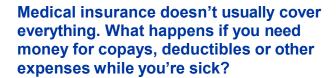


# Peace of Mind for Life's "What Ifs"

**Critical Illness Insurance** 



You can't predict cancer, a heart attack or a newborn's spina bifida. But you can do something to prepare for the out-of-pocket expenses that come with being very ill.

Purchase Group Critical Illness<sup>1</sup> insurance from Standard Insurance Company (The Standard<sup>1</sup>).

#### **Critical Illness insurance**

- · Helps with out-of-pocket costs from a covered illness
- Pays you or a covered family member, not medical providers
- Can help with whatever costs you decide like groceries, child care or other expenses
- Covers a variety of illnesses, including heart attack, cancer and stroke



#### **Insurance in Action**

#### Cancer

Shayna beat cancer, but there were many costs her medical insurance didn't cover. She had to pay her health plan's coinsurance for chemotherapy treatments and copays for doctor visits. Plus, her husband missed work to help care for her, which meant a loss of income.

Fortunately, Shayna's **Critical Illness** insurance helped shield her family's finances during treatment.

#### Shayna used her Critical Illness benefit to help cover:

- Medical insurance deductible
- · Doctor visit copays
- Out-of-pocket expenses for six months, including hair prosthetics
- Alternative treatments and diets not covered by her medical plan
- Transportation to medical appointments and treatments
- Lodging near treatment facility
- Husband's lost wages

## A serious illness shouldn't make your bank account sick.

Contact your human resources representative to learn how to apply for Critical Illness insurance.

- 1 Critical Illness insurance is called Specified Disease insurance in the state of Vermont.
- 2 Examples are for illustrative purposes. Eligibility for benefits and amounts shown in this example may vary from any policy your employer may offer and may vary based upon your individual circumstances, policy definitions, waiting periods, exclusions and limitations.

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

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

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Standard Insurance Company District School Board of Pasco County Group Policy #762048



## Group Critical Illness Insurance

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

You get a critical illness diagnosis

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

The Standard is there for you

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

3 Focus on getting better

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

#### Here's what it does:

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

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

## Here's how it works:

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

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

#### **Example Of Out-Of-Pocket Expenses**

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

#### **Example Of Benefits**

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

## These are the benefit options you may elect:

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

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

## Affordable Group Rates

Because you'll be buying this insurance through District School Board of Pasco County, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck.

The 22 Ded and 24 Ded premiums you would pay for Critical Illness insurance benefits are below.

Coverage Amount	Employee 22 Ded Premiums	Employee 24 Ded Premiums
\$10,000	\$ 5.35	\$ 4.90
\$20,000	\$10.69	\$ 9.80
\$30,000	\$16.04	\$14.70

Coverage Amount	Family 22 Ded Premiums	Family 24 Ded Premiums
\$10,000	\$ 8.02	\$ 7.35
\$20,000	\$16.04	\$14.70
\$30,000	\$24.05	\$22.05

## With Critical Illness insurance, you can:

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

#### **Covered Conditions**

## Receive 100 percent of your coverage amount for:

- · Heart attack
- Stroke
- Cancer (cancer that has spread beyond initial tissue)
- End stage renal (kidney) failure
- · Major organ failure
- Coma
- · Paralysis of two or more limbs
- · Loss of sight
- · Occupational HIV
- · Occupational Hepatitis
- · ALS (Lou Gehrig's Disease)
- · Advanced Alzheimer's Disease
- Advanced Multiple sclerosis
- Advanced Parkinson's disease
- · Benign brain tumor
- · Bone marrow transplant
- Loss of hearing
- · Loss of speech

#### Receive 25 percent of your coverage amount for:

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

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

Diagnosis and recommendation must occur after your coverage becomes effective.

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

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

## **Important Details**

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

#### **Portability**

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

#### **Eligibility Requirements**

To be eligible for this coverage, you must be 18 years old or older, a regular employee of District School Board of Pasco County, actively working in the United States at least 20 hours per week and a citizen or resident of the United States. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

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

A minimum number of eligible employees must apply and qualify for the proposed plan before Critical Illness insurance coverage can become effective.

