



Benefits for Life
CMS Voluntary Benefits Program

be protected



- Specified Disease Insurance with Optional Cancer Benefit
- Premier Whole Life Insurance
- Accident Insurance
- MedSupport Insurance (Hospital Confinement)

Spring 2011 Edition



Welcome to *Benefits for Life*

Benefits for Life, the employee-paid Voluntary Benefits Program offered through Charlotte-Mecklenburg Schools (CMS), provides you and your family members an opportunity to enroll in a variety of valuable benefits at affordable rates. You pay the required premiums through convenient payroll deduction. If you enroll during the initial open enrollment period, you won't need to answer medical questions up to specified benefit levels.

The *Benefits for Life* offerings supplement your CMS benefits package. Because the plans are voluntary, you can customize your coverage by choosing from a range of plans that offer a combination of benefits and features that can help meet your personal and family insurance needs.

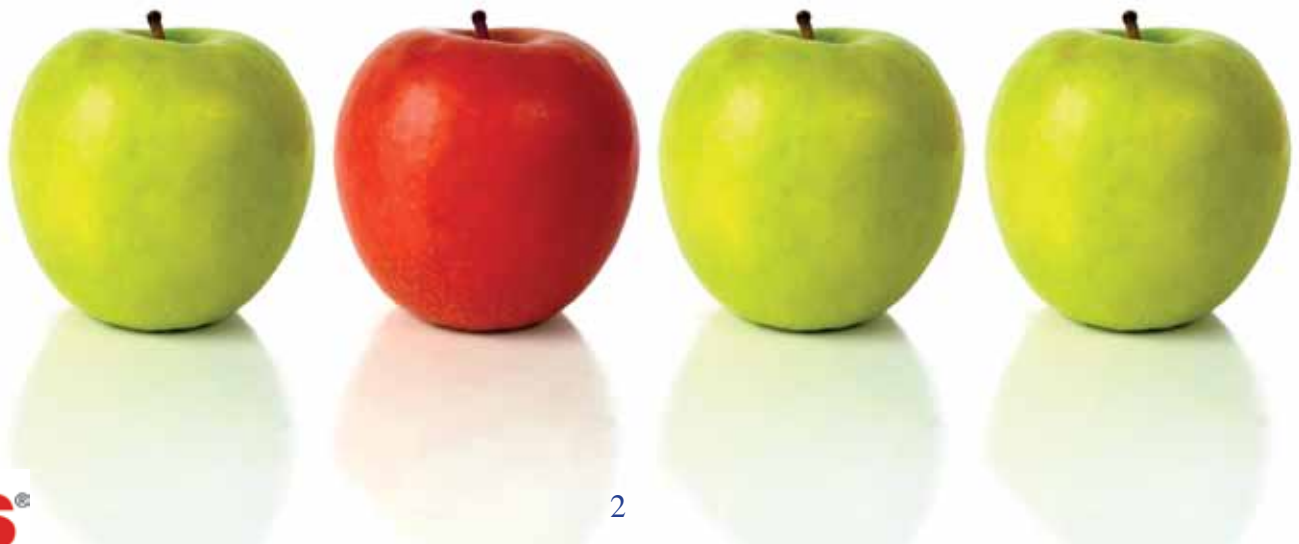
Voluntary Coverage Options

As a permanent CMS employee actively working 20 or more hours per week, you're eligible for these exciting new *Benefits for Life* Voluntary products:

- Specified Disease Insurance with Optional Cancer Benefit (Similar to Critical Illness Insurance)
- Premier Whole Life Insurance
- Accident Insurance
- MedSupport (Hospital Confinement Insurance)

Key Features of the *Benefits for Life* Program

- Payments are made through the convenience of payroll deduction (pre-tax for all benefits except Premier Whole Life Insurance which is post-tax)
- Coverage is portable upon request should you change jobs or retire
- Benefits are payable regardless of any other coverage or insurance you may have
- No medical questions up to specific coverage levels when you are first eligible
- Pre-existing conditions only apply to MedSupport and those will be waived if you are replacing in-force Intensive Care Coverage and/or Medical Bridge coverage during the initial enrollment period





