Your Employee Benefits Proposal

Prepared for: Sierra Bullets

Presented by: THE ROBERT E MILLER GROUP

Proposal Prepared on:
June 9, 2026

Hospital Indemnity Insurance

Proposed Effective Date:
September 1, 2026

Standard Insurance Company

Proposed Effective Date
September 1, 2026

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Hospital Indemnity Insurance

A trip to the hospital can be costly - and many employees aren't prepared for the out of pocket expenses that come with a hospital stay, even with medical coverage. Hospital Indemnity insurance pays cash benefits to employees in the event of a hospitalization, regardless of treatment costs or other insurance coverage. It's an affordable way for employees to keep their finances on track.

Covered Members

A regular employee of the Employer working 30 hrs per week

	HSA Low - Plan 1	HSA Medium - Plan 2	HSA High - Plan 3
Minimum Employee Participation	10 Lives	10 Lives	10 Lives
Employer Contribution	0%	0%	0%
Policy Situs State	MO	MO	MO
Ages Eligible for Coverage	18-99 for Employee and Spouse; Birth to age 26 for children	18-99 for Employee and Spouse; Birth to age 26 for children	18-99 for Employee and Spouse; Birth to age 26 for children
Termination Age	None for Employee and Spouse; 26 for children	None for Employee and Spouse; 26 for children	None for Employee and Spouse; 26 for children

Plan Design

	HSA Low - Plan 1	HSA Medium - Plan 2	HSA High - Plan 3
Hospital Confinement Benefit	$150/Day	$250/Day	$350/Day
Number of Covered Days per Hospital Confinement	15 Days	15 Days	15 Days
Hospital Admission	$500/Calendar year	$1000/Calendar year	$1500/Calendar year
Critical Care Unit (CCU) Confinement - Pays in addition to Hospital Confinement benefit	$150/Day	$250/Day	$350/Day
Number of Covered Days per CCU Confinement	15 days	15 days	15 days
Critical Care Unit (CCU) Admission	$500/Calendar year	$1000/Calendar year	$1500/Calendar year
Health Maintenance Screening	$50	$50	$50
Annual Open Enrollment	Included	Included	Included
Pre-existing Limitation	None	None	None

Additional Plan Design Details

- Premium is waived if you are confined to a hospital for more than 30 days.
- Critical Care Confinement pays in addition to the Hospital Confinement benefit.
- Critical Care Admission pays in addition to the Hospital Admission benefit.
- The Health Maintenance Screening Benefit pays an annual benefit when the insured receives one of the twenty-two covered health screening tests, including novel infectious disease testing (including COVID-19), lipid panel, mammography, and colonoscopy.
- Auto-pay is available for the Health Maintenance Screening benefit when covered screenings are completed by employees at their employer's Health Fair.
- Provides coverage for injuries and illnesses, including pregnancy.
- Portability is automatically included. Employees are able to take their Hospital Indemnity coverage with no change in coverage.
- Benefits paid under the Hospital Indemnity insurance policy when purchased with employee post-tax income are excluded from claimant gross income under current federal tax law.
- Evidence of insurability is not required at initial enrollment or during the annual open enrollment period. Members and dependents that do not enroll when they are first eligible may enroll during the annual open enrollment period.
- Plans that include the Hospital Confinement and/or CCU Confinement Benefit are compatible with an Health Savings Account (HSA). Plans that include the Hospital Admission Benefit and/or CCU Admission Benefit may not be compatible with an HSA. Consult your tax advisor for advice.
- This is a limited benefit policy.

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Cost

	Monthly Premium	Monthly Premium	Monthly Premium
	HSA Low - Plan 1	HSA Medium - Plan 2	HSA High - Plan 3
Employee	$10.33	$18.15	$25.96
Employee and Spouse	$17.68	$30.87	$44.06
Employee and Child(ren)	$14.99	$26.08	$37.17
Employee and Family	$26.40	$46.13	$65.87

- To convert monthly rates to deductions, multiply by twelve, then divide by the number of deductions per year and round to two decimals.

Assumptions

- This proposal assumes 120 eligible lives.
- Proposal assumes coverage is not currently inforce.
- Applicants must have comprehensive health coverage in order to be eligible to apply for Hospital Indemnity insurance.

Conditions

- No competing Hospital Indemnity plan will be offered on payroll deduction.
- Rates are Guaranteed for 24 months.
- Proposed rate includes electronic documents. Printed certificates are available for an additional cost.
- New hires will be enrolled on a perpetual basis.

Exclusions

- Benefits are not payable if the injury or sickness was caused or contributed to by any of the following:

  – War or act of war.

  – Attempted suicide or other intentionally self-inflicted injury while sane.

  – Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or riot.

  – Alcoholism, drug abuse, misuse of alcohol or any other substance, the voluntary use or consumption of any drug or alcohol in excess of the legal limit in the state in which an injury occurred, or taking of drugs unless used or consumed according to the directions of a health care provider. This exclusion does not apply to a Sickness.

  – Travel or flight in or on any aircraft (certain exceptions apply, including as a fare paying passenger on a regularly scheduled commercial flight).

  – Dental care or dental procedures, unless treatment is the result of an Injury.

  – Routine newborn nursing or well-baby care.

  – Hospital confinement of a newborn child following the child's birth unless the confinement is a result of an injury or sickness.

Exclusions (continued)

– Riding in or driving any automobile in a race, stunt show, or speed test.

– Surgery or other procedure which is directed at improving the insured's appearance, unless such surgery or procedure is necessary to correct a deformity or to restore bodily function resulting from an injury or sickness.

Producer Compensation Disclosure

We recognize the valuable role of insurance advisors, consultants and brokers ("producers") in helping their clients design an employee benefits program, and we support reasonable and fair compensation for these services. Producers may be eligible to receive compensation from The Standard.

The commission quoted in this proposal are noted below. Additionally, fees for administrative, marketing or consulting services may apply. If applicable, fees are noted below.

Level 15% commission included for Hospital Indemnity Insurance Plan 1, Plan 2, Plan 3.

Unless participation is declined by the producer or client, contingent compensation is additional compensation that may also be paid and is dependent on the satisfaction of one or more minimum requirements, such as a specified amount of new premium volume or persistency in connection with the producer's block of business. For information about our customary producer rewards program visit https://www.standard.com/financial-professional/insurance-benefits/compensation. Some producers may have a contingent compensation arrangement that differs from our customary program. Please consult with your producer for additional details.

About This Employee Benefits Proposal

We appreciate the opportunity to provide you with this benefit and cost summary proposal from The Standard. This document outlines certain important features of the group insurance coverages available. This is not a contract or an offer to contract for such coverages. Detailed information about other important features of the coverage proposed is available on request. Just ask your broker/consultant or your representative at The Standard.

A completed application must be submitted before a group can be considered for coverage. Insurance will be effective after the application is accepted by The Standard. If approved, we will issue a contract containing our customary language. It will not duplicate policy language from another carrier. The group contract will contain provisions and defined terms not described in this Employee Benefits Proposal. The group contract will control if there are discrepancies between it and this proposal.

This benefit and cost summary proposal expires on September 7, 2026, unless replaced or withdrawn by The Standard.

The proposed premium rate and plan design for each coverage are based on the underwriting data received by The Standard. Final premium rates and plan provisions will be determined by The Standard on the basis of: applicable state laws, policyholder contributions, confirmation of occupations, the actual composition of the group of persons who will become insured and our current underwriting rules and practices.

Financial Strength Ratings

For information about our Financial strengths ratings visit: https://www.standard.com/about-standard/company/financial-strength

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.