#### **Your Effective Date**

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

#### **Annual Open Enrollment**

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

#### **Family Status Change**

In the event of a family status change, you and your spouse or domestic partner may enroll for coverage if you or your spouse or domestic partner enroll within 31 days of the change. Family status change include:

- Your marriage or divorce or dissolution of your domestic partner relationship
- · The birth of your child
- · The adoption of a child
- · The death of your dependent
- The commencement or termination of your spouse's employment
- A change in employment by your spouse which reduces or terminates critical illness coverage from your spouse's employer
- A loss of critical illness insurance through your spouse's employment

#### **Reoccurrence Benefit**

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

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

#### **Exclusions**

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

- · War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- · Committing or attempting to commit an assault, felony

or act of terrorism

- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state the critical illness occurred, unless used or consumed according to the directions of a physician
- Elective surgery or other procedure which:
  - Does not promote the proper function of your or your dependent's body or prevent or treat sickness or injury
  - Is directed at improving your or your dependent's appearance, unless such surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurement

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

#### When Your Insurance Ends

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

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

#### **Group Insurance Certificate**

If coverage becomes effective and you become insured, you may receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

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

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

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

Medicare generally pays for most or all of these expenses.

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

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

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

#### **Before you buy this insurance:**

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

#### **About Standard Insurance Company**

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at

www.standard.com.

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

This is a limited benefit policy.

GP0614-CI FLORIDA

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

www.standard.com

SI 17616-D-FL-762048 (9/23)

**Supplemental Insurance** 



## **Health Maintenance Screening Benefit**

## **Keep Wellness Top of Mind: Filing a Claim Online**

Regular checkups are important to maintain your health. That's why we make filing a claim online for the Health Maintenance Screening Benefit<sup>1</sup>, or the HMS Benefit, easy. You can even submit your claim while waiting in your physician's office. And you don't need additional forms to get started. The HMS Benefit is available with most of Standard Insurance Company's Supplemental insurance offerings. After submitting your claim, you can receive benefit payments once per calendar year when you or your covered loved ones complete one of the screenings listed below.

## **Available Screenings<sup>2</sup>**

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

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

## File an HMS Benefit Claim Online

- Login and start a claim.
   Access your online portal and enter screening information.
- 2. We review your claim.

  We'll make a benefit decision within 48 hours of receipt.
- Get benefits payments.For approved claims, you get benefit payments just days after submitting.

#### Start your HMS claim.



You may also submit a claim via mail or fax. Request a claim packet from your HR team.

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



# First Aid for Your Finances

**Group Accident Insurance** 



You can't predict a car crash, a fall, a bike accident or a child getting hurt playing soccer. But you can take action to help prepare your finances:

Purchase Group Accident insurance from Standard Insurance Company (The Standard<sup>±</sup>).

#### **Accident insurance**

- Helps with out-of-pocket costs from a covered accident
- Pays you or a covered family member directly, not medical providers
- Can help with whatever costs you decide like deductibles, copays or other expenses
- Covers a wide range of treatments due to an accident
- Pays an extra 25% of total benefits for injuries during youth organized sports



#### Insurance in Action

Hit By a Car\*

Dante was struck by a car while on vacation. An ambulance took him to the hospital, and multiple fractures kept him in the hospital for five days.

Benefits from his **Accident Insurance** helped cover his health plan's copays and deductible. Dante also used the money to pay for out-of-pocket costs, like his family's travel to and from the hospital.

#### Dante used his Accident Plan benefit to help cover:

- · Ground ambulance
- Emergency room
- · CAT scan
- Hospital admission
- Five-day hospital stay
- · Two physician follow-ups
- Physical therapy (two sessions)

## An accident shouldn't injure your finances.

Contact your human resources representative to learn how to apply for Accident insurance.