2011 Special Enrollment Opportunity

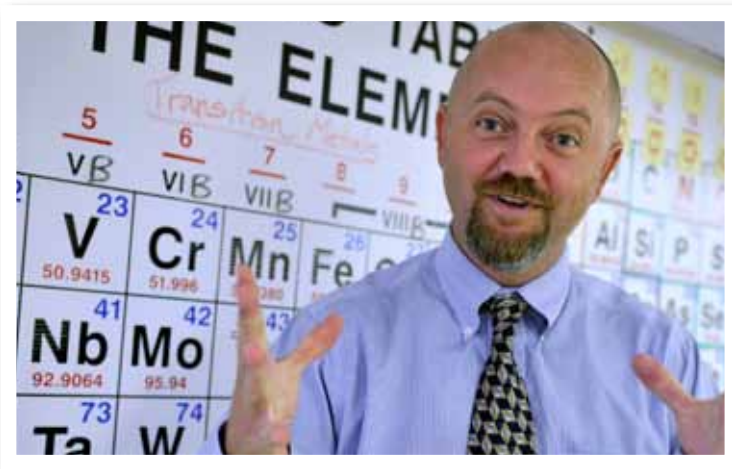
During the 2011 Voluntary Benefit Open Enrollment process, you have the opportunity to apply for certain benefits not usually available to employees or their family members individually.

If you decline coverage now and wish to enroll in a subsequent enrollment period, you may need to show proof of good health before your coverage request is approved.

No medical questions asked up to specified levels, if you enroll during the 2011 Open Enrollment period.

How Do I Enroll?

- The enrollment period is March 30 through May 6, 2011
- Schedule your enrollment meeting with a Benefit Counselor* at your location
- Call the Enrollment Center at 1-866-874-8747 between 7:00 a.m. and 6:00 p.m. Eastern Time



*This brochure highlights certain features of the CMS **Benefits for Life** optional coverage program. It does not include all plan rules, details and coverage options available and is not a contract. The terms of the plans are governed by insurance certificates/insurance policies. Should there be any inconsistencies between this brochure and any insurance certificates/insurance policies, the insurance certificate/insurance policies are the final authority. CMS reserves the right to change or discontinue any or all optional coverage plans at any time. *Benefit Counselors are Licensed Insurance Producers.*



Specified Disease Insurance with Optional Cancer Benefit – Offered by Unum (Specified Disease also known as Critical Illness)

If you or someone in your family suffers a serious disease, you can be hit hard with immediate medical expenses and reduced income from being out of a job. Health benefits will pay part of the medical bills, and disability insurance coverage can help ensure a continuing income. However, many immediate expenses may not be covered.

Unum Specified Disease Insurance with Optional Cancer benefit directly pays you a lump sum benefit at the diagnosis of a covered illness, such as a heart attack, stroke, major organ failure, or permanent paralysis. Cancer is also covered for an additional premium.

You choose the level of coverage (see Highlights table below). The benefit you receive depends on the category of your illness, and may be used as you see fit. You can use this coverage more than once, and you may receive up to 100% of the benefit amount for each category (1, 2, or 3).

Specified Disease Insurance with Optional Cancer Benefit May Be Right for You If...

- You want to consider treatment options from doctors or hospitals outside your area of residence
- You need to provide transportation and/or lodging for family members in the event of a critical illness
- Your home is not adapted for a person with limited mobility for medical reasons
- You would need additional funds if you are unable to work during your recovery period

Illnesses Covered

The following illnesses are covered under the plan:

Base Covered Conditions (Category 1)

Heart attack, stroke, coronary artery bypass surgery*

Base Covered Conditions (Category 2)

Benign brain tumor, major organ failure, end stage renal failure, blindness

Base Covered Conditions (Category 3)

Coma, occupational HIV, permanent paralysis

Optional Cancer Conditions (Category 4)

You may choose to select this benefit for an additional premium.

