Credit Score¹ (Quarterly)

Access your credit information from all three major bureaus to get the most detailed look on how lenders see you.



Experian Credit Report (Daily)

Get a detailed look at the information lenders use to offer you credit and set interest rates based on your Experian Credit Report.



VantageScore Credit Score (Daily)

Access your VantageScore Credit Score which leverages machine learning techniques—resulting in greater accuracy.



VantageScore Tracker (Daily)

Monitor your financial wellness goals with a credit score tracking tool that provides a month-by-month view of your VantageScore Credit Score.



VantageScore Simulator

An interactive tool that estimates your potential future VantageScore Credit Score based on specific credit decisions and actions.



Credit Education Center

Visit our digital hub for quick videos and detailed re-sources to increase your knowledge and build a healthy credit profile.



Credit College by Experian

An interactive digital course that can help take you from credit beginner to credit master in about 45 minutes.



Financial Calculators

Get help planning for life's biggest moments such as saving for college, managing cash flow and debt, or buying a home.

¹ Calculated on the VantageScore 3.0 model. Your VantageScore 3.0 from Experian® indicates your credit risk level and is not used by all lenders, so don't be surprised if your lender uses a score that's different from your VantageScore 3.0. [Click here to learn more.](#)

Find your path to financial wellness

With the personal finance features of My Financial Expert™, you'll gain tools to help you manage your credit and finances in a single experience.

Financial Management & Planning



Digital Financial Manager™

Track all your financial accounts and transactions in one place, create and manage budgets, assess investment performance, view net worth, manage and predict cashflow, and more.

-  Unlimited Account Link (Checking, Credit, 401k etc.)
-  Financial & Credit Improvement Insights
-  Centralized Financial Dashboard
-  Automated Budgets powered by Artificial Intelligence
-  Digital Wallets (Apple Pay®, PayPal®, etc.)
-  Transaction & Spending Categorization
-  Spending Summaries & Insights
-  Debt Management
-  Cash Flow Management
-  Financial Goal Planning & Tracking
-  Net Worth & Investment Tracking
-  Financial Health Analysis & Score
-  Account Activity Alerts
-  Transaction Alerts
-  Payment Reminders

Elite Plan Coverage Options

Individual plan coverage:

Employee & up to 10 children (under 18) for monitoring.

\$3.98 per pay period (semi-monthly)

Family plan coverage:

Individual plan, plus up to 10 adult family members.

\$7.23 per pay period (semi-monthly)

Protect, grow, & thrive with My Financial Expert™

Identity theft can happen to anyone and the damage it causes to your personal financial wellness can be hard to undo. Help reduce your worry and get the trusted tools and services to protect your data, devices, and identity while safeguarding your finances from potential fraud.



