

## Plan Highlights

# Group Critical Illness

## AutoNation Benefits Company, Inc.

### COVERAGE

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

### ELIGIBILITY

All eligible Employees and their dependents as defined by *AutoNation Benefits Company, Inc.* and reflected in your Certificate of Insurance. *A person may not have coverage as both an Employee and Dependent.*

**Employee:** Each Active Full-Time Employee working 30 hours or more per week, except temporary and seasonal employees.

**Spouse:** Your legal spouse or domestic partner subject to state laws.

**Dependent Children:** From Birth to 26 years.

### BENEFITS AMOUNTS

**Employee** Choose from a minimum of \$10,000 to a maximum of \$40,000 in \$10,000 increments.

**Spouse** Choose from a minimum of \$5,000 to a maximum of \$20,000 in \$5,000 increments, not to exceed 50% of approved employee amount.

**Child** 50% of employee coverage

### BENEFIT FEATURES

- Unlimited Lifetime Maximum Benefit
- Portability – you can take your coverage with you at the same rates
- Recurrence/Subsequent Occurrence Benefit
- Wellness Benefits – Any preventative health screening or test including but not limited to, annual physicals, immunizations, dental exams and mental health screenings.

### GUARANTEED ISSUE

The maximum amount of coverage you and your spouse, if applicable, can elect without providing evidence of insurability.

**Employee** \$40,000

**Spouse** \$20,000

**Child** All Child amounts are guaranteed issue

### CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

<b>Included Benefits: Cancer Conditions</b>	<b>Percentage of Coverage Amount</b>
Breast Cancer in Situ	100%
Carcinoma in Situ	25%
Invasive Cancer	100%
Skin Cancer	5%
<b>Included Benefits: Neurological Conditions</b>	<b>Percentage of Coverage Amount</b>
Alzheimer's	100%
Benign Brain Tumor	100%
Coma	100%
Motor Neuron Disease (ALS, Lou Gehrig's)	100%
Multiple Sclerosis	100%
Parkinson's	100%
Severe Brain Damage	100%
Stroke	100%
Transient Ischemic Attack (TIA)	25%
<b>Included Benefits: Heart Conditions</b>	<b>Percentage of Coverage Amount</b>
Coronary Disease	100%
Heart Attack	100%
Ruptured Cerebral, Carotid or Aortic Aneurysm	100%
Sudden Cardiac Arrest	100%
<b>Included Benefits: Infectious Conditions</b>	<b>Percentage of Coverage Amount</b>
COVID Infection ( <i>hospitalized 5 days</i> )	20%
Infectious Disease ( <i>hospitalized 5 days</i> )	25%
Sepsis Infection ( <i>hospitalized 5 days</i> )	25%
<b>Included Benefits: Other Conditions</b>	<b>Percentage of Coverage Amount</b>
Loss of Hearing	100%
Loss of Sight	100%
Loss of Speech	100%
Kidney Failure	100%
Major Organ Failure ( <i>includes bone marrow</i> )	100%
Occupational Hepatitis	100%
Occupational HIV	100%
Paralysis	100%
Severe Burns ( <i>covering 30% of body</i> )	100%
<b>Included Benefits: Childhood Conditions</b>	<b>Percentage of Coverage Amount</b>
Autism Spectrum Disorder	
DSM-V Severity Level 1	25%
DSM-V Severity Level 2	50%
DSM-V Severity Level 3	100%
Chronic Medical Condition Commonly Diagnosed in Childhood <i>Asthma, cerebral palsy, epilepsy, type I diabetes etc.</i>	100%
Congenital Chromosomal Abnormality <i>Down syndrome, muscular dystrophy, sickle cell disease, etc.</i>	100%
Congenital Metabolic Disorder <i>Cystic fibrosis, Gaucher's Disease, Tay Sachs, etc.</i>	100%
Major Congenital Structural Anomaly <i>Cleft lip/palate, complex congenital heart disease, spina bifida, etc.</i>	100%

Additional Features	Percentage of Coverage Amount
Wellness (Health Screening) Benefit	\$50.00
Lifetime Maximum Benefit	Unlimited
Recurrence Benefit	100% of Benefit / 0 months
Subsequent Occurrence	100% of Benefit / 0 months
Benefit Waiting Period	None
FMLA/MSLA Continuation	Included
Pre-Existing Limitation	None
Transfer of Coverage	Yes
Portability	Included

## EXCLUSIONS AND LIMITATIONS

Exclusions and limitations apply and can vary by state. For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance.

## NON-INSURANCE SERVICES

- Travel Assistance Services

## ADDITIONAL INFORMATION

This Plan Highlights document provides a brief description of the key features of the Reliance Standard Life Insurance Company 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.



A MEMBER OF THE TOKIO MARINE GROUP

[www.reliancematrix.com](http://www.reliancematrix.com)

Reliance Matrix is branding name. Reliance Standard Life Insurance Company (Home Office Schaumburg, IL) is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. First Reliance Standard Life Insurance Company (Home Office New York, NY) is licensed in New York and Delaware. Standard Security Life Insurance Company of New York (Home Office New York, NY) is licensed in all states. Absence services are provided by Matrix Absence Management, Inc. Product features and availability may vary by state.