

Welcome to your employee benefits.

Enroll in coverage now to help protect
yourself and your loved ones in the future.



Orange County, VA

Orange County Government

Standard Insurance Company



Act Now to Help Protect What Matters Most



The life you're building for yourself and your family is precious. Every financial decision, every first step, every milestone — these are the things that matter. Think of insurance as a financial safety net that can help protect you when life doesn't go as planned. Enrolling in coverage now is a small thing you can do to help make sure you and your loved ones keep moving forward.

In this guide, you'll find details about your group insurance options from Standard Insurance Company (The Standard) and the forms you need to start the application process.



Protection from the Unexpected

Even with medical insurance, a serious illness or accident – or even a routine stay in the hospital – can be a drain on your finances. The following types of insurance pay a benefit to help you pay the bills. Use the payment however you like to cover out-of-pocket medical costs and other living expenses.

Accident insurance pays a lump sum directly to you so you can help cover out-of-pocket expenses as you or a family member recuperates after an accident.

Critical Illness insurance helps you manage expenses during a serious illness, such as a heart attack, stroke or cancer. Use the benefit, paid to you in a lump sum, for deductibles, copays, rent or groceries as you or a family member recovers.

With the insurance described above, you can take advantage of affordable group rates that will not increase as you get older. And if you leave your job, you can take your coverage with you.

Benefits You Can Apply for Now:

- Accident insurance
- Critical Illness insurance
- Short Term Disability insurance



Protection for Your Paycheck

Your most valuable asset is your ability to earn an income. Disability insurance provides partial income replacement if you can't work because of a qualifying disability caused by an illness, injury or pregnancy. The benefit payments can help with bills that continue even when you can't work, like your mortgage or rent — expenses medical insurance won't cover.

Short Term Disability insurance pays a weekly benefit to help you keep your finances on track when you're out of work because of a disability.

Ready to Apply? You'll Find the Form(s) Right Here

Once you've reviewed your options, the next step is to apply using the form(s) included at the end of this guide. Don't forget to turn in your forms before your

enrollment period ends.

Enroll Now

Enrollment begins August 16, 2017
and ends September 1, 2017



When you buy insurance through work, you have access to competitive group rates and the convenience of premiums deducted right from your paycheck.

SI 16919-D-VA-158815 (7/17)

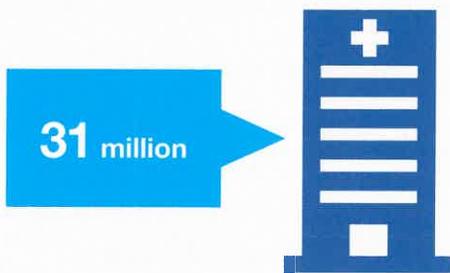


Group Accident Insurance

Keep your finances on track when an accident happens.

Having an accident doesn't just hurt you — it can also damage your finances. Your medical insurance will cover some of the expenses, but you'll be left to foot the bills for your copays and deductible. Those can add up fast, especially if you're unable to work while you recover. That's where Group Accident insurance comes in: It helps protect your bank account from the out-of-pocket expenses that can come with an injury — whether you're coping with a broken arm or recovering from a serious car accident.

Medical insurance helps — but it doesn't pay for everything.



Some 31 million people sought care in the emergency room for unintended injuries in 2011.¹



An estimated 10 million working-aged Americans struggled to pay medical bills in 2013 — even though they had health insurance.²

¹ Source: FastStats, based on National Hospital Ambulatory Medical Care Survey: 2011 Emergency Department Summary Tables, www.cdc.gov/nchs/fastats/accidental-injury.htm

² Source: NerdWallet Health. In 2013, NerdWallet aggregated multiple sources and data sets to estimate the impact of medical bills on Americans that year.

Don't let an accident stop your financial plans.

Accident insurance is an affordable way to make sure you can cover the gap between what your medical insurance covers and what you'd owe out of pocket if you or a family member were to get injured off the job. It's protection that's also convenient: Your premium payments are deducted directly from your paycheck.

Here's how it works:

In the event of a covered accident, your Accident insurance will pay a benefit directly to you. You can use this money wherever you need it most — whether that's to help with your deductible, copays and other medical bills, or your daily expenses while you recover.

Let's say your teenage daughter gets injured during tryouts for her school basketball team and goes to urgent care for treatment. Diagnosis: dislocated elbow and fracture of the forearm and wrist. Although surgery isn't necessary, she will need follow-up appointments and physical therapy.



You'd get an additional 25% if your child is injured while participating in an organized athletic activity — whether it's football practice, a soccer game or dance class.

