



# NATIONAL GUARDIAN LIFE INSURANCE COMPANY

(called "We", "Our", and "Us")

2 East Gilman Street Madison, Wisconsin 53701

## GROUP VISION PPO INSURANCE MASTER POLICY NON-PARTICIPATING

Underwritten by:  
National Guardian Life Insurance Company  
Two East Gilman Street  
P.O. Box 1191  
Madison, WI 53701-1191

Administrator:  
Superior Vision Services, Inc.  
11090 White Rock Road, Suite 175  
Rancho Cordova, CA 95670

In return for the application, which is attached, and payment of premium as it becomes due, National Guardian Life Insurance Company (called "We," "Our," and "Us") agrees to pay the benefits described in the Policy.

This Policy is issued to the Policyholder. It takes effect at 12:01 a.m. at the Policyholder's principal address shown on the application on the Policy Effective Date. The Effective Date is shown on the Policy Schedule.

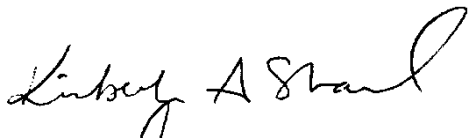
This Policy may be continued in force by payment of premium at the rates We establish until the insurance ends as provided.

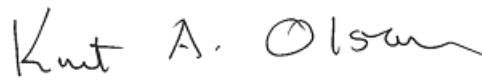
**The following are made part of this Policy: the provisions of the attached Certificates; Schedules of Benefits; all riders; all endorsements; and all amendments issued on and after the Effective Date.**

This Policy is governed by the laws of the jurisdiction shown below.

### POLICY SCHEDULE:

<b>POLICYHOLDER:</b>	<b>Chatham County Schools</b>
<b>GROUP POLICY NUMBER:</b>	<b>27804</b>
<b>POLICY EFFECTIVE DATE:</b>	<b>Initial – July 1, 2006; Revised Certificate – July 1, 2021</b>
<b>ANNIVERSARY DATE:</b>	<b>July 1, 2024</b>
<b>JURISDICTION:</b>	<b>North Carolina</b>
<b>PREMIUM DUE DATE:</b>	<b>1<sup>st</sup> of every Month</b>
<b>COVERAGE PROVIDED:</b>	<b>See Incorporated Certificate's Schedule of Benefits</b>
<b>INITIAL TERM:</b>	<b>12 Months from Initial Effective Date</b>

  
Kimberly A. Shaul, Secretary

  
Knut A. Olson, President

**THIS POLICY IS NOT A MEDICARE SUPPLEMENT POLICY. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare, which is available from the company.**

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## PART I: PREMIUMS

### A. PREMIUM SCHEDULE

**Minimum Number of Insureds:** 10

Refer to the attached Group Application for premium rate information.

**B. PAYMENT OF PREMIUMS:** The premiums due under this Policy are payable in advance directly to Us at the Administrator's Office. The first premium is due on the Effective Date of this Policy. Premiums after the first are due on the Premium Due Date shown on the face page of this Policy.

The payment of any premium will not maintain the insurance in force beyond the day next following the Premium Due Date, except as provided under the GRACE PERIOD provision.

### C. RIGHT TO CHANGE PREMIUM RATES:

We have the right to change the premium rates on any Premium Due Date after the Initial Term. After the Initial Term, We will not increase the premium rates more than once in any twelve (12)-month period. We will notify the Policyholder in writing at least forty-five (45) days before any increase in premium rates. This is subject to the Premium Adjustments provision, as stated below.

**D. PREMIUM ADJUSTMENTS:** The Company may adjust the premium rate on the Policy Anniversary Date, including during any applicable premium rate guarantee period, if any one of the following occurs:

1. The terms of this Policy change;
2. The number of Insureds increase or decrease by more than 15% since the later of the Policy Effective Date and the date of the last renewal of the Policy;
3. Coverage is reinstated following failure to pay premium during the Grace Period;
4. An acquisition, merger, consolidation, divestiture, corporate reorganization or purchase or sale of assets affecting, increasing or decreasing by 15% or more the number of Insureds.
5. Any federal, state, or other law or regulation is enacted, adopted, amended, or requiring implementation that affects: (a) Our benefit obligations under this Policy; or (b) any monetary assessments, or changes in those assessments, We are required to pay.

**E. PREMIUM CALCULATION:** The total premium for insurance coverage under this Policy is the sum of the premiums for each Insured.

**F. GRACE PERIOD:** A Grace Period of 31 days (without interest charge) is granted for the payment of any premium due after the first. This Policy will continue in effect during this period unless the Policyholder has given written notice to Us that the insurance under this Policy is to be ended on the first day before the Grace Period would otherwise start. If the premium is not paid by the end of the Grace Period, all insurance under this Policy will end on the last day of the Grace Period. The Policyholder will owe Us all premiums then due and unpaid including the premium for the Grace Period.

If the Policyholder gives Us written notice that insurance under this Policy is to be ended during the Grace Period, all insurance will end on the date We receive the written notice or the date specified, if later.

The Policyholder will owe Us the pro-rata premium for the time the insurance was in effect during the Grace Period.