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

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<sup>\*</sup> Examples are for illustrative purposes. Eligibility for benefits and amounts shown in this example may vary from any policy your employer may offer and may vary based upon your individual circumstances, policy definitions, waiting periods, exclusions and limitations.

Standard Insurance Company
District School Board of Pasco County
Group Policy #762048



## **Group Accident Insurance**

Keep your finances on track when an accident happens.

## Here's How Accident Insurance Works



Your health insurance covers some costs, after you meet your deductible. But you still may have copays and a lot of out-of-pocket expenses.

2 We send you a check.

The Standard will send a check directly to you — not to your medical providers — upon approval of your claim. You decide how you spend the money.

3 You focus on getting better.

With The Standard helping you handle the unexpected expenses, you get to pay attention to what matters most — your health.

#### Here's what it does:

- Pays you directly, so you can choose how to spend the money.
- Pays you for what happens, regardless of your other coverage.
- Goes with you if you leave your employer.
- Provides coverage without answering any medical questions.
- Gives you the option to **cover your spouse and children**.
- Pays an additional 25 percent benefit if your child, 18 or under, is injured playing organized sports.
- You pay the same premium for as long as you have your coverage.
- Provides the convenience of having your premium payments deducted directly from your paycheck.

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

## Here's an example of benefits paid for a covered accident:

You're injured during your city league soccer game. An ER visit and scans reveal a concussion, broken leg, torn ACL and meniscus - requiring a 2 day hospital stay and surgery.

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

Benefits Paid to You	Benefit Amounts
Emergency Room Visit	\$600
X-ray	\$400
Concussion	\$600
Leg Fracture (Surgical)	\$3,400
Knee Cartilage Repair	\$1,000
Hospital Admission	\$2,500
2 Days Hospital Confinement	\$1,600
Medical Appliance	\$600
Physician Follow-Up Appointment	\$450
2 Physical Therapy Appointments	\$900
TOTAL	<b>\$12,050</b>

## Here's what it would cost you:

Coverage for	22 Ded Premium	24 Ded Premium
You	\$ 6.64	\$6.09
You and your spouse	\$10.40	\$9.53
You and your children	\$12.87	\$11.80
You, your spouse and your children	\$20.15	\$18.47

## Accident Insurance Includes 70+ Benefits for Covered Injuries and Treatment

This is only a partial listing of benefits offered. The specific benefit amounts you'd receive vary and are listed on page 4 and page 5.

#### **Injury**

- Burns
- Dislocations
- Eye Injuries
- Concussion
- Loss of Hearing
- Lacerations
- Fractures
- Coma
- Paralysis

## **Emergency**

- Emergency Dental
- Urgent Care
- Ambulance
- Emergency Room
- X-ray
- · Major Diagnostic Exam

## **Surgery**

- Abdominal/Thoracic Surgery
- · Outpatient Surgical Facility
- · Skin Grafts
- Knee Cartilage/ Ligament/ Tendon Repair
- Ruptured Disk
- Rotator Cuff

### **Hospitalization**

- · Hospital Admission
- · Hospital Confinement
- CCU Confinement
- CCU Admission

## Follow-Up Care

- Chiropractor
- Medical Appliance
- Hearing Device
- Physical Therapy
- Physician Care
- Prosthesis
- Rehab Facility

#### Value Added Benefits

- Transportation
- Lodging
- Youth Organized Sports Benefit

## **Additional Benefits**

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

# These are actual benefits you could receive in the event of a covered accident. Benefits are paid once per covered accident unless otherwise noted:

Emergency Care Benefits	
Ambulance — Air	\$2,400
Ambulance — Ground	\$800
Emergency Room Visit	\$600
Urgent Care Visit	\$600
Initial Care Visit (not payable if Urgent Care or Emergency Room Visit Benefit is payable)	\$600
Emergency Dental Care — Crown	\$350
Emergency Dental Care — Extraction	\$150
Outpatient X-ray	\$400
Major Diagnostic Exam (such as CT scan, MRI, EEG)	\$400
Transfusion Blood, Plasma or Platelets	\$600

