

RSL BasicCare™ Program

BasicAdvantage Plan Employee Brochure



Important Protection made available by your employer for **You** and **Your dependents** through easy payroll deduction.

Your acceptance is **Guaranteed**...you cannot be turned down, as long as you sign-up during your open enrollment period.

The BasicAdvantage Plan described in this brochure is not a substitute for comprehensive health insurance and does not qualify as minimum essential health coverage under the Affordable Care Act. It is intended to provide you, and your covered dependents, with basic insurance coverage.

RELIANCE STANDARD
LIFE INSURANCE COMPANY

www.reliancestandard.com

BasicAdvantage Plan

- Visit any doctor or hospital.
- Enrolled dependents receive the same coverage as you.
- No pre-existing conditions exclusions or limitations.
- BasicAdvantage Plan enrollees also receive these added non-insurance benefits:
 - Prescription Drug Card offering discounts at participating pharmacies.
 - VSP Access Plan membership offering discounts on eye exams and prescription glasses at network doctors.
 - 24-Hour Nurse Helpline.
 - On-line Wellness Assistance.
 - Vitamins & Nutritional Supplements Plan.
 - On Call Travel Assistance.

INPATIENT HOSPITAL BENEFITS

Hospital Room & Board Benefits:

Daily Benefit for the Treatment of Mental & Nervous Conditions Number of Daily Benefits Per Coverage Year	\$100 per day 25
Daily Benefit for the Treatment of Alcohol & Substance Abuse Number of Daily Benefits Per Coverage Year	\$100 per day 25
Daily Benefit for the Treatment of All Other Covered Conditions Number of Daily Benefits Per Coverage Year	\$100 per day 90

Hospital Admission Benefit For Specified Conditions:

Daily Benefit for Cancer (Malignant Neoplasm) Number of Daily Benefits Per Coverage Year	\$2,000 per day 1
Daily Benefit for Heart Attack (Myocardial Infarction) or Daily Benefit for Heart Disease ¹ Number of Daily Benefits Per Coverage Year	\$1,500 per day \$1,000 per day 1
Daily Benefit for Accidental Injury Number of Daily Benefits Per Coverage Year	\$1,000 per day 1
Daily Benefit for Stroke (Cerebrovascular Accident - CVA) Number of Daily Benefits Per Coverage Year	\$1,000 per day 1
Daily Benefit for Childbirth Number of Daily Benefits Per Coverage Year	\$1,000 per day 1

Maximum Surgery Benefit Per Procedure² \$500 per day

Maximum Anesthesia Benefit³ \$100 per day

¹ The Hospital Admission Benefit is payable for either Heart Attack or Heart Disease during a coverage year, but not both.

² Benefits for covered inpatient surgery are scheduled and range from \$9 to \$500 based on the specific surgical procedure performed.

³ Benefits for covered inpatient anesthesia vary and are equal to 20% of the applicable inpatient surgery benefit.

OUTPATIENT BENEFITS

Doctor Visit Benefits:

Daily Benefit for a New Patient Office Visit Number of Daily Benefits Per Coverage Year	\$75 per day 1
Daily Benefit for an Established Patient Office Visit Number of Daily Benefits Per Coverage Year	\$60 per day 3
Daily Benefit for a Consultation Office Visit Number of Daily Benefits Per Coverage Year	\$75 per day 1
Daily Benefit for an Emergency Room Doctor Visit Number of Daily Benefits Per Coverage Year	\$50 per day 1

Radiology Benefits:

Daily Benefit for a Magnetic Resonance Imaging (MRI) Number of Daily Benefits Per Coverage Year	\$100 per day 1
Daily Benefit for a Computerized Tomography (CT) Scan Number of Daily Benefits Per Coverage Year	\$50 per day 1
Daily Benefit for all other Radiology Services Number of Daily Benefits Per Coverage Year	\$40 per day 2

Pathology Benefits:

Daily Benefit for all Pathology Services Number of Daily Benefits Per Coverage Year	\$40 per day 2
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Wellness Care Visit Benefits:

Daily Benefit for an Annual Physical Number of Daily Benefits Per Coverage Year	\$75 per day 1
Daily Benefit for a Mammogram Screening Number of Daily Benefits Per Coverage Year	\$50 per day 1
Daily Benefit for a Prostate or Cervical Cancer Screening Number of Daily Benefits Per Coverage Year	\$35 per day 1

Emergency Room Visit Benefits:

Daily Benefit for the treatment of an Accidental Injury Number of Daily Benefits Per Coverage Year	\$500 per day 2
Daily Benefit for the treatment of a Sickness Number of Daily Benefits Per Coverage Year	\$50 per day 3

Maximum Surgery Benefit Per Procedure⁴ \$500 per day

Maximum Anesthesia Benefit⁵ \$100 per day

Prescription Drug Benefits:

Daily Benefit per Generic Drug Prescription (filled or refilled) Number of Daily Benefits Per Coverage Year	\$25 per day 7
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⁴ Benefits for covered outpatient surgery are scheduled and range from \$14 to \$500 based on the specific surgical procedure performed.