**G. REINSTATEMENT:** If any premium is not paid by the end of the Grace Period, subsequent acceptance of premium by any agent who is authorized by Us to accept the premium, without requiring an application for reinstatement, shall reinstate the Policy. If We or Our agent require an application for Reinstatement and issue a conditional receipt for the premium tendered, the policy will be reinstated upon the approval of the application by Us, or lacking such approval, upon the 45th day following the date of such conditional receipt unless We have previously notified the Insured in writing of disapproval of the application.

The reinstated Policy will only provide benefits for covered expenses incurred after the date of Reinstatement. In all other respects, We, the Policyholder, and the Insured shall have the same rights under the Policy immediately before the due date of the defaulted premium, subject to any provisions endorsed or attached to the Policy in connection with this Reinstatement. Any premium accepted in connection with the Reinstatement will be applied to a period for which premium has not been previously paid, but not to any period more than 60 days prior to the date of Reinstatement.

## **PART II: WHEN INSURANCE UNDER THIS POLICY ENDS**

By giving the Policyholder written notice at least 60 days in advance, We have the right to end coverage at the end of the Initial Term or on any Premium Due Date.

All insurance or any part may be ended on any date by mutual agreement between the Policyholder and Us. In the event of such cancellation by either Us or the Policyholder, We shall promptly return on a pro rata basis any unearned premium paid as required by the law of the state in which the Policy is issued. The Policyholder shall promptly pay on a pro rata basis the earned premium which has not been paid, if any. Such cancellation shall be without prejudice to any claim originating prior to the effective date of such cancellation.

After the Initial Term, stated in the Policy Schedule, the Policy shall continue on a month-to-month basis. It will automatically renew on the first day of each renewal period unless either We or the Policyholder has given to the other at least 60 days advance written notice of cancellation.

Insurance will end as provided above without the consent of, or notice to, any Insured or beneficiary.

## **PART III: GENERAL PROVISIONS**

**A. ENTIRE CONTRACT:** The entire contract consists of:

1. this Policy;
2. the application of the Policyholder;
3. the provisions shown in the Certificate;
4. the Member enrollment forms; and
5. riders and endorsements, if any, adding or changing the provisions of the Policy or Certificate.

A copy of the Policyholder's application is attached to this Policy on the date it is signed. All statements made in the applications, in the absence of fraud, are representations and not warranties. No statement made by an Insured under this Policy will be used to void insurance or deny a claim unless a copy of the statement is or has been given to that Insured or to Their beneficiary, if any.

**B. INCONTESTABILITY:** This Policy will be incontestable, except for non-payment of premium, after it has been in force for two years.

**C. CHANGES IN POLICY:** The terms of this Policy can be changed only by written agreement between the Policyholder and Us. Agreement for Us can only be made by Our President or Our Secretary. Any changes will be made without the consent of, or notice to, any Insured or beneficiary, if any. No agent has authority to make this Policy or to change, alter or amend any of its terms or provisions in any way.

**D. CONFORMITY WITH LAW:** If any provision of this Policy is contrary to the law of the jurisdiction in which it is delivered, such provision is hereby amended to conform to that law.

**E. POLICY NON-PARTICIPATING:** This Policy is not entitled to share in the surplus earnings of Our company.

**F. INFORMATION TO BE FURNISHED BY POLICYHOLDER:** The Policyholder will furnish Us with all information which pertains to this Policy. Failure to furnish Us with such information without good and sufficient cause will permit Us to terminate this Policy. We may inspect at all reasonable times (while this Policy is in effect and thereafter until all rights and payments have been made) any records of the Policyholder which have a bearing on the insurance or premiums.

**G. CLERICAL ERROR:** Clerical error (whether by the Policyholder or Us) in keeping records having to do with this Policy, or delays in making entries on the records, will not void the insurance of any person if that insurance would otherwise have been in effect. Such clerical error will not extend the insurance of any person if that insurance would otherwise have ended or been reduced as provided by this Policy.

When a clerical error is found, premiums and benefits will be adjusted based on the true facts and this Policy.

**H. POLICYHOLDER NOT AGENT:** The Policyholder will in no event be considered Our agent for any purpose under this Policy.

**I. ASSIGNMENT:** No assignment of this Policy is binding upon Us unless We agree to it in writing and not until it is filed with Us at Our Home Office.

**J. INDIVIDUAL CERTIFICATES:** We will issue to the Policyholder, to make available to each Member under this Policy, a Certificate of insurance that describes the essential features of this Policy. The Certificate may be made available electronically. The word Certificate includes Certificate riders and Certificate supplements, if any.

**K. ADDITIONAL INSUREDS:** The following will be added to the group originally insured:

1. All new persons becoming eligible to and applying for insurance in such group or class, including new members of a family; and
2. Any persons required to be provided coverage under federal law who apply for insurance in such group or class.

**L. LEGAL ACTIONS:** No legal action may be brought to recover on the Policy before sixty (60) days after written Proof of Loss has been furnished as required by the Policy. No such action may be brought after three (3) years from the time written Proof of Loss is required to be furnished.