Specific Injury Benefits	
Burns	\$500-\$12,500, depending on severity
Coma	\$15,000
Concussion	\$600
Eye Injury	\$300
Lacerations	\$100-\$800, depending on size
Skin Graft	50% of burn benefit
Follow-Up Care	
Medical Appliance (e.g., wheelchair, cane or brace)	\$600
Chiropractic Care (maximum 3 visits per covered accident, 1 per day)	\$125 per day
Physician Follow-up (maximum 3 visits per covered accident, 1 per day)	\$450 per day
Hearing Device	\$600
Prosthesis	One: \$1,000 Two or more: \$2,000
Therapy Services (maximum 6 visits per covered accident, 1 per day)	\$450

Dislocations	Non-surgical/Surgical
Ankle, Collarbone (sternoclavicular), Elbow, Foot, Hand, Lower Jaw, Shoulder, Wrist	\$1,000/\$2,000
Knee (not including kneecap)	\$1,000/\$2,000
Collarbone (acromioclavicular), Spine	\$500/\$1,000
Finger, Rib, Toe	\$200/\$400
Hip	\$3,500/\$7,000
Partial Dislocation	25% of the associated dislocation listed above (non-surgical)

Fractures	Non-surgical/Surgical
Ankle, Arm (shoulder to elbow), Arm (elbow to wrist), Collarbone, Elbow, Foot, Hand, Kneecap, Lower Jaw, Shoulder Blade, Sternum, Wrist	\$650/\$1,300
Bones of Face, Coccyx, Nose, Vertebrae	\$750/\$1,500
Rib	\$500/\$1000
Finger, Toe	\$200/\$400
Hip	\$3,000/\$6,000
Leg (hip to knee)	\$3,000/\$6,000
Leg (knee to ankle), Pelvis, Vertebral Column	\$1,700/\$3,400
Skull (depressed)	\$5,250/\$10,500
Skull (non-depressed)	\$2,000/\$4,000
Chip Fracture	25% of the associated fracture listed above (non-surgical)

Surgical Benefits		
Knee Cartilage (Once per covered accident, regardless of whether one or both knees require repair. If both exploratory and repair surgeries are performed, will pay repair benefit amount)		
Exploratory \$750		
Repair	\$1,000	
Tendon, Ligament, Rotator Cuff (If two or mor for the same covered accident, will pay the hi		
Exploratory	\$750	
Repair of one	\$1,000	
Repair of two or more	\$1,500	
Ruptured Disc		
Repair	\$1,000	
Abdominal/Thoracic Surgery (If more than one surgery required for the same covered accident, will pay the highest benefit amount)		
Exploratory	\$400	
Laparoscopic Repair Surgery	\$1,000	
Open Repair Surgery	\$2,000	
Surgical Facility Benefit	\$500	

Hospital Benefits	
Hospital Admission (once per covered accident)	\$2,500
Daily Hospital Confinement (maximum 365 days per covered accident) \$800 per day	
Critical Care Unit Admission* (once per covered accident)	\$2,500
Daily Critical Care Unit Confinement* (maximum of 31 days per covered accident) \$1,600 per day	
Daily Rehabilitation Facility (maximum 90 days per covered accident) \$150 per day	
* Payable in addition to any Hospital Admission and/or Daily Hospital Confinement Benefit you may be eligible to receive.	