MY FINANCIAL
EXPERT™



Elite Plan Benefits

Full suite of privacy, protection, & restoration tools



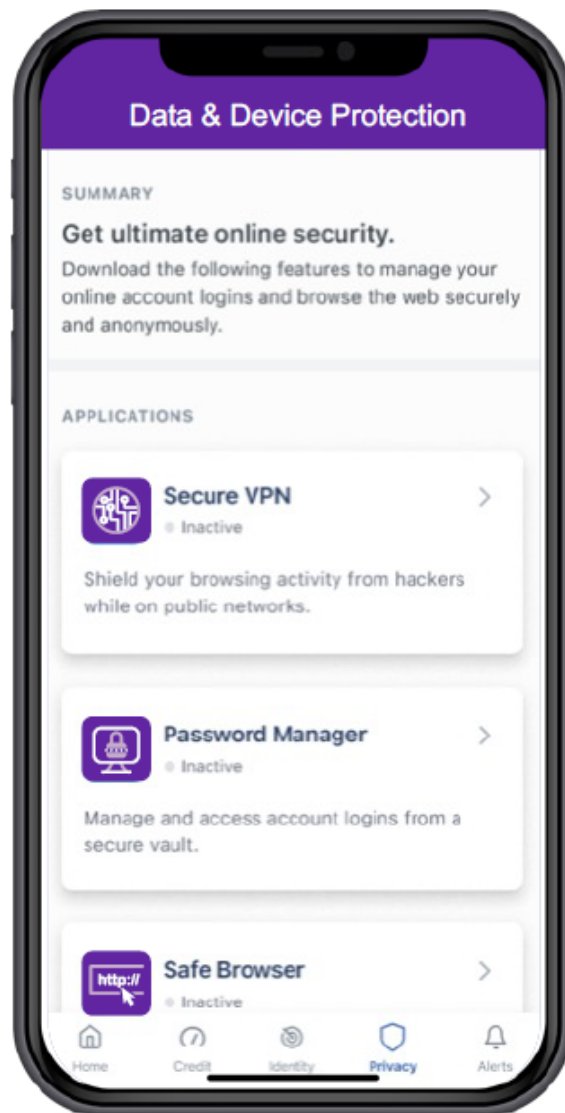
MY FINANCIAL
EXPERT™

ID Protection & Restoration

Identity Health Score ¹
Account Takeover Monitoring
Alternative Loan Monitoring (Payday Loans)
Change of Address Monitoring
Court Records Monitoring
CyberAgent® Dark Web Monitoring (Adult & Child) ²
Sex Offender Monitoring
Social Security Number Monitoring (Adult & Child) ²
Social Media Monitoring (Adult & Child) ²
Full-Service Fraud Restoration (Multilingual, Adult, & Child) ²
Elder Fraud Restoration (Multilingual Support)
Bank, Utilities, & Employment Security Freezes
Tax ID Protection
Up to \$3M Identity Theft Insurance (Expense Reimbursement) ³
↳ Cash Recovery (Checking, Savings, HSA, & 401K)
↳ Lost Wallet with up to \$500 Emergency Cash ³
↳ Cyber Extortion
↳ Cyber Bullying
↳ Deceased/Ghosting Identity Theft
↳ Employment/Application Identity Theft
↳ Elder/Senior Fraud Expense Recovery

Data & Unlimited Device Security

Safe Browser (Phishing & Malware)
Password Manager
Secure VPN (Virtual Private Network)
Digital Identity Manager™ (Data Broker Removal)



Available on PC and Mac in addition to Android and iOS devices.



RICHLAND ONE
ENGAGE • EDUCATE • EMPOWER

¹ The Identity Health Score is different than a credit score and has no impact on your credit score.

² Child monitoring includes up to 10 children under the age of 18. One-time Parent/Legal Guardian verification may be required to receive alert details for children.

³ The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company under group or blanket policy(ies). The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. [Click here for Summary of Benefits.](#)

Advanced planning tools could offer a path to financial wellness

Credit Monitoring & Alerts

Tri-Bureau Credit Reports & VantageScore® Credit Score¹ (Quarterly)

Experian Credit Report (Daily)

VantageScore Credit Score¹ (Daily)

VantageScore¹ Tracker (Daily)

VantageScore¹ Simulator

Experian Credit MonitoringSM

Experian CreditLock

Tri-Bureau Freeze Assistance (Adult/Child)²

Inquiry & Authorization Alerts

Credit Limit, Utilization, & Balance (C.L.U.B.) Alerts

Credit Education Center

Financial Calculators

Digital Financial Manager™

Unlimited Account Link (Checking, Credit, 401k etc.)

Financial & Credit Improvement Insights

Automated Budgets powered by Artificial Intelligence

Digital Wallet (Venmo®, Apple Pay®, PayPal®, etc.)

