



## GROUP HOSPITAL INSURANCE

Coverage Effective Date: January 1, 2023 Rate Guarantee: 3 Years

Full-time Employees - Monthly Premiums			
Employee	Employee & Spouse	Employee & Child(ren)	Employee & Family
\$24.23	\$41.68	\$33.97	\$51.42

*Be Well is included in the premiums above. Actual billed amounts may vary due to rounding.*

Employees Eligible for Coverage	Minimum Participation	Minimum Hours for Eligibility
7933	Waived	20 hours per week

**FULL-TIME EMPLOYEES**  
**Hospital Insurance**

Contributions .....	
Year Basis .....	
Domestic Steerage .....	
Be Well Benefit (once per covered person per calendar year) .....	
Enrollment Frequency .....	
Continuity of Coverage .....	
New Employee Waiting Period .....	
Present Employee Waiting Period .....	
Pre-existing Conditions .....	
Childbirth Benefits .....	
Childbirth Limitation .....	
Portability .....	
Evidence of Insurability .....	
HSA-Compatible .....	

**PROVISIONS QUOTED**

Employee Coverage: Employee pays 100% .....	
Spouse Coverage: Employee pays 100% .....	
Child Coverage: Employee pays 100% .....	
Calendar Year .....	
Not included .....	
\$50 .....	
Perpetual/scheduled .....	
Not included .....	
30 Days .....	
0 Days .....	
Not applicable .....	
Included .....	
50% payable for childbirth within the first 9 months after the insured's coverage effective date. ....	
Included .....	
Health questions are not required. ....	
Yes .....	



**THE UNUM DIFFERENCE**

**UNUM HOSPITAL OFFERING:** Hospital insurance is designed to help provide financial protection for covered individuals by paying a benefit due to a hospitalization and in some cases, for treatment received for an accident or sickness, even if that treatment occurs outside the hospital. Employees can use the benefit to meet the out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to the employee based on the amount of coverage listed in the schedule of benefits.

**BE WELL BENEFIT:** To help encourage employees to stay informed about their health and to encourage preventive care, we'll provide a payment for various health screening tests. It serves as a great reminder and financial incentive.

**SCHEDULE OF BENEFITS**

Full-Time Employees - Hospital	
Admission (2 days per year)	\$1,500
Admission - Hospital ICU (2 days per year) (additive to Admission)	\$1,000
Daily Stay (per day up to 365 days)	\$100
Daily Stay - Hospital ICU (per day up to 30 days) (additive to Daily Stay)	\$100
Short Stay (2 days per year)	\$500
Full-Time Employees - Additional Inpatient Care	
Mental and Nervous or Substance Abuse Treatment	\$250

**PLAN INFORMATION**

**Family Coverage Options:**

Employee and Family

Note: The employee must be covered in order to insure any of their dependents for Hospital.

**Enrollment Frequency:**

Perpetual/Scheduled - After the initial scheduled enrollment, new hires and newly eligible employees may enroll for coverage when they are first eligible. Late entrants may enroll, and existing insureds may increase coverage at a scheduled enrollment event.

**Be Well Benefit:**

Be Well Screenings include but are not limited to:

- Cholesterol and Diabetes screenings
- Cancer screenings
- Cardiovascular Function screenings
- Imaging Studies
- Annual Examinations by a Physician
- Immunizations

For a full list of covered tests, see your Unum representative.

**General Information Regarding Benefit Taxability:**

Employees pay premiums with **post-tax** dollars. In general, the benefit payment will not be taxable.

Note: Unum does not give tax advice and the potential insured should seek the advice of a tax attorney or advisor.



## PLAN INFORMATION

### Coverage Exclusions & Limitations:

We will not pay benefits for a claim that is caused by, contributed to by, or occurs as a result of any of the following:

- committing or attempting to commit a felony;
- being engaged in an illegal occupation or activity;
- injuring oneself intentionally or attempting or committing suicide, while sane;
- active participation in a riot, insurrection, or terrorist activity. This does not include civil commotion or disorder, injury as an innocent bystander, or Injury for self-defense;
- participating in war or any act of war, whether declared or undeclared;
- combat or training for combat while serving in the armed forces of any nation or authority, including the National Guard, or similar government organizations;
- being intoxicated;
- a Covered Loss that occurs while an Insured is legally incarcerated in a penal or correctional institution;
- elective procedures, cosmetic surgery, or reconstructive surgery unless it is a result of organ donation, trauma, infection, or other diseases;
- treatment for dental care or dental procedures, unless treatment is the result of a Covered Accident;
- any Admission or Daily Stay of a newborn Child immediately following Childbirth unless the newborn is Injured or Sick;