BENEFITS PAID TO YOU

Urgent Care Visit.....	\$50
X-ray.....	\$50
Dislocated Elbow.....	\$800
Arm Fracture.....	\$550
Wrist Fracture.....	\$550
Physician Follow-up Appointment.....	\$50
Physical Therapy Appointment (2 visits)	\$100
SUBTOTAL.....	\$2,150
Youth Organized Sports Benefit (25% of subtotal).....	\$538
Total paid directly to you.....	\$2,688

Imagine that you survive a serious car accident. After a trip to the ER, you stay in the hospital for several days while you recover. In the weeks following the accident, you have a follow-up appointment at a clinic in another city and physical therapy.



You'd get an additional \$500 because you were injured in a car accident. Because you drove more than 100 miles one way for your follow-up appointment, you'd receive an extra \$150. If your car accident occurred more than 100 miles away from your home and a family member who resides with you traveled to be near you while you were in the hospital, we'd pay additional benefits to help cover lodging expenses.

BENEFITS PAID TO YOU

Ambulance.....	\$300
Emergency Room Visit.....	\$150
CAT Scan.....	\$200
Hospital Admission Benefit	\$1,000
5-Day Hospital Confinement (\$200 per day).....	\$1,000
Right Leg Fracture.....	\$4,000
Knee Cap Fracture.....	\$1,100
Pelvis Fracture.....	\$2,400
Physician Follow-up Appointment.....	\$50
Physical Therapy Appointment.....	\$50
SUBTOTAL.....	\$10,250
Automobile Accident Benefit.....	\$500
Transportation Benefit.....	\$150
Lodging (4 days).....	\$700
Total paid directly to you.....	\$11,600

Affordable Group Rates

Because you'll be buying this insurance through Orange County, VA, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. Your rates will not increase as you grow older — meaning you'll pay the same premium for the life of the policy, even if you continue your coverage after your employment with Orange County, VA ends (this is known as portability).

You can get a Health Maintenance Screening Benefit of \$50 each year just for going to the doctor for a covered wellness exam, such as a stress test or lipid panel — a routine preventive visit that typically costs you nothing under your medical insurance.

It pays to be well-adjusted. If you need to see a chiropractor while you're recovering from an accident, you can get a benefit of \$50 (up to two visits per accident, providing those visits are on different days).

Staying in a hospital can be costly, even with medical insurance coverage. You'll receive a \$1,000 benefit if you're admitted — plus \$200 for every day you're hospitalized.* And if you're admitted or confined to a critical care unit while you're in the hospital, you'll receive additional critical care unit benefits.

If you or a dependent travel at least 100 miles from your or your dependent's place of residence for treatment, you'll receive a Transportation Benefit of \$150 for each day of travel.** We'll pay a \$175 Lodging Benefit per day** if you or a dependent travel at least 100 miles from your or your dependent's place of residence for treatment and you, your dependent or another person incurs a lodging expense.

*Up to 365 days per accident.

**Maximum 30 days per accident; 90 days per year.

Coverage for...	Monthly Premium
You	\$15.82
You and your spouse	\$23.80
You and your children	\$27.47
You, your spouse and your children	\$42.38

These are actual benefits you could receive in the event of a covered accident. Benefits are paid once per covered accident unless otherwise noted:

Emergency Care Benefits	
Ambulance — Air	\$800
Ambulance — Ground	\$300
Emergency Room Visit	\$150
Urgent Care Visit	\$50
Initial Care Visit (not payable if Urgent Care or Emergency Room Visit Benefit is payable)	\$50
Emergency Dental Care — Crown	\$200
Emergency Dental Care — Extraction	\$100
Outpatient X-ray	\$50
Major Diagnostic Exam (such as CT scan, MRI, EEG)	\$200
Transfusion Blood, Plasma or Platelets	\$300

Specific Injury Benefits	
Burns	\$200-\$10,000, depending on severity
Coma	\$7,500
Concussion	\$150
Eye Injury	\$200
Lacerations	\$75-\$500, depending on size
Skin Graft	25% of burn benefit

Dislocations	Non-surgical/Surgical
Ankle, Collarbone (sternoclavicular), Elbow, Foot, Hand, Lower Jaw, Shoulder, Wrist	\$800/\$1,600
Knee (not including kneecap)	\$900/\$1,800
Collarbone (acromioclavicular), Spine	\$400/\$800
Finger, Rib, Toe	\$150/\$300
Hip	\$2,500/\$5,000
Partial Dislocation	25% of the associated dislocation listed above (non-surgical)

Fractures	Non-surgical/Surgical
Ankle, Arm (shoulder to elbow), Arm (elbow to wrist), Collarbone, Elbow, Foot, Hand, Kneecap, Lower Jaw, Shoulder Blade, Sternum, Wrist	\$550/\$1,100
Bones of Face, Coccyx, Nose, Vertebrae	\$500/\$1,000
Rib	\$400/\$800
Finger, Toe	\$100/\$200
Hip	\$2,500/\$5,000
Leg (hip to knee)	\$2,000/\$4,000
Leg (knee to ankle), Pelvis, Vertebral Column	\$1,200/\$2,400
Skull (depressed)	\$4,000/\$8,000
Skull (non-depressed)	\$1,500/\$3,000
Chip Fracture	25% of the associated fracture listed above (non-surgical)

