Plan Highlights

Voluntary Group Critical Illness Insurance



Iowa State Association of Counties

COVERAGE

Voluntary critical illness insurance provides a fixed, lump- sum benefit upon diagnosis of a critical illness, which can include heart attack, stroke, paralysis and more. These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and child care.

ELIGIBILITY

Employees: All eligible employees.

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- Your legal spouse or your domestic partner. Spouse must be under age 70 at date of application. Coverage terminates at age 75.
- Your dependent children* from birth to 26 years.

*An eligible employee's child(ren) from birth to 26 years, including natural children, legally adopted children, children who are dependent on the eligible employee during the waiting period before adoption, stepchildren, and foster children. Foster children must be in the custody of the eligible employee to be considered a Dependent; and an eligible employee's child(ren) beyond the limiting age who is incapable of self-sustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the eligible employee for support and maintenance.

A person may not have coverage as both an Employee and Dependent.

BENEFIT AMOUNT

Employee: Choose from a benefit of \$10,000 to a maximum of \$30,000 in \$10,000 increments.

Spouse: Choose from a benefit of \$10,000 to a maximum of \$30,000 in \$10,000 increments, not to exceed 100% of approved employee amount.

Dependent child(ren): 25% of approved employee amount up to a maximum of \$7,500.

GUARANTEED ISSUE

Employee: \$30,000 Spouse: \$30,000 Child: all child amounts are guaranteed issue

BENEFIT REDUCTION DUE TO AGE

Age	Original Benefit Reduced to
70	50%

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

Please see the attached rate table for your age specific premium.

RELIANCE STANDARD

A MEMBER OF THE TOKIO MARINE GROUP

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

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FEATURES

DIAGNOSIS ADULT	BENEFIT				
Alzheimer's Disease	100%				
Benign Brain Tumor	100%				
Carcinoma In Situ	25%				
Coma	100%				
Coronary Disease	25%				
Heart Attack	100%				
Life Threatening Cancer	100%				
Loss of Hearing	100%				
Loss of Sight	100%				
Loss of Speech	100%				
Major Organ Failure	100%				
Occupational HIV	100%				
Paralysis	100%				
Parkinson's Disease	100%				
Skin Cancer	3%				
Stroke	100%				

- Lifetime Maximum Benefit 1000% of Insurance Amount
- Subsequent Occurrence Benefit 100% of benefit if diagnosed 3 months or later
- Recurrence Benefit (Same Illness) 100% of benefit if diagnosed 12 months or later

- FMLA / MSLA Continuation
- Portability to employee age 70

Exclusions - A benefit will not be paid if the Critical Illness is caused by or contributed to by one of the following: an act of war, declared or undeclared; intentionally self-inflicted Injury; commission or attempted commission of a felony; the use of alcohol or drugs unless taken as prescribed by a Physician; a Sickness or Injury that occurs while confined in a penal or correctional institution; cosmetic or elective surgery that is not medically necessary; committing or attempting to commit suicide while sane or insane; participation in a riot or insurrection; for a Critical Illness Diagnosed outside of the US unless confirmed within the US; for a Critical Illness that follows a different Critical Illness Diagnosis for which a benefit has been paid, within a shorter time period than reflected under Features. (Subsequent Occurrence); and for the same Critical Illness for which a benefit has been paid, if it is Diagnosed within a shorter time period than reflected under Features.

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance, which also provides all requirements necessary to be eligible for benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-9537-0118, et al.



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LRS-9521-1015 (8/18)

Reliance Standard Voluntary Plans Critical Illness Insurance Premium Table Plan Holder: Iowa State Association of Counties

Scheduled Benefit:

Each eligible employee may elect for himself and/or his eligible spouse an amount of insurance shown in the table below.

Employee/Spouse Premiums:

To find you and your spouse's premium -

- Determine your age band:
 - Your age = your age at your last birthday.
 - Spouse age = spouse age at last birthday. Your spouse must be under age 70 in order to be eligible.
 - For employees age 70 or older, benefit amounts are reduced according to the age-based reduction chart shown in the Plan Highlights. When selecting an amount of insurance, you must select at pre-age 70 benefit amount.
- Select a benefit from:
 - Select an employee and spouse benefit from the table below.
- Employee and spouse rates change as insured moves from one age bracket to the next, based on the age determination rules.

Employee Monthly Premiums

Benefit Amount	Age 0-29	Age 30-34	Age 35-39	Age 40-44	Age 45-49	Age 50-54	Age 55-59	Age 60-64	Age 65-69	Age 70-74	Age 75-79	Age 80-84	Age 85+
\$10,000	\$2.80	\$5.20	\$7.80	\$10.80	\$15.60	\$22.00	\$31.00	\$41.00	\$55.00	\$85.00	\$85.00	\$85.00	\$85.00
\$20,000	\$5.60	\$10.40	\$15.60	\$21.60	\$31.20	\$44.00	\$62.00	\$82.00	\$110.00	\$170.00	\$170.00	\$170.00	\$170.00
\$30,000	\$8.40	\$15.60	\$23.40	\$32.40	\$46.80	\$66.00	\$93.00	\$123.00	\$165.00	\$255.00	\$255.00	\$255.00	\$255.00

Dependent Child(ren):

Your dependent child(ren) is eligible for a benefit amount of 25% of your Critical Illness benefit election, limited to a maximum of \$7,500.

To calculate Dependent Child(ren) Benefit:

Employee Benefit Amount x 25% = Dependent Child(ren) Benefit. No rounding needed.

To calculate Dependent Child(ren) Premium:

Dependent Child(ren) Benefit/1000 \times 0.740. Please Note: One rate and benefit amount for all eligible children in family, regardless of number.

Please read this important information

- You may not have coverage as both an employee and as a dependent.

- Employee must have coverage in order for spouse and dependent children to be covered.

Please note, these rates are approximate and subject to change.