### Broker Commissions:

**Base Commissions:** Rates paid as follows for the appropriate period: First Year, 20%; Years 2+, 2.5%.

**Additional Commissions:** 5% commissions paid for 1 year.

## PREMIUM COST CALCULATIONS - *For Unum internal use only*

Full-time Employees - Monthly Premiums				
	Employee Only Cost	Employee & Spouse Cost	Employee & Child(ren) Cost	Employee & Family Cost
Employee	\$24.23	\$24.23	\$24.23	\$24.23
Spouse	-	\$17.45	-	\$17.45
Child(ren)	-	-	\$9.74	\$9.74
<b>Total</b>	\$24.23	\$41.68	\$33.97	\$51.42

*Be Well is included in the costs above. Actual billed amounts may vary due to rounding.*



### Final Monthly Portability Manual Rates (Issue Age):

Full-time Employees - Monthly Portability Rates			
	Employee	Spouse	Child(ren)
17-49	\$29.86	\$29.85	\$13.46
50-59	\$32.88	\$32.84	
60-64	\$42.19	\$42.58	
65+	\$71.46	\$71.73	

*Be Well is included in the costs above. Actual billed amounts may vary due to rounding.*

## PROPOSAL CONDITIONS AND DISCLOSURES

### Termination Provision for Hospital:

The Policyholder may cancel this Policy by providing us Written notice at least 31 days prior to the cancellation date.

A cancellation will take effect on the later of:

- the date requested by the Policyholder; or
- the date we received the Written notice of cancellation.

This Policy will automatically be cancelled on the last day of the Grace Period if premium has not been paid. The Policyholder is liable for all premium due while this Policy remains in force, including premium that becomes due during the Grace Period.

We may cancel or modify this Policy if:

- our participation requirements are not met, as applicable;
- the Policyholder does not promptly provide us with information that is reasonably required;
- the Policyholder fails to perform any of its obligations that relate to this Policy;
- the premium is not paid in accordance with the provisions of this Policy that specify whether the Policyholder, the Insured, or both, pay(s) the premiums;
- the Policyholder does not promptly report to us the required information about any Employees who are added or removed from an Eligible Group;
- we determine that there is a significant change in the Policyholder or its Employees as a result of a corporate transaction such as a merger, divestiture, acquisition, sale, or reorganization that impacts the size, occupation, or age of any Eligible Groups;
- we provide the Policyholder with 45 days Written notice at any time after any rate guarantee period for any reason; or
- any change occurs in federal or state law, regulation, or regulatory process that substantially impacts this Policy, the benefits payable, or the risk insured.

In any event, we will provide Written notice to the Policyholder at least 45 days prior to any cancellation or modification date. The Policyholder may cancel this Policy if they choose not to accept the Policy modifications made by us.

Any premium accepted in connection with a Reinstatement will be applied first to a period for which premium was not previously paid, but not to any period more than 60 days prior to the date of Reinstatement. Any request to reinstate will be subject to this Policy's Premiums provisions, Cancellation or Modification of Policy provisions, and the Certificate of Coverage's End of Coverage provisions.

The reinstated Policy will provide benefits for Covered Losses that occur on or after the reinstatement date.

The Policyholder is responsible for giving Insured Employees Written notice of the cancellation of this Policy as soon as reasonably possible.

Cancellation of this Policy will not affect a Payable Claim for an Insured.

Premium accepted after the date this Policy is cancelled will not act to reinstate this Policy. We will refund any premium paid that was in excess of what was owed.