Surgical Benefits	
Knee Cartilage (Once per covered accident, regardless of whether one or both knees require repair. If both exploratory and repair surgeries are performed, will pay repair benefit amount)	
Exploratory	\$200
Repair	\$750
Tendon, Ligament, Rotator Cuff (If two or more surgeries are required for the same covered accident, will pay the highest benefit amount)	
Exploratory	\$200
Repair of one	\$750
Repair of two or more	\$1,000
Ruptured Disc	
Repair	\$750
Abdominal/Thoracic Surgery (If more than one surgery required for the same covered accident, will pay the highest benefit amount)	
Exploratory	\$200
Laparoscopic Repair Surgery	\$750
Open Repair Surgery	\$1,500
Surgical Facility Benefit	\$150

Hospital Benefits	
Hospital Admission (once per covered accident)	\$1,000
Daily Hospital Confinement (maximum 365 days per covered accident)	\$200 per day
Critical Care Unit Admission* (once per covered accident)	\$750
Daily Critical Care Unit Confinement* (maximum 15 days per covered accident)	\$200 per day
Daily Rehabilitation Facility (maximum 90 days per covered accident)	\$100 per day
* Payable in addition to any Hospital Admission and/or Daily Hospital Confinement Benefit you may be eligible to receive.	

Follow-Up Care	
Medical Appliance (e.g., wheelchair, cane or brace)	\$100
Chiropractic Care (maximum 2 visits per covered accident, 1 per day)	\$50 per day
Physician Follow-up (maximum 2 visits per covered accident, 1 per day)	\$50 per day
Hearing Device	\$500
Prosthesis	One: \$500 Two or more: \$1,000
Occupational, Speech or Physical Therapy (maximum 3 visits per covered accident, 1 per day)	\$50 per day

Additional Benefits	
Lodging (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$175
Transportation (per trip) (per day, to a maximum of 30 days per covered accident and a total of 90 days per year)	\$150
Health Maintenance Screening Benefit (once per calendar year)	\$50
Automobile Accident Benefit	\$500
Youth Organized Sports Benefit	Additional 25% of total benefit payable

Accidental Death and Dismemberment (AD&D)	
Accidental Death	
You:	\$50,000
Spouse:	\$25,000
Child:	\$12,500
In the event of a covered accidental dismemberment or impairment, this policy would pay a percentage of the Accidental Death benefit:	
Loss of both hands or feet	30%
Loss of one hand and one foot	30%
Loss of one hand or one foot	15%
Loss of one digit (finger or toe)	2%
Loss of two or more digits (fingers and/or toes)	5%
Uniplegia	15%
Hemiplegia, Paraplegia or Triplegia	30%
Quadriplegia	50%
Loss of sight (one eye); loss of hearing (one ear)	15%
Loss of sight (both eyes); loss of hearing (both ears)	30%
In the event of an accidental death, this policy would pay the full Accidental Death benefit. In certain scenarios, it would also pay an additional percentage of the Accidental Death benefit:	
Air Bag Benefit	10%
Helmet Benefit	10%
Seat Belt Benefit	10%
Repatriation/transportation of remains	10%
Death that occurs while aboard commercial transportation	100%

Important Details

Here's where you'll find the nitty-gritty details about Accident insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage — at the same rate you would pay today — if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be a regular employee of Orange County, VA, actively working in the United States at least 40 hours per week and a citizen or resident of the United States or Canada. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can also cover your children from birth through age 25. Your children cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Accident insurance coverage can become effective.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, receive evidence of good health underwriting approval (if applicable), agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Exclusions

Benefits are not payable if an accident is caused by or contributed to any of the following:

- War or any act of war
- Suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony

or act of terrorism

- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the legal limit in the state your accident occurred
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a commercial aircraft
- Engaging in high-risk sports or activities such as (but not limited to) bungee jumping, parachuting, base jumping, mixed martial arts or mountain climbing
- An accident that arises out or in the course of any employment for wage or profit
- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident
- Riding in or driving any automobile in a race, stunt show or speed test
- Cosmetic Surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function after a covered accident
- An accident that occurs while you or your dependent is incarcerated in a jail or penal or correctional institution

When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage, including

the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

This is a limited benefit policy.

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IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).



Group Critical Illness Insurance

Help cover out-of-pocket expenses associated with a serious illness.