Additional Benefits	
Lodging (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$200
Transportation (per trip) (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$1,250
Health Maintenance Screening Benefit (once per calendar year)	\$50
Youth Organized Sports Benefit	Additional 25% of total benefit payable

Accidental Death and Dismemberment (AD&D)		
Accidental Death You: Spouse: Child:	\$100,000 \$50,000 \$25,000	
In the event of a covered accidental dismember this policy would pay a percentage of the Acci		
Loss of both hands or feet	30%	
Loss of one hand and one foot	30%	
Loss of one hand or one foot	15%	
Loss of one digit (finger or toe)	2%	
Loss of two or more digits (fingers and/ or toes)	5 %	
Uniplegia	15%	
Hemiplegia, Paraplegia or Triplegia	30%	
Quadriplegia	50%	
Loss of sight (one eye); loss of hearing (one ear)	15%	
Loss of sight (both eyes); loss of hearing (both ears)	30%	
In the event of an accidental death, this policy would pay the full Accidental Death benefit. In certain scenarios, it would also pay an additional percentage of the Accidental Death benefit:		
Air Bag Benefit	10%	
Helmet Benefit	10%	
Seat Belt Benefit	10%	
Repatriation/transportation of remains	10%	
Death that occurs while aboard commercial transportation	100%	

## **Important Details**

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

#### **Portability**

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

#### **Eligibility Requirements**

To be eligible for this coverage, you must be 18 years old or older, a regular employee of District School Board of Pasco County, actively working in the United States at least 20 hours per week and a citizen or resident of the United States. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

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

A minimum number of eligible employees must apply and qualify for the proposed plan before Accident insurance coverage can become effective.

#### **Your Effective Date**

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

#### **Exclusions**

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

- · War or any act of war
- Suicide or other intentionally self-inflicted injury, while sane or insane

- Committing or attempting to commit an assault, felony or act of terrorism
- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state your accident occurred
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness
- Travel or flight in or on any aircraft, except as a farepaying passenger on a commercial aircraft
- Engaging in mountain climbing, caving, heli-skiing, boxing, full contact martial arts, bungee jumping, parachuting, base jumping, skydiving, hang gliding, sail gliding, parasailing, kitesurfing, kiteboarding or scuba diving
- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident
- Riding in or driving any automobile in a race, stunt show or speed test
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function after a covered accident
- An accident that occurs while you or your dependent is incarcerated in a jail or penal or correctional institution

#### When Your Insurance Ends

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

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

#### **Group Insurance Certificate**

If coverage becomes effective and you become insured, you may receive a group insurance certificate containing a detailed description of the insurance coverage, including

the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

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

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

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

Medicare generally pays for most or all of these expenses.

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

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

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

#### Before you buy this insurance:

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

#### **About Standard Insurance Company**

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at

www.standard.com.

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

This is a limited benefit policy.

GP0614-ACC

Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

www.standard.com

SI 17615-FL-762048 (10/23) 0-1022993

**Supplemental Insurance** 



## **Health Maintenance Screening Benefit**

## **Keep Wellness Top of Mind: Filing a Claim Online**

Regular checkups are important to maintain your health. That's why we make filing a claim online for the Health Maintenance Screening Benefit<sup>1</sup>, or the HMS Benefit, easy. You can even submit your claim while waiting in your physician's office. And you don't need additional forms to get started. The HMS Benefit is available with most of Standard Insurance Company's Supplemental insurance offerings. After submitting your claim, you can receive benefit payments once per calendar year when you or your covered loved ones complete one of the screenings listed below.

## **Available Screenings<sup>2</sup>**

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

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

## File an HMS Benefit Claim Online

- **1. Login and start a claim.**Access your online portal and enter screening information.
- 2. We review your claim.

  We'll make a benefit decision within 48 hours of receipt.
- Get benefits payments.For approved claims, you get benefit payments just days after submitting.

#### Start your HMS claim.



You may also submit a claim via mail or fax. Request a claim packet from your HR team.

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



# Keep Finances on Track

**Hospital Indemnity Insurance** 

## Medical insurance doesn't usually cover everything — which can derail your finances.

You can take action now to help prepare for the outof-pocket expenses that come with a hospital stay:

Purchase Hospital Indemnity insurance from Standard Insurance Company (The Standard<sup>‡</sup>).