Transaction & Spending Categorization

Spending Summaries & Payment Reminders

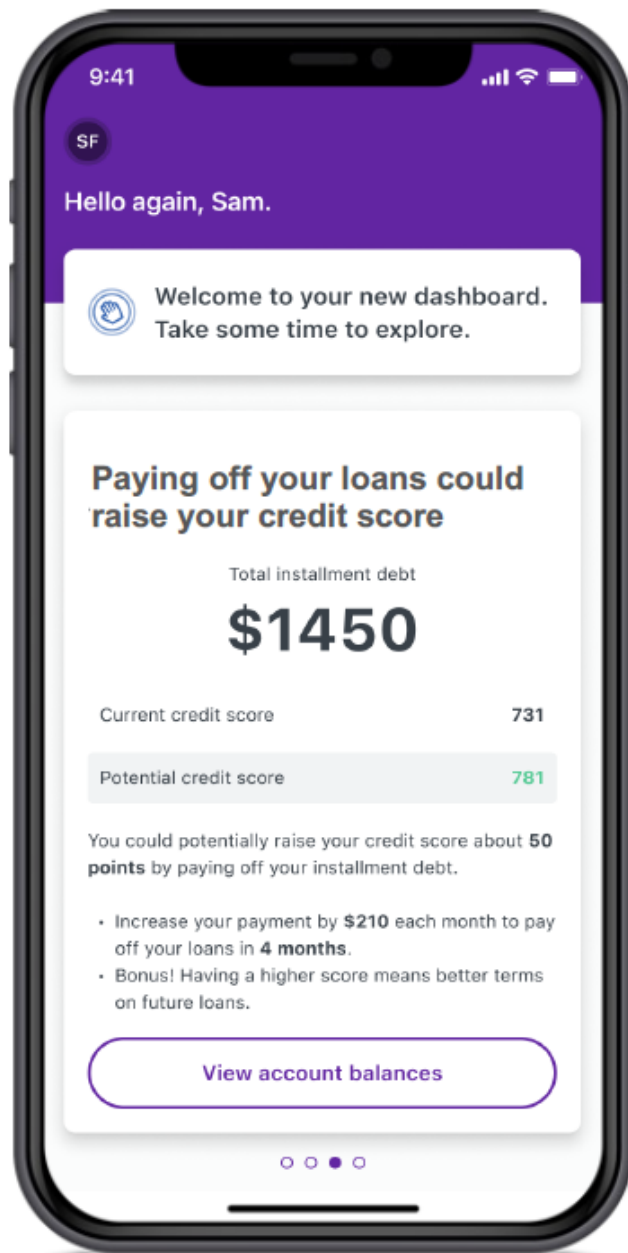
Debt & Cashflow Management

Financial Goal Planning & Tracking

Net Worth & Investment Tracking

Financial Health Analysis & Score

Account Activity & Transaction Alerts



Individual plan coverage:

Employee & up to 10 children (under 18) for monitoring.²

\$3.98 per pay period (semi-monthly)



Family plan coverage:

Individual plan, plus up to 10 adult family members.

\$7.23 per pay period (semi-monthly)

¹ Calculated on the VantageScore 3.0 model. Your VantageScore 3.0 from Experian® indicates your credit risk level and is not used by all lenders, so don't be surprised if your lender uses a score that's different from your VantageScore 3.0. [Click here to learn more.](#)

² Child monitoring includes up to 10 children under the age of 18. One-time Parent/Legal Guardian verification may be required to receive alert details for children.

Legal Plan



LegalEASE | legaleaseplan.com/richlandone | 800-248-9000

Have you ever found yourself in need of legal advice, but aren't sure where to go? A voluntary group legal plan helps fill that need. It provides you with access to professional lawyers at a low monthly rate. For just a few dollars a month, you can consult with a lawyer about having your will prepared, reviewing documents, contesting a traffic ticket, lawsuits, divorce and so much more. Expert legal advice is available at your fingertips.



Your legal plan. Your peace of mind.

Get matched with an attorney – we cover all hourly fees.

For \$10.12/per pay-period, you have a legal team ready when life gets complicated.

When would you use it?



Getting Married

- Prenuptial Agreement
- Name Change
- Tax Audit



Living on Your Own

- Tenant & Landlord Disputes
- Student Loan Refinancing
- Debt Collection Defense



Starting a Family

- Adoption & Guardianship
- Child Custody & Support
- Living Will



Retiring

- Will & Estate Planning
- Healthcare Power of Attorney



Parents of Teens

- Traffic Tickets & Accidents
- Juvenile Court Proceedings
- School Disputes & Bullying



Navigating Challenges

- Identity Theft
- DUI Defense
- Consumer Dispute



RICHLAND ONE
ENGAGE • EDUCATE • EMPOWER

Your Plan:

\$10.12 per pay-period

via payroll deduction based on a 24 pay-period deduction schedule

Who's Covered

Employee, Spouse, Dependent Children up to age 26, Parents - coverage for care.com and Elder Law Benefits.

What's covered on your plan

	Non-Member Cost	LegalEASE Member Cost
Estate planning (wills, trusts, POA)	Up to \$400+/hr	Paid in full
Family law (custody, support, adoption)	Up to \$400+/hr	Paid in full
Residential real estate	Up to \$400+/hr	Paid in full
Consumer protection/debt	Up to \$400+/hr	Paid in full
Traffic/criminal defense	Up to \$400+/hr	Paid in full
Elder law	Up to \$400+/hr	Paid in full
Immigration	Up to \$400+/hr	Paid in full

Every plan is different. Scan to see exactly what yours covers.

More with your plan



Real-time attorney access

A live attorney on the phone during traffic stops and police encounters.



DIY legal documents

Create wills, contracts, and legal forms online – reviewed by an attorney.



Caregiving services

Find trusted caregivers for children, seniors, and pets via Care.com.



Sensible Divorce

Mediation-first divorce support with experts available as needed.

Included services vary by plan. Scan for your complete plan details.

How to use your plan



Go online

Log in to LAMP to get matched with an attorney quickly.

<https://legaleaseplan.com/richlandone>



Call us

Talk to a Member Advocate who walks you through your options.

1 (800) 248-9000 | M-F 7:00AM – 7:30PM CST



Your full benefits summary is one scan away.

See every covered matter, find your group microsite, and learn how to get started.

<https://legaleaseplan.com/richlandone>

An Attorney In The Passenger Seat.