- Cancer
- Carcinoma in situ* (pays 25% of the lump sum benefit)

You can use this coverage more than once and you may receive up to 100% of the benefit amount for each category. If you receive a full benefit payout for a covered illness, your coverage can be continued for the remaining specified diseases if listed under another category and medically unrelated.

*Payout of the coronary artery bypass surgery and carcinoma in situ, which are paid at 25% of the benefit amount and payable once per covered individual, reduces the remaining amount payable for another specified disease in the same category. Carcinoma in situ is defined as cancer that involves only cells in the tissue in which it began and that has not spread to nearby tissues.



Highlights: Specified Disease Insurance

Plan Features	Benefit to You
Eligibility	All employees who are actively at work, spouses ages 17 through 64 and child(ren) newborn through age 24, dependent upon the employee for support and unmarried
Coverage Options	Employee Only, Employee and Spouse, Employee and Child(ren), Family
Benefit Amount	Employee: Guaranteed Issue—up to \$15,000 benefit and simplified issue up to \$50,000 benefit. Spouse: Guaranteed Issue—up to \$5,000 benefit and simplified issue up to \$30,000 benefit. Dependent Children: All eligible children are automatically covered at 25% of the employee benefit amount at no additional cost.
Recurrence Benefit	This benefit can provide an additional payout for a second occurrence of: <ul style="list-style-type: none"> – a benign brain tumor – coma – heart attack – stroke Note: 12 months must elapse between occurrences of the same condition. A benefit payout of 50% will be paid for the second occurrence of one of the covered conditions listed above.
Additional Child(ren) Coverage	Eligible children are covered for the same conditions as employee and the following specific childhood conditions: Category 1: Down syndrome Category 2: Cerebral palsy, cystic fibrosis, and spina bifida Category 3: Cleft lip or palate
Health Screening Benefit	This benefit can pay \$75 per calendar year per insured individual if a covered health screening test is performed, including: <ul style="list-style-type: none"> • Blood tests • Chest X-rays • Stress tests • Mammograms • Colonoscopies A full list of covered tests will be provided in your certificate.
Pays for Expenses Not Paid by Other Insurance	Specified Disease Insurance can provide security for many expenses not covered by basic medical insurance such as the following: <ul style="list-style-type: none"> • Family income replacement during recuperation • Out-of-network treatment • Medical insurance copays and deductibles • Alterations to home or car • Child care and housekeeping expenses • Special transportation or housing expenses • Nursing care and experimental treatment or drugs
Portability	Coverage is portable upon request, which means you may take the coverage with you if you leave employment or retire (subject to plan provisions).
Premiums	Premiums are guaranteed for two years
Pre-existing Condition Limitation	Pre-existing conditions have been waived for all CMS employees and dependents.
Waiting Period	Waiting period has been waived for all 4 benefit categories. A 30-day waiting period from the effective date does apply to the Health Screening Benefit.



Unum Specified Disease Insurance Sample Rates

Sample weekly rates for employee only, non-tobacco coverage, without the cancer benefit:

Age	Weekly Rate for \$25,000 of Coverage
30	\$3.23
40	\$6.00
50	\$10.96

THIS IS A LIMITED POLICY.

This information is not intended to be a complete description of the insurance coverage available. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage, please refer to Policy Form CI-1 or contact your Unum representative.

Exclusions

Unum will not pay benefits for a claim that is caused by, contributed to by or occurs as a result of:

- Participating or attempting to participate in a felony or being engaged in an illegal occupation;
- Committing or trying to commit suicide or injuring oneself intentionally, whether sane or not;
- Participating in war or any act of war, whether declared or undeclared;
- Committing acts of terrorism;
- Being under the influence of or addicted to intoxicants or narcotics. This would not include physician-prescribed medication, taken in the prescribed dosage; or
- Having a date of diagnosis during the benefit waiting period.