#### **Hospital Indemnity insurance**

- Helps with out-of-pocket costs from a hospital stay due to childbirth, illness or injury
- Pays you or a covered family member, not medical providers
- Can help with whatever expenses you decide like deductibles, copays or other bills
- Can cover your children and spouse if you choose
- Waives your premiums if you're hospitalized more than 30 days



#### **Insurance in Action**

#### Pregnancy\*

Brooke's pregnancy took an unexpected turn when doctors had to deliver her baby by C-section. Brooke needed extra time in the hospital to recover.

Brooke's **Hospital Indemnity insurance** benefit helped meet her deductible. And that helped protect her budget for diapers, clothing and other items for her new baby.

Brooke used her Hospital Indemnity plan benefit to help cover:

- Hospital admission
- Three-day hospital stay

## A hospital stay shouldn't sidetrack your budget.

Contact your human resources representative to learn how to apply for Hospital Indemnity insurance.

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

‡ The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company. EE
SI 21180

<sup>\*</sup> Examples are for illustrative purposes. Eligibility for benefits and amounts shown in this example may vary from any policy your employer may offer and may vary based upon your individual circumstances, policy definitions, waiting periods, exclusions and limitations.

Standard Insurance Company District School Board of Pasco County Group Policy #762048



## Group Hospital Indemnity Insurance

Keep your finances on track when you're in the hospital.

## You're admitted to the hospital.

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

## We send you a check.

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

## You focus on recovering.

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

#### Here's what it does:

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

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

## Here's how it works:

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

Your Employer is giving you the following options to choose from. Here's what each plan would cover for this example:

Benefits Paid to You	Enhanced	Premier
Ambulance — Ground	\$100	\$300
Emergency room visit	\$100	\$100
Hospital admission	\$1,000	\$1,500
Hospital confinement (10 days)	\$1,500	\$2,000
Critical care unit admission	\$500	\$500
Critical care unit confinement (3 days)	\$300	\$300
Surgery	\$500	\$500
Healthcare provider follow-up	\$25	\$25
Total paid to you	\$4,025	\$5,225

Coverage for	22 Ded Premium for Enhanced	24 Ded Premium for Enhanced	22 Ded Premium for Premier	24 Ded Premium for Premier
You	\$ 8.74	\$ 8.01	\$12.67	\$11.61
You and your spouse	\$14.64	\$13.42	\$21.28	\$19.51
You and your children	\$12.49	\$11.45	\$18.02	\$16.52
You, your spouse and your children	\$21.88	\$20.06	\$31.56	\$28.93

Hospital Benefits	Enhanced	Premier
Hospital Admission <sup>1</sup> (maximum 1 per calendar year)	\$1,000	\$1,500
Hospital Confinement <sup>1</sup> (maximum 31 days per stay)	\$150 per day	\$200 per day
Critical Care Unit Admission <sup>1,2</sup> (maximum 1 per calendar year)	\$500	\$500
Daily Critical Care Unit Confinement <sup>1,2</sup> (maximum 31 days per stay)	\$100 per day	\$100 per day
Rehabilitation Facility (per year)	Not included	\$50 per day up to 15 days
Skilled Nursing Facility	\$50 per day up to 15 days per year	\$50 per day up to 30 days per year

<sup>1</sup> Defined as a stay for at least 20 consecutive hours in a hospital setting.

<sup>2</sup> Payable in addition to the Hospital Admission and/or Daily Hospital Confinement benefit you may be eligible to receive.

Patient Benefits	Enhanced	Premier
Inpatient Surgery	\$500/ 1 per calendar year	\$500/ 2 per calendar year
Inpatient Surgical Anesthesia	25% of the Inpatient Surgery Benefit	25% of the Inpatient Surgery Benefit
Healthcare Provider Follow-up	\$25/ 2 per year	\$25/ 4 per year
Major Diagnostic Exam	\$50/3 per year	\$50/4 per year
Hearing Device	\$1,000 per Lifetime	\$1,500 per Lifetime
X-ray / Lab (maximum 1 per year)	\$25	\$50