## PROPOSAL CONDITIONS AND DISCLOSURES

### Broker Compensation Disclosure Notice for Group Products:

- Your insurance or benefits advisor can offer you advice and guidance as you select the policy and provider most appropriate for your needs. At Unum we recognize the important role these professionals play in the sale of our products and services and offer them a variety of compensation programs. Your advisor can provide you with information about these programs as well as those available from other providers. We support disclosure of broker compensation so that customers can make an informed buying decision.
- Brokers may be eligible to receive Base Commissions as well as Supplemental Commissions from Unum.
- Unless you have agreed in writing to compensate the broker differently, Unum provides Base Commissions to all brokers in connection with the sale of an insurance policy. Base Commissions are a fixed percentage of the policy premium, and may include a one time, first year flat amount for each policy sold. Base Commissions are paid by Unum to the broker(s) on your policy. In some circumstances, broker(s) may be eligible to receive commissions on your policy even after a broker of record change has occurred.
- A broker may also qualify for Supplemental Commissions paid by Unum. For group insurance products, Supplemental Commissions may be paid as a fixed percentage of total eligible group insurance premiums. The Supplemental Commission rate depends on the total dollar amount of all eligible premiums or number of group policies that the broker had in force with Unum in the prior calendar year. The Supplemental Commission rate may range from 0% to 13.80% of total premium paid.
- Your broker may also be eligible to receive Supplemental Commissions on other insurance products, which may be calculated differently. The premium you pay is not impacted whether or not your broker receives Supplemental Commissions.
- If you would like additional information about the range of compensation programs our company offers for your group insurance policy or any other Unum insurance product, or if you want to speak to us directly about broker compensation, please call 1-800-ASK-UNUM (1-800-275-8686).

### Proposal Conditions:

This proposal is under no circumstances a contract for the insurance coverage described within. If this proposal is accepted, a contract outlining the coverage will be issued. This proposal is based on census data received by Unum. Actual costs will be based on the final enrollment data of employees insured under the plan on its effective date. Quote assumes coverage of employees who are in active employment in the United States with the employer working the minimum hours for eligibility. Please contact your Unum representative to request a quote for coverage of any employees who do not fit this category. This quote will expire on the date listed on the first page and includes standard services only, unless otherwise expressly described herein. **Important Information Concerning the Sale of these Benefits:** State laws require that insurance brokers be licensed and appointed with the applicable Unum insurance subsidiary before engaging in the solicitation or sale of these benefits. Note that Unum cannot accept this business if the broker is not properly licensed and appointed before soliciting this proposal. Unum is prepared to help ensure compliance with these state regulations. Brokers who need to check their Unum appointment status should call 1-800-ASK-UNUM (1-800-275-8686). **Critical Illness Policy Form Number: GCIP16-1 Accident Plan Form Number: GAP16-1 Hospital Plan Form Number: GHIP16-1**

Recently, there has been heightened attention on companies that promote “tax advantaged” wellness programs to help sell voluntary benefits. These offerings promise employers that they can use their payroll tax savings to pay for the wellness program, and that employees can use income and payroll tax savings to purchase voluntary benefits.

Unum’s position is that this practice is not in compliance with applicable laws and regulations. This means Unum will not offer any products in conjunction with such a wellness plan offering.

For additional guidance please consult your tax attorney and see the IRS Chief Counsel Memorandum 201703013, addressing the taxability of fixed indemnity payments from wellness programs at <https://www.irs.gov/pub/irs-wd/201703013.pdf>

1. Employee Benefit Plan Review, “Group Accident & Health Surveys 1976-1990” (1977-1991); Gen Re, “U.S. Group Disability Market Surveys 1991-2013” (1992-2014); LIMRA, “U.S. Group Disability Insurance 2014-2018 Annual Sales and In Force” (2015-2018); LIMRA, 4Q 2017 U.S. Workplace Disability Insurance Inforce (2019).
2. Fortune, “Fortune 500 2019,” (2019); Unum customer database, 2020.
3. Unum internal data, 2020.
4. Versta Research, 2019 Unum Benefits Broker Study (2019). Results represent % 6-9 on 9-point scale where 1=Poor and 9-Excellent.

The Critical Illness product is underwritten by:  
Unum Insurance Company, Portland, ME.

The Accident product is underwritten by:  
Unum Insurance Company, Portland, ME.

## PROPOSAL CONDITIONS AND DISCLOSURES

The Hospital product is underwritten by:  
Unum Insurance Company, Portland, ME.

© 2022 Unum Group. All rights reserved. Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.

SD-1143