Limitation, Exclusions, Terminations

Termination Provisions

If you choose to cancel your coverage under the policy, your coverage ends on the first of the month following the date you provide notification to your employer. Otherwise, your coverage under the policy ends on the earliest of the:

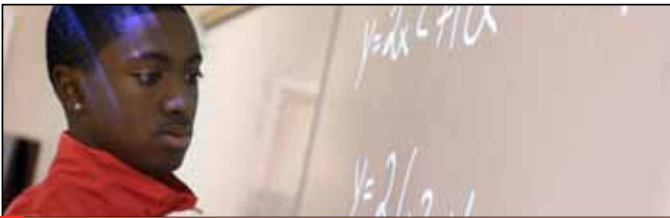
- Date this policy is cancelled;
- Date you are no longer in an eligible group;
- Date your eligible group is no longer covered;
- Date of your death;
- Last day of the period for which you made any required contributions; or
- Last day you are in active employment unless continued due to a covered layoff or leave of absence or due to an injury or sickness. Coverage on your dependent children ends on the earliest of the date your coverage under the policy ends or the date a dependent child no longer meets the definition of dependent children.

Unum will provide coverage for a payable claim which occurs while you are covered under this policy. CU-12687

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.





Premier Whole Life Insurance – Offered by ING Employee Benefits

Protect your family from the loss of income that results from the unexpected death of a loved one.

Whole life insurance is designed to provide a base of life insurance coverage for your lifetime. It offers you life insurance protection, cash accumulation and cash value loan privileges – all in one policy.

The premium you pay is based on the death benefit you select and the optional riders you choose as well as your age and tobacco status. The insurance coverage, premium amounts, and cash value are guaranteed as long as you meet the required premium payments.

Because you care for your family and you want to leave your beneficiaries some financial security, the death benefit of your life insurance policy can provide money to help them meet financial obligations. These proceeds could be used by the beneficiary to help pay for child care, reduce bills, or help with educational expenses, among other options.

Optional Riders

Accidental Death Benefit Rider

This benefit provides an additional benefit equal to the base policy face amount if the insured dies in a covered accident. The maximum additional benefit available is \$150,000. The rider terminates on the policy anniversary on which the insured is 65. Any employee or spouse up through age 60 who is eligible for Whole Life Insurance is eligible to apply for the Accidental Death Benefit Rider.

Waiver of Premium Rider

This rider allows the continuation of your life insurance policy by waiving the monthly premiums of the base policy and any riders after the insured has been totally disabled for four consecutive months. The waiver continues throughout the duration of the disability.

Accelerated Death Benefit Rider (Only available in NC, IL and CA)

An insured who meets the eligibility criteria for a **long term care illness** will receive an accelerated death benefit payable on a monthly basis. See rider brochure at cms.hrintouch.com and click on Voluntary Benefits for more details.

Long Term Care Benefit Rider (Not available in NC, CT, FL, IL and CA)

Long Term Care coverage provides monthly payments in the event that you require assistance with activities of daily living. Qualifying care includes home health care, adult daycare, or confinement to a long term care facility. See rider brochure at cms.hrintouch.com and click on Voluntary Benefits for more details.

Children's Term Insurance Rider

Insurance coverage is available in \$1,000 increments, from \$2,000 to \$10,000. On the first policy anniversary after the child's 25th birthday – or expiry date, if earlier – he or she can convert that insurance to an individual life policy for a maximum of 5 x the rider amount. Evidence of insurability is not required.