Connect with an attorney by video the moment you're pulled over

BLACK-OWNED • EXCLUSIVE TO LEGALEASE • FREE WITH YOUR PLAN



What You Get



Real Attorneys, Real-Time

Video chat with an attorney the moment you're pulled over – experts in traffic, criminal, and personal injury law.



Built To De-Escalate

Attorneys are trained to calm the interaction and guide you through it, for everyone's safety.



Automatic Recording

No need to fumble for your phone – the interaction is captured and saved automatically, ready if you need it later.

When You'd Use It

- ✓ Any traffic stop, routine or not
- ✓ A car accident
- ✓ A teen or young driver pulled over alone
- ✓ Verifying an unmarked vehicle or plainclothes stop is legitimate before you comply

Trusted When It Matters Most

"I really appreciate this app. I was unable to record on my phone because of my storage and the piece of conversation that TurnSignal recorded was crucial."

– T.K., TurnSignal User

Download TurnSignal through your LegalEASE plan. Learn more at legaleaseplan.com/learn/turnsignal.



Two Ways To Find Your Attorney.

Fast and self-guided, or hands-on with a real person – you choose how you get matched.

Once you're enrolled, connecting with a Plan Attorney is quick and easy. Pick the path that fits how you like to handle things.



Go Online: LAMP

GET CONNECTED IN AS LITTLE AS 2-3 BUSINESS DAYS

The LegalEASE Attorney Matching Portal narrows the field for you – not a directory to search, a match built around your preferences.

- ✓ Set your preferences – area of law, communication style, and more
- ✓ LAMP matches you to a compatible Plan Attorney

Visit legalcorner.legaleaseplan.com to get started.



Call Us: Member Advocate

GET MATCHED WITHIN 1-2 DAYS, ON AVERAGE

Not sure where to start? A trained Advocate walks you through your options – no wrong door.

- ✓ Guidance on legal, financial, ID theft, credit, and related matters
- ✓ A real person who takes the time to understand your situation

Call 1-888-416-4313, M-F, 7:00AM – 7:30PM CST.



Limitations and exclusions apply. This benefit summary is intended only to highlight benefits and should not be relied upon to fully determine coverage. More complete descriptions of benefits and the terms under which they are provided will be furnished upon enrollment and in your Certificate of Insurance. Plan enrollment and administrative services are provided by Legal Access Plans, L.L.C. or LegalEASE, Home Office: Houston, TX. Where regulated as insurance, coverage is underwritten by American Bankers Management Company, Inc. (dba ABMC), Virginia Surety Company, or Wesco Insurance Company; the underwriter for your coverage is identified in your Certificate of Insurance. In states where legal services plans are not regulated as insurance, this is a legal services benefit plan and is not insurance. Benefits, availability, and terms vary by state and are subject to the terms, conditions, limitations, and exclusions of the policy and Certificate of Insurance. Please contact LegalEASE for complete details. ©2026 LegalEASE. All rights reserved. VSC_INS_Enroll_1PG_RichlandCountySchoolDistrict_2026-09.

A legal benefits plan can ease the biggest stresses – finding and paying for legal expertise when you need it most.

Life events can lead to unexpected legal concerns that are difficult to handle alone. Enrolling in a legal benefits plan reduces the stress of finding and paying for an attorney when it matters most.

LegalEASE offers a legal benefits plan that provides support and protection for unexpected personal legal issues.

What you get with a LegalEASE benefits plan:

- An attorney with expertise specific to your personal legal matter
- Access to a national network of attorneys with exceptional experience that are matched to meet your needs
- In and out-of-network coverage
- Concierge help navigating common individual or family legal issues

The value of a LegalEASE benefits plan.

As a member, you have access to a national network of over 23,000 attorneys who are matched to your specific legal needs. Being a LegalEASE benefits member also saves you time and costly legal fees. But most importantly, it gives you confidence and provides coverage* for:

- Home and consumer (Buying, selling, foreclosure and tenant disputes)
- Financial (Debt collection, collections, contracts)
- Auto and traffic (Traffic matters and license suspensions)
- Family (Adoption, name change)
- Estate planning and wills (Will, living will, health care power of attorney)

The LegalEASE Plan is **\$10.12 per pay-period**, via payroll deduction based on a 24 pay-period deduction schedule.

To learn more about your legal benefits plan, visit <https://legaleaseplan.com/richlandone> or call 1 (800) 248-9000.

Be prepared and fully confident with a LegalEASE benefits plan.

You work hard to make the right choices for your loved ones – especially when it comes to legal and financial matters. Get the peace of mind you want and the protection you need with LegalEASE.

*Visit <https://legaleaseplan.com/richlandone> for more information.

Do It Yourself. Not By Yourself.

Create wills, contracts, and legal forms online.
Reviewed by an attorney, included in your plan.