Emergency Care Benefits	Enhanced	Premier
Ambulance — Air (maximum 1 per year)	Not Included	\$500
Ambulance — Ground (maximum 1 per year)	\$100	\$300
Emergency Room Visit (maximum 1 per year)	\$100	\$100
Urgent Care Visit	\$50 (maximum 3 per calendar year)	\$50 (maximum 4 per calendar year)

Additional Benefits For Enhanced and Premier	
Waiver of Premium	Premium waived if you are confined to a hospital for more than 30 days
Health Maintenance Screening	\$50 for Enhanced and \$100 for Premier once per calendar year when visiting the doctor for a covered wellness screening

## **Important Details**

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

#### **Portability**

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

#### **Eligibility Requirements**

To be eligible for this coverage, you must be 18 years old or older, a regular employee of District School Board of Pasco County, actively working in the United States at least 20 hours per week and a citizen or resident of the United States. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

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

A minimum number of eligible employees must apply and qualify for the proposed plan before Hospital Indemnity insurance coverage can become effective.

#### **Your Effective Date**

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

#### **Annual Open Enrollment**

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

#### **Waiver of Premium**

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

#### **Exclusions**

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

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

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This is a limited benefit policy.

GP0614-HI

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SI 17618-D-FL-762048 (2/25)

0-1022994

**Supplemental Insurance** 



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Regular checkups are important to maintain your health. That's why we make filing a claim online for the Health Maintenance Screening Benefit<sup>1</sup>, or the HMS Benefit, easy. You can even submit your claim while waiting in your physician's office. And you don't need additional forms to get started. The HMS Benefit is available with most of Standard Insurance Company's Supplemental insurance offerings. After submitting your claim, you can receive benefit payments once per calendar year when you or your covered loved ones complete one of the screenings listed below.

## **Available Screenings<sup>2</sup>**

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- Carcinoembryonic antigen, or CEA, blood test for colon cancer
- Colonoscopy
- Complete Blood Count, or CBC

- Comprehensive Metabolic Panel, or CMP
- Novel infectious disease testing, such as COVID-19
- · Electrocardiogram, or EKG
- · Hemoccult stool analysis
- Hemoglobin AIC
- Human Papillomavirus, or HPV, vaccination
- Lipid panel
- Mammography
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- Stress test on a bicycle or treadmill

## File an HMS Benefit Claim Online

- Login and start a claim.
   Access your online portal and enter screening information.
- 2. We review your claim.

  We'll make a benefit decision within 48 hours of receipt.
- Get benefits payments.For approved claims, you get benefit payments just days after submitting.

#### Start your HMS claim.



You may also submit a claim via mail or fax. Request a claim packet from your HR team.

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



## **Frequently Asked Questions**

#### Filing a Hospital Indemnity Insurance Claim

#### 1 | When should I file a claim?

File a claim when you or someone listed on your policy is hospitalized due to a covered injury or sickness. Claims should be submitted within 90 days of the hospitalization if possible, but no later than one year.

Hospital Indemnity insurance from Standard Insurance Company covers hospitalization due to childbirth, injury or illness — including COVID-19 and mental health. To see the list of benefits your policy offers, ask your benefits administrator for your Group Certificate of Insurance.

#### 2 | What information will I need to provide?

Besides your name and Social Security number, you'll need to provide:

- · Employer name
- · Group policy number
- Information about your hospitalization, including the name and address of the hospital and admittance and discharge dates
- Physician's contact information (name, address, phone and fax number)

## 3 | What's in a typical claim form for Hospital Indemnity Benefits?

It usually contains the following documents to complete, sign and date:

- An Employee's Statement, which may include supporting documentation
- For an accident-related injury requiring hospitalization, documentation that provides diagnosis and treatment received
- For hospitalization due to an illness, an Attending Physician Statement
- · An Authorization to Obtain and Release Information

We may also request medical records from your physician. If you have questions, we'll review your claim and provide you with what documents are required, or request records on your behalf.