Highlights: Whole Life Insurance

Plan Features	Benefit to You
Eligibility	All employees who are actively at work and spouses up to age 70 and child(ren) ages 15 days through age 24 and unmarried.
Coverage Options	You can insure yourself, your spouse, your children and your grandchildren. You can cover your dependents even if you do not choose to apply for coverage yourself.
Benefit Amount*	Employee: Guaranteed Issue—up to \$25 per week, not to exceed \$125,000 (ages 15-65); Contingent Issue—up to \$50,000 maximum benefit (ages 66-70). Spouse: Contingent Issue—greater of \$5/week or \$5,000 (ages 15-65); Above Contingent Issue—Full Underwriting (ages 66-70). Dependent Children: Contingent Issue—\$12,500, \$15,000, \$20,000, or \$25,000 (15 days through 24 years). <i>Note: Amounts above Guaranteed/Contingent Issue Amounts are available with additional underwriting.</i>
Portability	Coverage is portable, which means you may take the coverage with you if you leave employment or retire.
Level Premiums	The premiums are guaranteed to be fixed for life of the policy as long as you make the required payments.
Guaranteed Cash Values	Policy provides guaranteed cash values that are not based on a variable interest rate. As long as premiums are paid, the policy's cash value will grow over time based on a schedule provided with your policy.
Cash Value Loans	Once cash value accumulates, the policy holder can borrow against it at the rate shown in the policy. Interest is payable in advance. The death benefit will be reduced by the amount of any outstanding loan and unpaid accrued interest.
Pre-existing Conditions	Pre-existing conditions don't apply to Premier Whole Life Insurance.
Suicide Clause	For suicide within 2 years from the policy's date of issue, benefits are limited to payment of all premiums paid without interest less any policy loan and loan interest.

* Coverage amounts are based on age, tobacco status, and weekly premium. Amounts above Guaranteed/Contingent Issue are available with additional underwriting.

Premier Whole Life Insurance Sample Rates

Sample weekly rates for employee only, non-tobacco coverage, without any optional riders

Age	Weekly Rate for \$25,000 of Coverage
30	\$4.43
40	\$7.18
50	\$12.90

This brochure is a brief description of coverage and is not a contract. Read your policy and riders carefully for exact terms and conditions.

This policy has exclusions and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or ING Employee Benefits. Issued by ReliaStar Life Insurance Company, a member the ING family of companies. Administrative & Home Office: 20 Washington Avenue South, Minneapolis, MN 55401. Products and services offered through the ING family of companies. Policy Form #: RL-WL2-POL-07, Policy Form #RL-WL2-ADBR-08, CTR Rider RL-WL2-CTR-0, ABR Rider NP-B-ORD-AB-04; LTC Rider: RL-WL2-LTC-TB-07; ABR Rider: NP-B-ORD-AB-04-R add in ADBR rider # (not available in all states.)

Whole Life Insurance May Be Right for Your Family If You Have Recently:

- Increased your consumer debt
- Purchased a new home or car
- Had any children or included aging parents or other relatives in your financial responsibilities
- Evaluated the effect of inflation on your current life insurance coverage



Accident Insurance – Offered by ING Employee Benefits

Every member of your family is susceptible to an accident at any time, and the medical expenses associated with that accident may cause a financial burden.

Accident Insurance pays a benefit that can help you pay for out-of-pocket accident-related costs. Benefits are paid directly to you, and you can use this money as you see fit. You will receive a specified benefit amount for the following:

- Initial care, including ambulance services, emergency room visits and the initial doctor's office visit
- Follow-up care, including outpatient services and medical appliances
- Injuries, including burns, dislocations and fractures
- Catastrophic accidents, and
- Accidental death

You also receive an annual wellness benefit of \$100 in total for you and/or your enrolled spouse if you have certain health screening tests, such as mammograms, PSA tests, chest X-rays, and colonoscopies. The wellness benefit has a 30-day waiting period from the effective date of coverage. See your policy or a Benefit Counselor* for a complete list of covered tests.

*Licensed Insurance Producer

Accident Insurance May Be Right for Your Family If...

- You have an active family
- You are concerned about unexpected injuries
- You and/or your family members play sports
- A serious accident would create a financial burden for your family





Highlights: Accident Insurance

Plan Features	Benefit to You
Eligibility	Employees 18 years and older, Spouses ages 18 -74 and Child(ren) and Stepchild(ren) from birth through age 24. Age restrictions are waived for handicapped dependent children.
Coverage Options	You can insure yourself, your spouse and your dependent children. Spouse and Dependent Children coverage are issued as riders.
Benefit Payments	Accident Insurance pays you a specified amount, defined in the schedule of benefits, for certain services and conditions resulting from a covered accident.
Guaranteed Acceptance	You don't need to answer any medical questions to enroll.
Pre-existing Conditions	Pre-existing conditions don't apply to Accident Insurance.
Portability	Coverage is portable upon request, which means you may take the coverage with you if you leave employment or retire (subject to plan provisions).
Level Premiums	Rates do not increase as you age.