Your LegalEASE plan includes LawAssure, an online legal document center available anytime, on any device – no attorney required to get started.



What You Get



Guided, Step-by-Step

Answer a few questions and watch your document build in real time, with plain-English guidance along the way.



Share & Collaborate

Use the LawAssure secure workflow to share documents with others, including lawyers or trusted advisors for review.



Secure & Always Accessible

Save your progress and pick up where you left off – on any device, whenever you need to.

When You'd Use It

- ✓ Writing a will after buying your first home
- ✓ Reviewing a lease before you sign it
- ✓ Setting up a healthcare directive
- ✓ Sending a formal complaint letter

What You Can Create

Estate Planning

- Wills
- Trust
- Power of Attorney
- Living Wills

Landlord/Tenant

- Leases
- Room Rental
- Property Condition

Consumers

- Bills of Sale
- Complaint & Dispute Letters

Pets

- Pet Sitting
- Pet Will
- Pet Trust

Household

- Construction Agreements
- Care Agreements

Go online to legaleaseplan.com/LawAssure to get started.

Find Care You Trust. Fast.

Background-checked caregivers for kids, parents, and pets, through Care.com – included in your plan.

Your LegalEASE plan includes Caregiver Services, giving you access to the world's largest network of in-home and facility-based care – matched to your needs, on your schedule.



What You Get



Personalized Matching

Answer a few questions and get connected with caregivers who fit your specific needs.



We Do the Legwork

A specialist researches and prescreens your options – saving you an average of 19 hours per topic.



Vetted & Background-Checked

Every caregiver in the network passes a background check before you ever see their profile.

When You'd Use It

- ✓ A last-minute sitter for date night
- ✓ Vetted in-home help for an aging parent
- ✓ Support after a child's new diagnosis
- ✓ A pet sitter while you're traveling

Who You Can Find Care For

Children

Daycare, camps, and backup care, plus support for adoption and parenting

Aging & Adult Family

Guidance on nursing home, home health, and assisted living options, plus help navigating Medicare and Social Security

Disability & Neurodiversity

Coaching through testing, diagnosis, and ongoing planning, plus help navigating disability laws and benefits

Home Care

Home improvement, moving, and other professional home services

Call LegalEASE Member Services at 1(888) 416-4313. We'll connect you with a Caregiver Specialist.

Divorce Doesn't Have to Look Like Litigation.

Mediation-first divorce support through Hello Divorce – legal help only when you actually need it.

Your LegalEASE plan includes the Sensible Divorce Platform, powered by Hello Divorce – a guided, amicable path through divorce, with an attorney involved only when the law requires it.

hello divorce.

What You Get



A Coordinator, Not Just a Case Number

One person stays with your case from start to finish – someone to call with questions, not a new rep every time.



Mediation Over Litigation

Built for couples who want an amicable split, not a courtroom fight.



Attorney Support When It's Required

Legal representation is there when the law calls for it – not the default starting point.

How It Works

- 1 Intake**
Share a few basic details to start your request.
- 2 Area of Law**
Tell us what you're facing, from divorce to related family matters.
- 3 We Handle the Paperwork**
Your coordinator files and tracks your case, start to finish.
- 4 Move Forward with Confidence**
Mediation, representation, or self-guided – whichever fits, we help you get there.
- 5 After-Divorce Help**
Access resources to help you form a new budget, adjust to single life, and handle co-parenting logistics.

Contact LegalEASE Member Services at 1(888) 416-4313 to get started.

Hospital Indemnity Insurance

Manhattan Life | www.manhattanlife.com | 800-669-9030

Hospital stays are costly. If you or a family member find yourself in the hospital due to a sudden accident or illness, you may struggle financially, even if you have a good medical plan. With a hospital indemnity plan, you can rest assured those extra expenses won't be a financial burden.

Unlike medical plans, there are no deductibles to meet with a hospital indemnity plan. As soon as you incur a qualified event, you can file a claim and start receiving benefits.

The plan pays a lump sum benefit in a previously specified amount. The money can be used for medical costs, insurance deductibles, groceries, transportation, childcare – the choice is up to you!





ManhattanLife.

Hospital Indemnity

Providing supplemental hospital benefits for you and your family



Cash benefits paid to you

Hospital Indemnity plans pay employees a lump-sum cash benefit when they're hospitalized. These cash benefits pay in addition to other coverage. Benefits can be used however they choose: to help pay medical bills and cover everyday expenses. It can help them get back on their feet and back to work.

Here are some more benefits to you

- Receive a cash benefit regardless of any other insurance you have.
- Don't worry about a physical exam; it's not required.
- Pay your premiums through payroll deduction.

Here's how it works

You'll be reimbursed a specified amount for covered hospital confinement. Benefits are paid directly to you, and you can use the cash however you want. It's that simple.

