Plan Highlights

Voluntary Hospital Indemnity Insurance



Standard Motor Products, Inc.

COVERAGE

Voluntary hospital indemnity insurance provides a range of fixed, lump-sum daily benefits to help cover costs associated with a hospital admission, including room and board costs. These benefits are paid directly to the insured following a hospitalization that meets the criteria for benefit payment.

ELIGIBILITY

Employees: All eligible employees

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

covered.

Dependents are:

- the Insured's lawful spouse; and
- the Insured's children 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.

FEATURES

- Guaranteed issue; no medical questions
- No pre-existing conditions exclusions
- Mental & Nervous and Substance Abuse treated same as any other hospital admission
- No deductibles
- Eligible for continuation of coverage
- HIPAA privacy compliant
- Overlying Major Medical Plan NOT Required*
- Coverage Offered on a Voluntary Basis

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

BENEFITS

Hospital Room & Board Benefits	
Room & Board Benefit per Day (180 Daily Benefits per Coverage Year)*	\$150
Hospital Admission Benefit	
One Daily Benefit per Coverage Year	\$1,500
Non-Insurance Services	
On-Call Travel Assistance	Included

^{*}In no event will the Daily Benefits exceed 180 daily benefits per Coverage Year.

Call Reliance Standard Voluntary Benefits at USI 1-800-351-7500 or go to www.rsli.com.

EXCLUSIONS

Benefits will not be paid for any loss caused by: suicide; war; assault/felony; dental care except hospitalizations for the care of sound, natural teeth and gums required on account of accidental injury that happens while covered, and that occur within 6 months of the accident; hospitalizations that occur while outside the United States of America; or care or treatment rendered in connection with cosmetic surgery, except hospitalizations for cosmetic surgery needed for breast reconstruction following a mastectomy or for an accident that happens while covered. The cosmetic surgery needed for an accidental injury must be performed within 90 days of the accident. For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate 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.

^{*}Overlying major medical plan is required for all California residents.

Plan Highlights

Voluntary Group Accident Insurance



Standard Motor Products, Inc.

COVERAGE

Voluntary accident insurance provides a range of fixed, lump-sum benefits for injuries resulting from a covered accident, or for accidental death and dismemberment (if included). These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and childcare.

ELIGIBILITY

Employees: All eligible employees.

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

Dependents are:

- Your legal spouse. Spouse must be under age 70 at date of application.
- ➤ 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

See Full Schedule of Benefits on next page

BENEFIT REDUCTION DUE TO AGE

(Applicable to AD&D coverage only)

Original Benefit Reduced to	
50%	
25%	

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

Call Reliance Standard Voluntary Benefits at USI 1-800-351-7500 or go to www.rsli.com.

FEATURES

- Portability to employee age 70
- ► FMLA/MSLA Continuation
- Newlywed and Newborn Provision
- 24-hour Travel Assistance Services

EXCLUSIONS

Benefits will not be paid for any loss caused by: suicide; war; air travel (except as a passenger on commercial flights); assault/felony; acute or chronic intoxication; voluntary consumption of illegal or controlled substance or prescribed narcotic or drug.

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate 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-9547-0318, et al.