Accident Insurance Rates

Type of Coverage	Weekly Rate
Employee	\$3.41
Employee and Spouse	\$4.61
Employee and Child(ren)	\$5.77
Family	\$6.98





Schedule of Coverage: Accident Insurance

Benefits are for each covered person for each covered accident, unless otherwise indicated.

A. Initial Care:	
Ambulance - ground	80
Ambulance - air	400
Emergency room	120
Initial doctor visit	40
B. Accident Hospital Care	
Surgery - open abdominal, thoracic	800
Surgery - exploratory or without repair	80
Blood/plasma/platelets	240
Hospital admission	600
Hospital confinement (per day up to 365 days)	160
ICU confinement (per day up to 14 days)	320
Coma (duration of 14 or more consecutive days)	4,000
Transportation (per trip up to 3 trips per accident)	240
Family lodging (per day up to 30 days)	80
C. Follow-up Care	
Follow-up doctor treatment	40
Medical appliances	40
Physical therapy (per treatment up to 6 treatments)	20
Prosthetic device - one	400
Prosthetic device - 2 or more	800

D. Common Injuries	
Burns	
2nd degree - at least 36%	600
3rd degree -at least 9, less than 35 sq in	1,200
3rd degree - 35 or more sq in	8,000
Skin grafts	25% of burn benefit
Emergency dental work - crown	120
Emergency dental work - extraction	40
Eye injury - surgery	160
Eye injury - removal of foreign object	160
Torn knee cartilage - surgical repair	400
Torn knee cartilage - surgery with no repair or if cartilage is shaved	80
Laceration (total of all lacerations)	
Treated, no sutures	20
Sutures, up to 2"	40
Sutures, 2-6"	160
Sutures, over 6"	320
Ruptured disk - surgical repair	320
Tendon/ligament/rotator cuff - one, surgical repair	320
Tendon/ligament/rotator cuff - 2 or more, surgical repair	480
Tendon/ligament/rotator cuff - exploratory arthroscopic surgery with no repair	80
Concussion (diagnosed with x-ray, CAT scan and/or MRI)	80
Paralysis - quadriplegia	8,000
Paralysis - paraplegia	4,000



Dislocations (closed & open reduction)	
Hip joint	1,600 - 3,200
Knee	800 - 1,600
Ankle or foot bone(s) other than toes	640 - 1,280
Shoulder	240 - 480
Elbow	240 - 480
Wrist	240 - 480
Finger/toe	80 - 160
Hand bone(s) other than fingers	240 - 480
Lower jaw	240 - 480
Collarbone	240 - 480
Partial dislocations	25% of Closed Reduction Amount
Fractures (closed & open reduction)	
Hip	1,200 - 2,400
Leg	640 - 1,280
Ankle	240 - 480
Kneecap	240 - 480
Foot (excluding toes, heel)	240 - 480
Upper arm	280 - 560
Forearm, hand, wrist (except fingers)	240 - 480
Finger, toe	40 - 80
Vertebral body	640 - 1,280
Vertebral processes	240 - 480
Pelvis (except coccyx)	640 - 1,280
Coccyx	160 - 320
Bones of face, excluding nose	280 - 560
Nose	80 - 160
Upper jaw	280 - 560
Lower jaw	240 - 480
Collar bone	240 - 480