This is not a complete disclosure of plan qualifications and limitations. The amount of benefits provided depends on the plan selected. Premiums will vary according to the selection made. THIS POLICY PROVIDES LIMITED BENEFITS. Underwritten by ManhattanLife Insurance and Annuity Company, and ManhattanLife Insurance Company for FL, NJ, & NY. Applications will not be accepted under this offer until written acceptance of this offer, the Employer Agreement and minimum Participation Requirements are received in ManhattanLife's New Business Department.

Hospital Indemnity

Coverage type		Hospital Indemnity is a group policy form that includes coverage for inpatient confinement along with other benefits to pay expenses for hospital stays.	
Product	Policy Type:	Group	
	Policy Name:	Hospital Indemnity Insurance	
	Policy Form:	AS7007	
Eligibility	Issue Age:	Employee:	18-99
		Spouse:	18-99
		Child:	Under age 26
	Criteria:	- Employee is benefit eligible, actively at work full-time, working at least 20 hours per week. Spouse and children not eligible if Employee is not issued coverage. - Spouse includes domestic partner where allowed by state and Employer.	
	Termination Age:	- EE: Age 100 unless actively at work, then on last day of active employment. - SP: Age 100, or when Employee terminates, whichever is earlier. - Child: Age 26, or when Employee terminates, whichever is earlier.	
		Coverage Tier	Guarantee Issue
Underwriting Offer		Employee:	Guarantee Issue
		Spouse:	Guarantee Issue
		Child(ren):	Guarantee Issue
Target Participation	Minimum to Issue:	5 Employee enrolled or 1% of eligible Employees, whichever is greater.	
	Guarantee Issue:	Waived, expectation of 15% of all eligible enrolled by end of the enrollment.	

This is not a complete disclosure of plan qualifications and limitations. The amount of benefits provided depends on the plan selected. Premiums will vary according to the selection made. THIS POLICY PROVIDES LIMITED BENEFITS. Underwritten by ManhattanLife Insurance and Annuity Company, and ManhattanLife Insurance Company for FL, NJ, & NY. Applications will not be accepted under this offer until written acceptance of this offer, the Employer Agreement and minimum Participation Requirements are received in ManhattanLife's New Business Department.

Benefits and Features

	Option One
Hospital Indemnity Daily Room and Board	\$150, Max 30 days per calendar year.
Intensive Care Daily Room and Board	\$150, Max 30 days per calendar year.
First Hospital Admission Non-ICU	\$1,500
First Hospital Admission ICU	\$1,500
Total Maximum Days	1 day per calendar year.
Health Screening/Wellness	\$100, Max 1 day per calendar year.
Pre-existing Condition Limitation	Waived
Maternity Waiting Period	Waived
Portability	None
Waiver of Premium	Included

This is not a complete disclosure of plan qualifications and limitations. The amount of benefits provided depends on the plan selected. Premiums will vary according to the selection made. THIS POLICY PROVIDES LIMITED BENEFITS. Underwritten by ManhattanLife Insurance and Annuity Company, and ManhattanLife Insurance Company for FL, NJ, & NY. Applications will not be accepted under this offer until written acceptance of this offer, the Employer Agreement and minimum Participation Requirements are received in ManhattanLife's New Business Department.

Definitions

HOSPITAL INDEMNITY ROOM AND BOARD BENEFIT: If a covered person is confined as an inpatient in a hospital, this benefit pays a daily benefit on day one (1) for the hospital room and board. Confinement must begin while the Certificate is in force; be for at least 18 hours; and be for a covered illness or injury. If this benefit is paid, then the Intensive Care Daily Room and Board Benefit is not paid. If the Covered Person has a stay in both the non-ICU room of the hospital and an ICU room on the same day, only one will be paid, either the Hospital Daily Room and Board benefit or the Intensive Care Daily Room and Board benefit, whichever is the greater amount.

INTENSIVE CARE DAILY ROOM AND BOARD BENEFIT: If a covered person is confined as an inpatient to an Intensive Care Unit, this benefit pays a daily benefit on day one (1) for the intensive care room and board. Confinement must on an inpatient basis; begin while the Certificate is in force; be for at least 18 hours; and be for a covered illness or injury. If this benefit is paid, then the Hospital Room and Board Benefit is not paid. If the Covered Person has a stay in both the non-ICU room of the hospital and an ICU room on the same day, only one will be paid, either the Hospital Daily Room and Board benefit or the Intensive Care Daily Room and Board benefit, whichever is the greater amount.

