

RELIANCE STANDARD LIFE INSURANCE COMPANY
Home Office: 1900 East Golf Rd, Suite 500
Schaumburg IL, 60173

**IMPORTANT: This is a fixed indemnity policy,
NOT health insurance**

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- **Visit HealthCare.gov online** or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Plan Highlights

Hospital Indemnity

AutoNation Benefits Company, Inc.

COVERAGE

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

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

See Full Schedule of Benefits on the following pages.

BENEFIT FEATURES

- Guaranteed issue; no medical questions
- No lifetime maximum
- Hospitalizations due to Mental & Nervous or Substance Abuse not excluded
- No maternity waiting period
- Hospital Daily Confinement benefit begins on day one
- Portability- you can take your coverage with you at the same rates
- Wellness Benefits- Any preventative health screening or test including but not limited to, annual physicals, immunizations, dental exams and mental health screenings

BENEFIT PROVISIONS

Nursery Care

Coverage for routine well baby care provided to your newborn baby while the baby is Confined from birth.

WEEKLY PREMIUM

Coverage	Weekly Premium
Employee Only	\$1.89
Employee and Spouse	\$5.65
Employee and Child(ren)	\$3.93
Family	\$7.23



www.reliancematrix.com

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.

INCLUDED BENEFITS

Benefits	
Hospital Admission Amount	\$1,100
Hospital Admission Max Per Year	1
Hospital Admission ICU Amount	\$2,200
Hospital Admission ICU Max Per Year	1
Hospital Confinement Amount (begins Day 1)	\$225
Hospital Confinement Days Max Per Year	15
Hospital Confinement ICU Amount (begins Day 1)	\$450
Hospital Confinement ICU Days Max Per Year	15
Minimum Hours for Admission or Confinement	20
Nursery Admission Amount	\$250
Nursery Admission Max Per Year	1
Mental Nervous/Substance Abuse/Skilled Nursery - Facility Benefit (up to 30 days)	\$100 per day
Transfer Of Coverage	Included
Wellness Benefit	\$50
Portability	Included
Benefit Waiting Period	None
Pregnancy Limitation Period	None
FMLA/MSLA Continuation	Included
Pre-Existing Limitation	None

***Note** If more than one type of Hospital Admission occurs during the same Confinement, only the highest Hospital Admission Benefit is payable

****Note** If more than one type of Hospital Confinement occurs on the same day, only the highest Hospital Confinement Benefit is payable.

EXCLUSIONS and LIMITATIONS

A benefit will not be paid for a Covered Event if caused or contributed by an exclusion listed in the Certificate of Insurance.

NON-INSURANCE SERVICES

1. 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-9572-0519, et al.