⁵ Benefits for covered outpatient anesthesia vary and are equal to 20% of the applicable outpatient surgery benefit.

Questions & Answers

Who can be covered? In addition to covering yourself, dependent coverage is offered in the BasicAdvantage Plan. Your eligible dependents are your lawful spouse and your children through age 25, or through any age if disabled and unable to earn a living.

When does my coverage begin and end? Your coverage begins on the first day of the month after you enroll, provided you are eligible and the required premium has been paid. Coverage for all of your benefits under the program will end if (1) the required premiums are not paid; (2) you are no longer an eligible employee; (3) the insurance policy terminates; or (4) you enter an Armed Service on full-time active duty.

When does dependent coverage begin and end? Your dependents' coverage begins when yours does, unless you enroll them later. If you do, their coverage will become effective after the enrollment is approved and the premiums have been paid. Their coverage ends when yours does or when the dependent is no longer eligible.

Do I have to use certain doctors or hospitals? No. You are free to use any licensed doctor or any certified hospital. However, you can save money by using a network provider. Rest, nursing or old age homes, or facilities for the treatment of alcoholism, drug addiction or mental disorders are not hospitals.

How does the Hospital Admission Benefit work? It pays a single daily benefit when you are admitted as an inpatient to the hospital for treatment of any of the conditions shown. The daily benefit amount varies by condition and is payable based on the first diagnosis code listed on the claim form for the hospital admission.

When will I receive ID cards and full coverage information? You will receive a Summary Plan Description after you enroll. ID cards will be included.

Does the BasicAdvantage Plan cover maternity? Yes. Maternity care is covered.

Are visits to a chiropractor covered under the BasicAdvantage Plan? Yes, chiropractic office visits are covered; however, spinal adjustments and manipulations, or modalities are not covered.

Exclusions & Limitations

The following is just a summary. Please see your Summary Plan Description (SPD) for a more complete description of these items.

What is not covered under the BasicAdvantage Plan...

- outpatient treatment of mental or nervous conditions;
- outpatient treatment of alcoholism, or substance abuse;
- intentionally self-inflicted injuries, suicide or attempted suicide while sane or insane;
- acts of declared or undeclared war;
- the covered person's commission of a felony;
- work-related injury or sickness;
- eye examinations for glasses, any kind of eye glasses, or prescriptions therefore;
- hearing examinations or hearing aids;
- brand name drugs and drugs not requiring a prescription;
- dental care or treatment except covered events rendered in connection with the care of sound, natural teeth and gums required on account of an accidental injury that happens while covered, and rendered within 6 months of the accident;
- reading or interpreting the results of any diagnostic pathology or radiology tests;
- cosmetic surgery, except covered events rendered in connection with cosmetic surgery needed for breast reconstruction following a mastectomy or an accident that happens while covered. The surgery needed for an accident must be performed within 90 days of the accident;
- treatment rendered while outside the United States of America; and
- services rendered by an immediate family member or provided by your employer.

The BasicAdvantage Plan is underwritten by Reliance Standard Life Insurance Company, Philadelphia, Pennsylvania under group policy form series LRS-9497-0613, et al.

Refer to the accompanying materials for information on premiums.

Every effort has been made to ensure the accuracy of this enrollment brochure. The information described applies to the residents of most states, however state laws do vary. The laws of your state may affect this benefit program, but these differences generally do not reduce your benefits. This brochure is not a legal document. The contractual terms and conditions of coverage are set forth in the group policy. In the event of a discrepancy, the policy would be the determining factor. Insurance products are provided through Reliance Standard Life Insurance Company, which is licensed in all states (except New York), the District of Columbia, Puerto Rico, & the U.S. Virgin Islands. Reliance Standard Life Insurance Company reserves the right to change the premiums it charges for its plans.

VSP Access Plan discounts from Vision Service Plan. 24-hour Nurse Helpline, Online Wellness Services and Nutritional Supplements Plan from Coverdell and Company, Inc. On Call Travel Assistance from On Call International. The suppliers of these services are not affiliated with Reliance Standard Life Insurance Company, which is not responsible for the content of the services and cannot be held liable for any services provided or not provided by these suppliers.

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