You may have medical insurance. But that doesn't mean you're covered for all of the expenses resulting from a serious illness that you probably haven't budgeted for — things like copays, deductibles, loss of income, child care and travel expenses. Group Critical Illness insurance helps fill the gap caused by these out-of-pocket costs, creating a financial safety net for you and your family.



Cancer patients carry rising burdens of health care-related out-of-pocket expenses: 42 percent reported a significant subjective financial burden and 46 percent used savings to defray out-of-pocket expenses.¹

70 percent of people who had difficulty paying medical bills in 2012 had some kind of health insurance.²

¹ "The Financial Toxicity of Cancer Treatment: A Pilot Study Assessing Out-of-Pocket Expenses and the Insured Cancer Patient's Experience," *The Oncologist Express*, Feb. 26, 2013, www.theoncologist.alphamedpress.org/content/18/4/381.long

² "Medical Debt Among People With Health Insurance," Kaiser Family Foundation, 2012 National Health Interview Survey (NHIS) data, Jan. 7, 2014, <http://kff.org/private-insurance/report/medical-debt-among-people-with-health-insurance/>

Help ensure your financial plans stay healthy even when you're not.

Critical Illness insurance is an affordable way to make up the difference between what your medical insurance covers and what you'd owe out of pocket if you or a family member were to be diagnosed with a covered critical illness. It's protection that's also convenient: Your premium payments are deducted directly from your paycheck.

An Extra Layer of Protection

Critical Illness insurance can make a big difference in your ability to pay out-of-pocket expenses associated with a serious illness. It pays a lump-sum benefit directly to you upon diagnosis of a covered illness, regardless of your treatment costs or what's covered by your medical insurance. Elect coverage in \$10,000 increments between \$10,000 and \$20,000.

With Critical Illness insurance, you can:

- **Update your coverage as needed.** As your life circumstances change, increase* or decrease your coverage.
- **Lock in your rate.** For example, if you're 35 when your coverage becomes effective, you'll pay a 35-year-old's rate for as long as you have the coverage. If you increase your coverage amount at age 45, you will pay a 45-year-old's rate for that increased coverage amount for so long as you have that increased coverage amount.
- **Take it with you.** If you leave your job, you can take your coverage with you.
- **Pick and choose how to spend your benefit.** Spend your lump-sum benefit however you want.
- **Protect your loved ones.** Cover your spouse up to \$10,000. Your kids are automatically covered at 25 percent of the amount elected for yourself for the same critical illnesses that you are. Kids are also covered for 21 additional childhood diseases, including cystic fibrosis, Down syndrome, muscular dystrophy, spina bifida and cerebral palsy.
- **Receive additional benefits.** If you are diagnosed with a covered illness again after a treatment-free period of 12 months, you will receive 25 percent of the original benefit amount. If you are diagnosed with a different and subsequent covered illness at least 90 days after the diagnosis of the first critical illness, you will receive an additional Critical Illness insurance benefit.

Chances are good that a family member, friend or colleague of yours has endured a critical illness. You may have even seen that person struggle to pay the bills. Think of Critical Illness insurance as financial peace of mind, so you don't have to choose between paying for medical bills and helping send your daughter to the college of her dreams.

*Evidence of good health is required; see the Important Details section for more information.

Here's how it works:

John has \$10,000 of Critical Illness insurance coverage. He makes an appointment with his doctor after feeling off for the past few weeks. Diagnosis: cancer, with a good prognosis but a long road ahead. Within days of making a claim, John receives his Critical Illness insurance benefit paid directly to him. As John undergoes intensive treatment over the next few months, he can use the benefit for any purpose, including to pay for things that his medical insurance does not cover. Things like the deductible, copays, child care, certain medications, time away from work, alternative treatments and a special diet.

SAMPLE OUT-OF-POCKET EXPENSES

Medical insurance deductible.....	\$1,300
Out-of-pocket expenses over the course of six months.....	\$5,000
Transportation to medical appointments and treatments.....	\$300
Lodging near treatment facility.....	\$1,370
Lost wages.....	\$4,500
Alternative treatments and diets not covered by medical plan.....	\$4,500
TOTAL OUT-OF-POCKET EXPENSES.....	\$15,300
CRITICAL ILLNESS BENEFIT.....	\$10,000
OUT-OF-POCKET EXPENSES.....	\$5,300

Costs are hypothetical. Actual costs will vary by state, cancer type, stage at diagnosis, treatments received and personal factors.

Critical Illness insurance can make a big difference in your ability to pay out-of-pocket expenses associated with a serious illness that are not covered by medical insurance.

Covered Conditions

Receive 100 percent of your coverage amount for:

- Heart attack
- Stroke
- Cancer
- End stage renal (kidney) failure
- Major organ failure
- Coma
- Paralysis of two or more limbs
- Loss of sight
- Occupational HIV
- Occupational hepatitis

Receive 25 percent of your coverage amount for:

- Severe coronary artery disease with recommendation for bypass surgery
- Carcinoma in situ (cancer that has not metastasized)

Initial diagnosis and initial recommendation must occur after your coverage becomes effective.