FIRST HOSPITAL ADMISSION BENEFIT (NON-ICU): If a covered person is confined as an inpatient in a hospital for the first time during a year, pays a one-time lump sum. Hospital confinement must begin while the coverage is in force; be for at least 18 hours as an inpatient; and be for a covered illness or injury. Benefit will not be paid if ICU Admission benefit is paid.

FIRST HOSPITAL ADMISSION BENEFIT (ICU): If a covered person is confined as an inpatient in a hospital ICU for the first time during a calendar year, pays a one-time lump sum per year. Hospital confinement must begin while the coverage is in force; be for at least 18 hours as an inpatient; and be for a covered illness or injury. Benefit will not be paid if Non-ICU Admission benefit is paid.

HEALTH SCREENING/WELLNESS BENEFIT: If a Covered Person undergoes a Health Screening/Wellness examination for eligible preventative services, such as routine physical, exams, immunizations, blood tests, or age-appropriate screenings, We will pay the per day benefit shown on the Schedule of Benefits.

WAIVER OF PREMIUM: Maximum waiver of premium benefit is limited to a total of 12 consecutive months per disability. This waives an Employee's premium if he or she becomes totally disabled for at least 90 days after the effective date of coverage. There is no lifetime Maximum. Issue age 18-64, terminates at age 65.

PRE-EXISTING CONDITION LIMITATION: If a member has a pre-existing condition that is diagnosed or symptoms occurred in the 12 months prior to the policy effective date, no benefits will be paid for the first 12 months of the policy effective date. Refer to the certificate of coverage for specific pre-existing limitations. This has been waived for this offer.

Benefit:	Semi-Monthly (24) premium			
	Employee	Employee/Spouse	Employee/Child(ren)	Family
Option 1	\$8.67	\$17.02	\$16.92	\$26.02

Note: Final implementation rate may vary slightly due to rounding

Nationwide Pet Insurance

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Pets are like family and it's important to protect their health, too. A pet insurance policy can help you save on vet bills, medical needs, medication and a variety of procedures. Choose the plan that works best for you and your furry friend.

WHY CHOOSE A PET INSURANCE PLAN?

- It could help protect you from significant out-of-pocket expenses if your pet needed emergency care, surgery or other costly treatment.
- Many pet insurance plans offer comprehensive coverage that includes accidents, illnesses, chronic conditions and sometimes even preventative care and wellness visits, depending on the policy.
- With pet insurance, you might be more inclined to seek medical care for your pet sooner, leading to better health outcomes.

Every pet insurance policy isn't the same, so be sure to check your plan brochure for details. This is a discount program for employees. It is for your information only. If you choose to enroll, it will not be taken as a payroll deduction.

If you have questions about the pet insurance plan available to you, please contact your FFGA account representative.



Nationwide® My Pet Protection ChoiceSM

PLAN SUMMARY



Pet-loving employees can fetch the best health coverage for their pets with My Pet Protection ChoiceSM, available only through workplace benefit programs.

Nationwide offers two ready-made employee plans, plus the ability to customize a coverage plan for individual pets and their specific care needs.¹

My Pet Protection Choice SM	Accident & Illness	Accident, Illness & Wellness	Customizable
Annual deductible options	\$250	\$250	\$100 to \$500
Reimbursement level	80%	80%	50%, 70% or 80%
 Accident coverage	✓	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000
Broken bones, animal attack, hit by car, poisoning, heatstroke, and more	✓	✓	✓
 Illness coverage	✓	✓	Optional
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000
Ear infections, diabetes, vomiting, allergies, cancer, and more	✓	✓	✓
 Hereditary & congenital coverage	✓	✓	Optional when purchased with illness coverage
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000
Hip dysplasia, cherry eye, elbow dysplasia, umbilical hernia, brachycephalic syndrome, and more	✓	✓	✓
 Wellness coverage (for dogs & cats)		✓	Optional
Annual maximum		\$450	\$450 or \$800
Vaccination or titer, fecal test, deworming, microchip, health certificate, heartworm or FeLV/FIV test, flea control or heartworm prevention, and more		✓	✓
Spay/neuter or dental ² and one additional test ³			✓



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What makes My Pet Protection ChoiceSM different?

Every My Pet Protection ChoiceSM policy includes guaranteed issuance,⁴ plus additional benefits to support pet families:

- Emergency boarding and kenneling fees
- Lost pet due to theft or straying
- Lost pet advertising and reward
- Mortality benefit



Nationwide is the industry's first provider of coverage for birds and exotic pets.

Nationwide offers more than great coverage

VetHelpline[®]

24/7 pet telehealth support

All Nationwide[®] pet insurance members enjoy unlimited access to VetHelpline[®] for round-the-clock telehealth with licensed veterinary professionals.

veterinary services

Save on veterinary care

Nationwide[®] pet insurance members save 10% on every visit to a Vetco Total Care Hospital or Vetco Vaccination Clinic inside Petco.