Benefits	Amount
Ambulance	\$150 Ground, \$750 Air
Blood, Plasma and Platelets	\$200
Burns	To \$2,600 for 2nd degree burns; To \$20,800 for 3rd degree burns; Skin Graft - 25% of benefit payable for Burns
Chiropractic Services (per Visit)	\$25 per session, 6 sessions maximum
Coma	\$10,000
Concussion	\$200
Dental Injury	\$150 for Crown; \$50 for Extraction
Diagnostic Exams	\$150 per CT/MRI scan
Dislocation	To \$3,600 for Non-surgical; To \$7,200 for Surgical; Partial - 25% of full dislocation;
	Multiple - 100% of highest dislocation benefit
Emergency Treatment	\$225
Eye Injury	\$125 for removal of foreign object, \$250 for surgical repair
Fractures	To \$10,000 for Non-surgical; To \$20,000 for Surgical repair; Chip fracture: 25% of non- surgical benefit; Multiple fractures: 100% of highest sustained fracture
Initial Hospital Admission	\$1,000
Initial Intensive Care Unit (ICU) Hospital Admission	\$1,500
Hospital Confinement (per Day)	\$200, 365 days maximum
Intensive Care Unit (ICU) Confinement (per Day)	\$400, 30 days maximum
Lacerations	To \$400
Lodging (per Day)	\$100 per day up to 30 days if more than 100 miles from residence
Medical Appliances	\$100
Organized Youth Sports Benefit	5% of the benefit amount
Paralysis	\$10,000 quadriplegia; \$5,000 paraplegia/hemiplegia
Physical Therapy (per Session)	\$50, 6 sessions maximum
Physician Visit	\$125 Initial, \$125 Follow-up
Prosthesis	\$500 for one, \$1,000 for two or more
Rehabilitation Facility Confinement (per Day)	\$75, 30 days maximum
Surgery	\$200 for Exploratory; \$600 for Knee Cartilage; \$2,000 for Abdominal or Thoracic; \$1,000 for Ruptured Disc; to \$1,200 Tendon, Ligament, or Rotator cuff
Transportation	\$300, if more than 100 miles from residence
X-Rays	\$50
Accidental Death Benefits	Amount
Employee AD&D	\$50,000
Spouse AD&D	\$25,000
Child AD&D	\$10,000
Common Carrier	100%
Accidental Dismemberment Benefits	% of AD Benefit Amount
Single Loss	50%
Multiple Loss (Catastrophic)	100%
Thumb / Finger / Toe	1%
2+ Thumb / Finger / Toe	3%
Speech	100%

Call Reliance Standard Voluntary Benefits at USI 1-800-351-7500 or go to www.rsli.com.



Plan Highlights

Voluntary Group Critical Illness Insurance



Standard Motor Products, Inc.

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. 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.

Call Reliance Standard Voluntary Benefits at USI 1-800-351-7500 or go to www.rsli.com.

BENEFIT AMOUNT

Employee: Choose from a benefit of \$5,000 to a maximum of \$30,000 in \$1.000 increments.

Spouse: Choose from a benefit of \$5,000 to a maximum of \$30,000 in \$1,000 increments, not to exceed 100% of approved employee amount.

Dependent child(ren): 50% of approved employee amount up to a maximum of \$15,000.

GUARANTEED ISSUE

Employee: \$30,000 **Spouse:** \$30,000

Child: all child amounts are guaranteed issue

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

RELIANCE STANDARD

A MEMBER OF THE TOKIO MARINE GROUP

www.reliancestandard.com

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.

FEATURES

DIAGNOSIS ADULT	BENEFIT
Alzheimer's Disease	25%
Benign Brain Tumor	100%
Carcinoma In Situ	25%
Coma	100%
Coronary Disease	25%
Heart Attack	100%
Life Threatening Cancer	100%
Loss of Sight	100%
Major Organ Failure	100%
Motor Neuron Disease (ALS)	100%
Paralysis	100%
Parkinson's Disease	25%
Ruptured Cerebral, Carotid or Aortic Aneurysm	100%
Severe Brain Damage	100%
Skin Cancer	5%
Stroke	100%
DIAGNOSIS CHILD	BENEFIT
Cerebral Palsy	100%
Cleft Lip or Palate	100%
Cystic Fibrosis	100%
Downs' Syndrome	100%
Muscular Dystrophy	100%
Spina Bifida	100%
Type 1 Diabetes	100%

► Lifetime Maximum Benefit – 1000% of Insurance Amount

- Subsequent Occurrence Benefit 100% of benefit if diagnosed 1 months or later
- Recurrence Benefit (Same Illness) 100% of benefit if diagnosed 6 months or later
- FMLA / MSLA Continuation
- ▶ Transfer of Coverage
- Portability to employee age 70
- Wellness (Health Screening) Benefit \$50

Benefit Waiting Period = 0 days

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 which is Diagnosed during the Benefit Waiting Period; 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. (Recurrence).

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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