Affordable Group Rates

Because you'll be buying this insurance through Orange County, VA, you'll have access to affordable group rates. You'll also have the convenience of having your premium deducted directly from your paycheck. Your rates will not increase as you grow older – meaning you'll have the same monthly payment for as long as you have your coverage. For all coverage amounts, complete a brief health questionnaire.

Coverage for...	Coverage Amount...
You	\$10,000-\$20,000 in increments of \$10,000
Your spouse	Flat amount of \$10,000
Your child(ren) through age 25	Automatically covered at 25% of your coverage amount

See the Important Details section for more information, including requirements, exclusions, age reductions and definitions.

The monthly premiums you would pay for Critical Illness insurance benefits are based on the ages of you and your spouse and whether or not you or your spouse use tobacco. The rates below are not combined rates for you and your spouse, rather they are the rates for each of you individually. Please note that coverage can be purchased in \$10,000 increments.

Coverage Amount	Issue Age				
	< 30	30-39	40-49	50-59	60-69
Non-Tobacco Monthly Rates					
\$10,000	\$4.89	\$9.49	\$17.39	\$35.24	\$65.26
\$20,000	\$9.79	\$18.98	\$34.79	\$70.48	\$130.51

Coverage Amount	Issue Age				
	< 30	30-39	40-49	50-59	60-69
Tobacco Monthly Rates					
\$10,000	\$6.93	\$15.81	\$33.10	\$74.98	\$145.82
\$20,000	\$13.87	\$31.62	\$66.20	\$149.96	\$291.63

Important Details

Here's where you'll find the nitty-gritty details about Critical Illness Insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage — at the same rate you would pay today — if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be a regular employee of Orange County, VA, actively working in the United States at least 40 hours per week and a citizen or resident of the United States or Canada. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, a person to whom you are legally married. You can also cover your child(ren) from birth through age 25. Your child(ren) cannot be insured by more than one employee. Your spouse or child(ren) must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Critical Illness insurance coverage can become effective.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, receive evidence of good health underwriting approval (if applicable), agree to pay premium and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Evidence of Good Health

You will need to provide evidence of good health by completing a brief questionnaire for the following situations:

- For all coverage amounts
- Reinstatements, if required

- If you or your spouse were required to provide evidence of good health under a prior period of eligibility and either:
 - Did not provide it, or
 - We did not approve it

Changes in Your Insurance

To increase your or your spouse's insurance, you can apply in writing. Evidence of good health will be required:

- For requests for coverage increases
- If you or your spouse were required to provide evidence of good health under a prior period of eligibility and either:
 - Did not provide it, or
 - We did not approve it

Reoccurrence Benefit

If you or your dependents receive a benefit for a covered critical illness and are later diagnosed with the same critical illness, a one-time reoccurrence benefit will be paid if you or your dependents have:

- Been continuously insured under the group policy between the initial and subsequent diagnosis or recommendation
- Served a 12-month treatment-free period in connection with the critical illness during which you or your dependents did not:
 - Consult a physician or other licensed medical professional
 - Receive medical treatment, services or advice
 - Undergo diagnostic procedures, including self-administered procedures
 - Take prescribed drugs or medications

Exclusions

Benefits are not payable if a critical illness is caused or contributed to by any of the following:

- War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism
- Active participation in a violent disorder or riot
- The voluntary use or consumption of any poison, chemical compound, drug or alcohol in excess of the

legal limit in the state the critical illness occurred, unless used or consumed according to the directions of a physician

- Initial diagnosis outside of the United States or Canada
 - Elective surgery or other procedure which:
 - Does not promote the proper function of your or your dependent's body or prevent or treat sickness or injury
 - Is directed at improving your or your dependent's appearance, unless such surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurement
- Note: This exclusion will not apply to a critical illness caused or contributed to by your or your dependent's donation of an organ or tissue

When Your Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you reach age 80, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for spouse insurance, your spouse reaches age 80, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

This is a limited benefit policy.

GP0614-CI

Standard Insurance Company
1100 SW Sixth Avenue
Portland OR 97204

SI 17616-D-VA-158815 (7/17)

5321261-96725

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, if you meet the policy conditions, for one of the specific diseases or health conditions named in the policy. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).



Group Short Term Disability Insurance

Protect your income and those who depend on it.

This coverage replaces a portion of your income when you can't work because of a qualifying disability. Even if you're healthy now, it's important to protect yourself and the people who count on your income. This insurance can help you pay the bills when you're unable to work.



This plan offers:

- Competitive group rates
- The convenience of payroll deduction
- Benefits for a qualifying disability that is not work-related

? About This Coverage

See the Important Details section for more information, including requirements, exclusions and definitions.