Rib or ribs	200 - 400
Skull - simple (except bones of face)	800 - 1,600
Skull - depressed (except bones of face)	2,000 - 4,000
Sternum	240 - 480
Shoulder blade	240 - 480
Chip fractures	25% of Closed Reduction Amount
E. AD&D	
Accidental Death	
Insured	20,000
Spouse	8,000
Children	4,000
Common Carrier	
Insured	40,000
Spouse	16,000
Children	8,000
Dismemberment	
Loss of both hands, both feet or the sight of both eyes	12,000
Loss of one hand or one foot and sight of one eye	12,000
Loss of one hand and one foot	12,000
Loss of one hand or one foot	6,000
Loss of two or more fingers or toes	1,200
Loss of one finger or toe	600
Catastrophic Accident*	
Insured	80,000
Spouse	40,000
Children	40,000

*Catastrophic benefit reduced by 50% at age 65 & 75% at age 70



How Accident Benefits Work

If you fall off your bicycle and fracture your wrist and tear a ligament in your knee:

Benefits paid:

- \$150 emergency room copay
- \$50 appliance (knee brace)
- \$300 fractured wrist
- \$400 surgical ligament tear repair
- \$50 follow-up appointment
- \$150 for six physical therapy sessions

Total benefit paid under policy: \$1,100

Exclusions

We will not pay benefits under this Policy for losses that are caused by or occur as the result of:

1. war or act of war, whether declared or undeclared;
2. riding in or driving any motor-driven vehicle in a race, stunt show or speed test;
3. operating, learning to operate, serving as a crew member of or jumping, parachuting or falling from any aircraft or hot air balloon, including those which are not motor-driven; does not include flying as a fare paying passenger;
4. engaging in hang-gliding, bungee jumping, parachuting, sailgliding, parasailing, parakiting or any similar activities;
5. participating or attempting to participate in an illegal activity;
6. committing or trying to commit suicide or injuring oneself, whether sane or not;
7. any Sickness or declining process caused by a Sickness;

8. practicing for or participating in any semi-professional or professional competitive athletic contests for which any type of compensation or remuneration is received;

9. having a work related injury, unless an On Job accident coverage type is shown on the Plan Summary for Policyholder;

10. an Accident occurring while the Covered Person for whom a claim is being made was operating a motorized vehicle while intoxicated. By intoxication, we mean the blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the Accident occurred; or

11. an injury that occurs while the insurance is not in force.

This is a brief outline of available benefits. Please refer to your certificate for exact terms and conditions. Benefits are for each covered person for each covered accident unless otherwise indicated. Plan may vary by state. This is a limited benefit policy. There is no coverage for hospital, medical-surgical or major medical expenses.

Policy form numbers, product availability, and specific provisions may vary by state. Insurance is issued and underwritten by ReliaStar Life Insurance Company, a member of ING. Policy Form Number: RL-ACC2005-POL, RL-ACC2005-SAR, RL-ACC32005-RCHILD.



MedSupport (Hospital Confinement Insurance) – Offered by Unum

Unum’s MedSupport Insurance is designed to supplement your health insurance. MedSupport can help employees pay for the out-of-pocket costs related to hospitalization, outpatient surgery, and emergency room treatment.

You may choose a benefit amount of \$500 to \$1,000 and no medical questions to answer if you apply when you are first eligible. The coverage amount for spouse must match employee coverage amount.

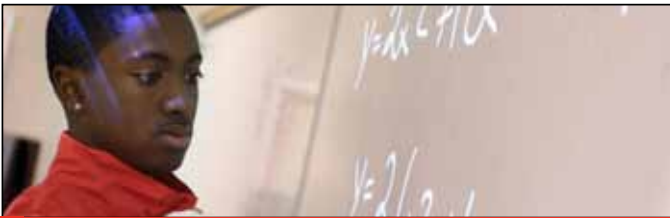
Optional Emergency Care Benefit Rider

- Emergency room visit - \$100 per visit
- Ambulance - \$100 per trip
- Air ambulance - \$500 per trip

The three benefit events above are independent of each other and payable separately. A maximum benefit of two visits/trips per covered person per calendar year is payable.