Nationwide PetRxExpress[®]

Discounted pet medications

Save time and money when filling pet prescriptions at participating pharmacies with Nationwide PetRxExpress[®].

vetco total care

Vetco Total Care is a full-service animal hospital that offers everything from preventive care to diagnostics and surgery

vetco[®] vaccination clinic

Vetco Vaccination Clinic offers express care for vaccinations, flea/tick and heartworm prescriptions and microchipping

Easy to use, easy to understand

1 Visit any veterinarian, anywhere.

2 Submit a claim from any device.

3 Get reimbursed for eligible expenses once the deductible is met.



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[1] Some exclusions may apply. Certain coverages may be excluded due to pre-existing conditions. See policy documents for a complete list of exclusions and any annual limits that may apply. Plans may not be available in all states. Policy eligibility may vary. [2] Coverage for spay/neuter or dental starts 90 days after the original policy term effective date. [3] One additional test of the following: health screen (blood test), radiograph (X-ray), electrocardiogram (EKG) [4] Guaranteed issuance means any new pets enrolling into a My Pet Protection Choice plan are eligible for enrollment regardless of health status. Guaranteed issuance does not mean guaranteed coverage since certain exclusions could apply.

All plans require accident coverage; additional coverage for illness, hereditary & congenital, and wellness is optional. Optional coverage for behavior, prescription food and prescription supplements may also be available. Optional cruciate coverage may be added after the first year of coverage; not available in all states. Pre-existing conditions are not covered.

Products underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH; National Casualty Company (all other states), Columbus, OH. Agency of Record: DVM Insurance Agency. All are subsidiaries of Nationwide Mutual Insurance Company. Subject to underwriting guidelines, review and approval. Products and discounts not available to all persons in all states. Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Nationwide, the Nationwide N and Eagle, Nationwide is on your side, My Pet Protection, and VetHelpline are service marks of Nationwide Mutual Insurance Company. Third party marks are the property of their respective owners. ©2025 Nationwide. 24GRP10277N.



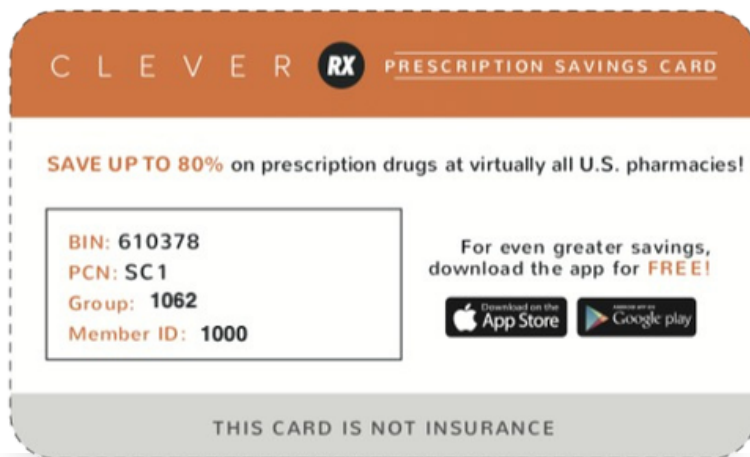
Nationwide[®]

Clever RX

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Clever RX helps you save money by using a prescription drug savings card. They partner with the healthcare community to bring state-of-the-art, money-savings tools to participants. It helps you save up to 80% off prescriptions drugs and often beats the average copay. Plus, it's completely free. Thanks to Clever RX, you will never overpay for prescriptions again!

Use Clever RX every time you pay for a medication for instant savings!



Download the app or visit the site to price a drug: <https://partner.cleverrx.com/ffga>.

Clever RX Highlights

- 100% FREE to use.
- Unlock discounts on thousands of medications.
- Save up to 80% on prescription medication – Often beats your copay!
- Download the Clever RX app by using the information on your card to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Contact Information

Product	Carrier	Website	Phone
Permanent Life Insurance	Texas Life	www.texaslife.com	800-283-9233
Short Term Disability	Manhattan Life	www.manhattanlife.com	800-669-9030
Cancer	AFA	www.americanfidelity.com	800-654-8489
Critical Illness	Manhattan Life	www.manhattanlife.com	800-669-9030
Accident	AFA	www.americanfidelity.com	800-654-8489
Identity Protection	Experian	experian.myfinancialexpert.com	855-797-0052
Legal Protection	LegalEASE	legaleaseplan.com/richlandone	800-248-9000
Hospital Indemnity	Manhattan Life	www.manhattanlife.com	800-669-9030
Pet Insurance	Nationwide	benefits.petinsurance.com	877-738-7874