## 4 | How long does it take to make a decision about my claim?

Once we receive the required completed, signed and dated documents listed on this page, it will take approximately five business days to make a claim decision. If we haven't made a decision within five business days, we'll notify you with additional details.

#### 5 | Who should I call with questions about my claim?

If you've already filed a claim, please call The Standard's Customer Service toll-free number 800.634.1743. Our Customer Service Center representatives are here to assist you Monday through Friday at one of the time zones below:

- 6 a.m. through 5 p.m., Pacific
- 8 a.m. through 7 p.m., Central
- 7 a.m. through 6 p.m., Mountain
- 9 a.m. through 8 p.m., Eastern

#### 6 | How can I spend my money?

You can use the money for medical costs like copays and deductibles. You can also put it toward everyday living expenses such as child care, groceries and rent or mortgage payments.

#### 7 | What if I want to know more about my coverage?

If you're looking for general information about your coverage or would like a copy of your Group Certificate of Insurance, contact your benefits administrator.

The Standard is not responsible for providing proof of claim. Hospital Indemnity insurance is not available in all states.

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## **VOLUNTARY RATES**

## 24 Deductions Per Year

#### THE STANDARD ACCIDENT

Coverage Selected	
Employee Only	\$ 6.09
Employee plus Spouse	\$ 9.53
EE plus Children	\$11.80
EE plus Spouse and Children	\$18.47

## 22 Deductions Per Year

#### THE STANDARD ACCIDENT

Coverage Selected	
Employee Only	\$ 6.64
Employee plus Spouse	\$10.40
EE plus Children	\$12.87
EE plus Spouse and Children	\$20.15

## THE STANDARD HOSPITAL PLAN CORE

Coverage Selected	
Employee Only	\$8.01
Employee plus Spouse	\$13.42
EE plus Children	\$11.45
EE plus Spouse and Children	\$20.06

## THE STANDARD HOSPITAL PLAN CORE

Coverage Selected	
Employee Only	\$ 8.74
Employee plus Spouse	\$14.64
EE plus Children	\$12.49
EE plus Spouse and Children	\$21.88

#### THE STANDARD PREMIER HOSPITAL PLAN

Coverage Selected	
Employee Only	\$11.61
Employee plus Spouse	\$19.51
EE plus Children	\$16.52
EE plus Spouse and Children	\$28.93

#### THE STANDARD PREMIER HOSPITAL PLAN

<u> </u>	···=· · · · · · · · · · · · · · · · · ·
Coverage Selected	
Employee Only	\$12.67
Employee plus Spouse	\$21.28
EE plus Children	\$18.02
EE plus Spouse and Children	\$31.56

## **VOLUNTARY RATES**

## 24 Deductions Per Year

## 22 Deductions Per Year

## THE STANDARD CRITICAL ILLNESS PLAN WITH CANCER (INDIVIDUAL\*)

Co	verage Selected	
\$	10,000.00	\$4.90
\$	20,000.00	\$ 9.80
\$	30,000.00	\$14.70

## THE STANDARD CRITICAL ILLNESS PLAN WITH CANCER (INDIVIDUAL\*)

Coverage Selected	
\$ 10,000.00	\$ 5.35
\$ 20,000.00	\$10.69
\$ 30,000.00	\$16.04

## THE STANDARD CRITICAL ILLNESS PLAN WITH CANCER (FAMILY\*\*)

Со	verage Selected	
\$	10,000.00	\$ 7.35
\$	20,000.00	\$14.70
\$	30,000.00	\$22.05

## THE STANDARD CRITICAL ILLNESS PLAN WITH CANCER (FAMILY\*\*)

Coverage Selected	
\$ 10,000.00	\$ 8.02
\$ 20,000.00	\$16.04
\$ 30,000.00	\$24.05

<sup>\*</sup> Children are automatically included at 50% of the employee amount

<sup>\*\*</sup> Family coverage includes both spouse and children at 50% of the employee amount