Highlights: MedSupport

Plan Features	Benefit to You
Eligibility	Employees and spouses, ages 17 through 64 and children birth through age 24
Coverage Options	Employee Only; Employee and Spouse; Employee and Children; Family
Benefit Amount	Hospital Confinement: \$500 or \$1,000 (Child coverage: matches employee and/or spouse coverage, up to \$1,000) Outpatient Surgery: Varies according to the actual procedure, but will never be less than \$250 or more than the Hospital Confinement benefit Medical Questions: None, if you apply when first eligible.
Re-occurrence Provision	If you are in the hospital more than once within 90 days for the same or a related covered condition, it’s considered the same stay and you will receive only one benefit payment.
Pre-existing Condition Limitation	Benefits will not be paid for a pre-existing condition if it occurs during the first 12 months after the coverage effective date. A pre-existing condition means a sickness or physical condition for which (in the 12 months before the coverage effective date) you or an insured family member received treatment or medical advice from a physician, took medicine, or had symptoms that would cause a person to seek medical treatment. Note: Those replacing in-force Intensive Care and/or Medical Bridge coverage during in the initial enrollment will be provided with a waiver of pre-existing condition exclusion.
Pregnancy Provision	Nine months after coverage becomes effective, pregnancy is considered as any other covered illness. The available monthly benefits will be paid upon fulfillment of the elimination period. Benefits will not be paid if the insured individual gives birth within nine months after the coverage becomes effective. However, medical complications of pregnancy may be considered as any other covered sickness, subject to the pre-existing condition limitation. Note: Those replacing in-force Intensive Care and/or Medical Bridge coverage during in the initial enrollment will be provided with a waiver of the pregnancy provision.



MedSupport Sample Rates

Sample weekly rates for employee only coverage, without the emergency care rider:

Ages	Weekly Rate for \$1,000 of Coverage
17-49	\$5.43
50-59	\$6.83
60-64	\$10.10

THIS IS A LIMITED POLICY.

This information is not intended to be a complete description of the insurance coverage available. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage, please refer to Policy Form L-21804 or contact your Unum representative.

MedSupport May Be Right for You If...

- You have a high medical insurance deductible and coinsurance requirements
- A hospital stay will create a financial burden for your family

MedSupport Insurance

Limitations/Exclusions

Please note: The definition of hospital does not include certain facilities. See your contract for details.

Unum will not pay benefits on any covered person for injuries received in accidents or for sickness which are caused by or occur as the result of:

- addiction to alcohol or drugs, except for drugs taken and prescribed by a physician;
- giving birth within the first nine months after the coverage effective date of this policy as a result of a normal pregnancy, including cesarean. Complications of pregnancy will be covered to the same extent as any other covered sickness;

- treatment for dental care or dental procedures, unless treatment is the result of a covered accident;
- undergoing elective procedures or cosmetic surgery. This includes procedures for complications arising from elective or cosmetic surgery. This does not include congenital birth defects or anomalies of a child; or reconstructive surgery related to a covered sickness or injuries received in a covered accident;
- participating or attempting to participate in an illegal activity and/or being incarcerated in a penal institution;
- having a pre-existing condition as defined and limited by the policy;
- having a psychiatric or psychological condition including but not limited to affective disorders, neuroses, anxiety, stress and adjustment reactions. However, Alzheimer's disease and other organic senile dementias are covered under the policy;
- committing or trying to commit suicide or self-inflicted injuries intentionally, whether sane or not;
- war or act of war, whether declared or undeclared; or
- having routine well care, treatment or examinations including, but not limited to, a newborn child following birth.

Terminations

The policy will terminate on the earliest of the following:

- written request by you to terminate the policy;
- failure to pay the premiums for the policy subject to the grace period allowed; or
- named insured's death.

CU-12687

Underwritten by: Provident Life and Accident Insurance Company, Chattanooga, TN

Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.



SMART Benefits Decisions

Visit cms.hrintouch.com

In compliance with federal law, Charlotte-Mecklenburg Schools administers all education programs, employment activities and admissions without discrimination against any person on the basis of gender, race, color, religion, national origin, age or disability.