What Your Benefit Provides

This is the benefit you'd receive if you were to suffer a qualifying disability. Eligible earnings are your weekly insured predisability earnings, as defined by the group policy. Your benefit amount will be reduced by deductible income; see the Important Details section for a list of deductible income sources.

60% of your eligible earnings, up to a maximum benefit of **\$2,000** per week. Plan minimum **\$15** per week.

Benefit Waiting Period

If you suffer a qualifying disability, your benefit waiting period is the length of time you must be continuously disabled before you can begin receiving your weekly benefit.

14 days for accidental injury
14 days for physical disease, pregnancy or mental disorder

Extended Benefit Waiting Period

This applies if you do not apply for this coverage within 31 days of becoming eligible, were eligible for coverage under a prior plan for more than 31 days but were not insured, or if your insurance ends because you failed to pay your premium and is later reinstated.

60 days for any qualifying disability caused by physical disease, pregnancy or mental disorder occurring during the first 12 months of coverage.

How Long Your Benefits Last

This is the maximum length of time you could be eligible to receive a weekly disability benefit.

90 days

☰ Additional Features

Your coverage comes with some added features:

Return to Work Incentive

Your disability benefit will not be reduced by any work earnings you receive until the combined amount of the benefit, earnings and other sources of income exceeds 100 percent of your pre-disability earnings.

Help with Returning to Work

If a worksite modification would enable you to return to work, we can help your employer make approved modifications by covering some or all of the cost.

🇺🇸 How Much Your Coverage Costs

Because this insurance is offered through Orange County, VA, you'll have access to competitive group rates that may be more affordable than those available through individual insurance. You'll also have the convenience of having your premium deducted directly from your paycheck. How much your premium costs depends on a number of factors, such as your age and benefit amount.

Use this formula to calculate your premium payment:

$$\underline{\hspace{2cm}} \times 0.60 \times \underline{\hspace{2cm}} \div 10 = \underline{\hspace{2cm}}$$

Enter your weekly earnings (cannot be more than \$3,333). Enter your rate from the rate table. This amount is an estimate of how much you'd pay each month.

Your Age (as of October 1)	Rate per \$10 of weekly benefit
<30	\$0.79
30-34	\$0.79
35-39	\$0.56
40-44	\$0.39
45-49	\$0.39
50-54	\$0.39
55-59	\$0.54
60+	\$0.64

Not being able to work also means not being able to earn a paycheck. As you consider Short Term Disability insurance, think about the expenses you would need to cover if you were to become disabled:

- Mortgage or rent
- Utilities
- Groceries
- Medical bills
- Car insurance
- Childcare costs

To estimate your insurance needs, you'll need to consider your unique circumstances.

Use our online calculator at www.standard.com/disability/needs.

Important Details

Here's where you'll find the nitty-gritty details about the plan.

Eligibility Requirements

A minimum number of eligible employees must apply and qualify for the proposed plan before the coverage can become effective. If this requirement is not met, this plan will not become effective. To be eligible for coverage, you must be:

- A regular employee of Orange County, VA
- Actively working at least 40 hours per week
- A citizen or resident of the United States or Canada

Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

Employee Coverage Effective Date

To become insured, you must:

- Meet the eligibility requirements listed above
- Serve an eligibility waiting period*
- Apply for coverage and agree to pay premiums
- Be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

*The eligibility waiting period varies; contact your human resources representative for details.

Definition of Disability

You will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity the material duties of your own occupation, and
- You suffer a loss of at least 20 percent in your predisability earnings when working in your own occupation.

You are not considered disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- The loss of your professional or occupational license or certification
- An activity arising out of or in the course of any employment for wage or profit

Limitations

Short Term Disability benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty, as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution
- Able to work and earn at least 20 percent of your predisability earnings in your own occupation but you elect not to
- Eligible to receive benefits for your disability under a workers' compensation law or similar law

When Your Benefits End

Your Short Term Disability benefits end automatically on the date any of the following occur:

- You are no longer disabled
- Your maximum benefit period ends
- Long term disability benefits become payable to you under a Long Term Disability plan
- Benefits become payable under any other disability insurance plan under which you become insured through employment during a period of temporary recovery

- You fail to provide proof of continued disability and entitlement to benefits
- You pass away

Deductible Income

Your benefits will be reduced if you have deductible income, which is income you receive or are eligible to receive while receiving Short Term Disability benefits. Deductible income includes:

- Sick pay, annual or personal leave pay, severance pay or other forms of salary continuation (including donated amounts) paid that exceeds 100 percent of your indexed predisability earnings when added to your Short Term Disability benefit
- Amounts under unemployment compensation law
- Amounts because of your disability from any other group insurance
- Any disability or retirement benefits received or you are eligible to receive from your employer's retirement plan
- Amounts under any state disability income benefit law or similar law
- Earnings from work activity while you are disabled, plus the earnings you could receive if you work as much as your disability allows
- Earnings or compensation included in your predisability earnings which you receive or are eligible to receive while Short Term Disability benefits are payable
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

When Your Insurance Ends

Your insurance ends automatically when any of the following occur:

- The date the last period ends for which a premium was paid
- The date your employment terminates
- The date the group policy (or your employer's coverage under the group policy) terminates
- The date you cease to meet the eligibility requirements (insurance may continue for limited periods under certain circumstances)
- The date Orange County, VA ends participation in the group policy

Group Insurance Certificate

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

GP399-STD, GP899-STD, GP309-STD, GP209-STD, GP399/ASSOC, GP399-STD/TRUST

[SI 12503-D-VA-158815 \(7/17\)](#)

5321261-98743

A Helping Hand When You Need It

Rely on the support, guidance and resources of your Employee Assistance Program.



There are times in life when you might need a little help coping or figuring out what to do. Take advantage of the Employee Assistance Program¹ (EAP) which includes WorkLife Services and is available to you and your family in connection with your group insurance from Standard Insurance Company (The Standard). It's confidential — information will be released only with your permission or as required by law.

With EAP, assistance is immediate, personal and available when you need it.

Connection to Resources, Support and Guidance

You, your dependents (including children to age 26)² and all household members can contact master's-degreed clinicians 24/7 by phone, online, live chat, email and text. There's even a mobile EAP app. Receive referrals to support groups, a network counselor, community resources or your health plan. If necessary, you'll be connected to emergency services.

Your program includes up to three face-to-face assessment and counseling sessions per issue. EAP services can help with:



Depression, grief, loss and emotional well-being



Family, marital and other relationship issues



Life improvement and goal-setting



Addictions such as alcohol and drug abuse



Stress or anxiety with work or family



Financial and legal concerns



Identity theft and fraud resolution



Online will preparation

¹ The EAP service is provided through an arrangement with Bensinger, DuPont & Associates (BDA), which is not affiliated with The Standard. BDA is solely responsible for providing and administering the included service. EAP is not an insurance product and is provided to groups of 10–2,499 lives. This service is only available while insured under The Standard's group policy.

² Children under the age of 12 will not receive individual face-to-face counseling sessions.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

WorkLife Services

WorkLife Services are included with the Employee Assistance Program. Get help with referrals for important needs like education, adoption, travel, daily living and care for your pet, child or elderly loved one.

Online Resources

Visit www.eapbda.com to explore a wealth of information online, including videos, guides, articles, webinars, resources, self-assessments and calculators.

Contact EAP

888.293.6948

TDD: 800.327.1833

24 hours a day, seven days a week

www.eapbda.com

Enter **standard** as the login ID and **eap4u** as the password

NOTE: It's a violation of your company's contract to share this information with individuals who are not eligible for this service.

Standard Insurance Company

standard.com

Employee Assistance Program-3
SI 17201-D (5/17) EE

To Be Completed By Human Resources

Group Number 158815	Division	Billing Category	Date of Employment
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To Be Completed By Applicant

- Apply for Coverage Name Change Former Name _____
 Add Dependent Delete Dependent Date of Add/Delete _____
 Reinstatement Beneficiary Change **Complete Beneficiary Section**

Your Full Name	Social Security Number	Birth Date	
Address	City	State	ZIP
Phone Number	Job Title/Occupation	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Employer Name Orange County, VA	Hours Worked Per Week	Are You Actively At Work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Earnings \$ _____ Per: <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
Have you or your Spouse used tobacco in any form in the last 12 months? You: <input type="checkbox"/> Yes <input type="checkbox"/> No Your Spouse: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Spouse Full Name			Birth Date

Coverage

Check with your Human Resources Department about coverage options, minimum and maximums available to you and, if applicable, Evidence Of Insurability requirements. If you choose not to elect any coverage below, in future enrollments, you may be required to provide Evidence of Insurability or be subject to a Late Enrollment penalty.

Short Term Disability Insurance

You must choose one of the following options:

- Short Term Disability (Employee Paid) Decline Short Term Disability (Employee Paid)

Accident Insurance (Employee Paid)

- You only You and your Spouse You and your Child(ren) (no Spouse) You, your Spouse and Child(ren)

Your Full Name

Critical Illness Insurance (Employee Paid)

You must choose one of the following options:

Employee* requested amount \$10,000 \$20,000

Decline Critical Illness (Employee Paid)

You must choose one of the following options:

Spouse requested amount \$10,000

Decline Critical Illness for your Spouse (Employee Paid)

**Eligible child(ren) are automatically covered at 25% of your Coverage Amount.*

If the coverage option you select requires Evidence Of Insurability, please complete the questions below for you and/or your Spouse.

