




Kingsville Independent School District

Dolores N. Hernandez
Director of Personnel



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Kingsville ISD's Contract for Group Health Coverage

Nondiscrimination: The Kingsville I. S. D. does not discriminate on the basis of age, race, religion, color, national origin, sex, or disability in providing education services, activities, and programs, in accordance with Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Educational Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.

EXCESS LOSS SCHEDULE OF BENEFITS

Applies to Policy Period: from 09-01-2009 to 09-01-2010

7. Reimbursement Option:

Covered Expenses incurred on or after the Policy Effective Date and paid during the Policy Period with:

Run-in Period 3 months Run-in Limit \$ Unlimited
Run-out Period 0 months Run-out Limit \$ N/A

8. Individual Excess Loss Terminal Provision applicable? Yes No

9. Individual Excess Loss Advantage Provision applicable? Yes No

10. Individual Advantage Deductible applies toward the Aggregate Attachment Point? Yes No

11. Individual Excess Loss Transplant Provision Yes No

D. Aggregate Excess Loss Insurance Yes No

1. Covered Expenses:

- Medical excluding all Prescription Drugs
- Medical including Prescription Drugs defined as **ONE** of the following:
 - Rx Card and Mail Order Rx Card Only Rx Mail Order Only **OR**
 - Rx as part of Medical Plan subject to a Deductible and Coinsurance
- Vision
- Dental
- Short-Term Disability
- Other Hospital Indemnity Plan

2. Aggregate Attachment Point will be set by Symetra.

3. Symetra's Reimbursement Percentage

100 % of Covered Expenses in excess of the Aggregate Attachment Point.

4. Aggregate Reimbursement Maximum per Policy Period \$ 1,000,000

5. Monthly Aggregate Accommodation Provision applicable? Yes No

6. Reimbursement Option:

Covered Expenses incurred on or after the Policy Effective Date and paid during the Policy Period with:

Run-in Period 3 months Run-in Limit \$ Unlimited
Run-out Period 0 months Run-out Limit \$ N/A

SYMETRA

FINANCIAL

Symetra Life Insurance Company
777 108th Avenue NE, Suite 1200
Bellevue, Washington 98004-5135

EXCESS LOSS SCHEDULE OF BENEFITS

A. Participating Employer: Kingsville ISD

Policy Number: 16-011010-00

Effective Date of Coverage: September 1, 2007

Participating Employer Anniversary Date: September 1st of each year beginning in 2008

Premium Due Date: Premium is due on the Effective Date of Coverage and the first of each month beginning with October 1, 2007.

Enrollment (at the beginning of the Policy Period):

Single - Individual	<u>329</u>	Single - Aggregate	<u>533</u>
Family - Individual	<u>109</u>	Family - Aggregate	<u>109</u>

B. This Schedule of Benefits applies to the Policy Period: from 09-01-2009 to 09-01-2010

C. Individual Excess Loss Insurance Yes No

1. Individual Deductible per Covered Unit \$ 75,000

2. Alternate Individual Deductibles applicable?

Yes (See Excess Loss Alternate Reimbursement Endorsement) No

3. Covered Expenses

Medical excluding all Prescription Drugs

Medical including Prescription Drugs defined as **ONE** of the following:

Rx Card and Mail Order Rx Card Only Rx Mail Order Only **OR**

Rx as part of Medical Plan subject to a Deductible and Coinsurance

Other _____

4. Symetra's Reimbursement Percentage

100 % of Covered Expenses in excess of the Individual Deductible.

5. Individual Lifetime Reimbursement Maximum:

\$ 1,000,000 per Covered Unit

6. Premium Rates

Covered Units

Single	<u>\$63.77</u>
Family	<u>\$153.38</u>