	You		Spouse	
	Yes	No	Yes	No
1. In the past 12 months have you or your Spouse had any symptom or been informed by a medical professional of any abnormal test result which resulted in a recommendation to have any diagnostic test or procedure which has not yet been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Has a medical professional ever diagnosed you or your Spouse as having or prescribed medication for Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or Human Immunodeficiency Virus (HIV) antibodies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having: <ul style="list-style-type: none"> • diabetes (other than during pregnancy); heart disorder; angina; arterial disease; heart attack; angioplasty; coronary artery bypass; high blood pressure (hypertension) treated with three (3) or more medications; rheumatic fever; stroke; transient ischemic attack; • renal disease (excluding kidney stone or urinary tract infection); pancreas disorder; liver cirrhosis; hepatitis (excluding hepatitis A); • benign brain tumor; systemic lupus; muscular dystrophy; poliomyelitis; osteomyelitis or neurological disorder; • Addison's disease; sickle cell anemia; hemophilia; paralysis; organ transplant; tuberculosis; or lung disease (excluding asthma or acute pneumonia); 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having cancer or malignancy (excluding non-melanoma skin cancer); bone marrow disorder, ulcerative colitis or Crohn's disease?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. In the past 10 years, have you or your Spouse had, been treated for or been diagnosed by a medical professional as having: glaucoma; retinitis pigmentosa or macular degeneration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Full Name

Beneficiary

This designation applies to your Life and Accidental Death and Dismemberment Insurance and Voluntary Accidental Death and Dismemberment Insurance, if any, available through your Employer. This designation also will apply to your Supplemental Life and Accident Insurance, if any, available through your Employer, unless replaced by a separate and later designation. Designations are not valid unless signed, dated, and delivered in accordance with the terms of the Group Policy during your lifetime.

Primary – Full Name	Address	Relationship	% of Benefit <i>Total must equal 100%</i>
Contingent – Full Name	Address	Relationship	% of Benefit <i>Total must equal 100%</i>

For Accident, Critical Illness Insurance:

These benefits are under limited benefit insurance policies. These policies are a supplement to health insurance and are not a substitute for major medical coverage. They are not intended to satisfy the individual mandate of the Affordable Care Act (ACA) or provide the minimum essential coverage required by the ACA. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

Signature

I wish to make the choices indicated on this form. If electing coverage, I authorize deductions from my wages to cover my contribution, if required, toward the cost of insurance. I understand that my deduction amount will change if my coverage or costs change. I represent that the statements contained herein, including, if applicable, those made in response to the Evidence Of Insurability questions, are true and complete to the best of my knowledge and belief, and I understand that they form the basis of any coverage under the Group Policy(ies). I understand that any misstatements or failure to report information which is material to the issuance of coverage may be used as a basis for rescission of my insurance and/or denial of payment of a claim. I agree to notify Standard Insurance Company (The Standard) of any change in my medical condition while my enrollment application is pending. I acknowledge that I have read the Fraud Notice. I agree that if my application is approved by The Standard, the effective date of any coverage will be determined in accordance with the terms of the Group Policy(ies), including any applicable Active Work requirement and my coverage will be subject to all terms and conditions of the Group Policy(ies).

Signature of Applicant (Member/Employee)

Date

Your Full Name

Beneficiary Information

- Your designation revokes all prior designations.
- Benefits are only payable to a contingent Beneficiary if you are not survived by one or more primary Beneficiary(ies).
- If you name two or more Beneficiaries in a class:
 1. Two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.
 2. If you provide for unequal shares in a class, and two or more Beneficiaries in that class survive, we will pay each surviving Beneficiary his or her designated share. Unless you provide otherwise, we will then pay the share(s) otherwise due to any deceased Beneficiary(ies) to the surviving Beneficiaries pro rata based on the relationship that the designated percentage or fractional share of each surviving Beneficiary bears to the total shares of all surviving Beneficiaries.
 3. If only one Beneficiary in a class survives, we will pay the total death benefits to that Beneficiary.
- If a minor (a person not of legal age), or your estate, is the Beneficiary, it may be necessary to have a guardian or a legal representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, the written trust must be identified in the Beneficiary designation. For example, "Dorothy Q. Smith, Trustee under the trust agreement dated _____."
- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have questions, consult your legal advisor.
- Dependents Insurance, if any, is payable to you, if living, or as provided under your Employer's coverage under the Group Policy.

Fraud Notice

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

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About Standard Insurance Company

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at **www.standard.com**.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

Standard Insurance Company
1100 SW Sixth Avenue
Portland OR 97204
www.standard.com

Enrollment Booklet
SI 16891-D-VA-158815 (7/17)
5321261-96721