

Group Insurance Agreement

This Agreement is entered into by and between Standard Insurance Company (The Standard), an Oregon Corporation, and Lee County Board of County Commissioners (County).

Whereas, Lee County Board of County Commissioners issued a request for proposal ("RFP") soliciting providers of group basic and voluntary life insurance;

Whereas, Standard Insurance Company was selected to provide group basic and voluntary life insurance in response to the RFP;

Now therefore, The Standard and the County agree as follows:

1. The Standard will issue a group insurance policy providing basic and voluntary life insurance coverages.
2. The County will administer the group insurance policy issued by The Standard in accordance of the terms and conditions of such group insurance policy.
3. This Agreement between The Standard and the County shall consist of the following documents:
 - a. The RFP and any related addenda
 - b. The Terms and Conditions contained within the RFP
 - c. The Standard's response to the RFP
 - d. The Standard's group basic and voluntary life insurance policy and amendments attached hereto and made a part of this Agreement as Exhibit A.

In the event of conflict, the documents will be applied in the above order, provided, however, that the terms and conditions of The Standard's group insurance policy shall govern eligibility for insurance and benefits and The Standard's right to modify, terminate or re-rate the group insurance policy.

4. Consistent with the terms of its proposal, The Standard agrees to diligently provide all the group insurance life insurance coverage requested by the RFP. Except as modified in writing by the mutual agreement of the parties, The Standard shall comply strictly with all the terms and conditions of Solicitation No. #RFP220099CJV, a copy of which is on file with the County's Department of Procurement Management and is deemed incorporated into this Agreement.
5. The Standard and the County each agree that the individuals executing this agreement have been duly granted the authority to enter contracts on behalf of each party.

IN WITNESS WHEREOF, the parties have executed this Group Insurance Agreement as of the date last below written.

WITNESS:

STANDARD INSURANCE COMPANY

Signed By: Karen Hawks

Signed By: CrisDee Plambeck

Print Name: Karen Hawks

Print Name: CrisDee Plambeck

Title: AVP Product and Business Development

Date: 11/02/2022



LEE COUNTY

BOARD OF COUNTY COMMISSIONERS
OF LEE COUNTY, FLORIDA

BY: Brian Han
CHAIR

DATE: 12/10/22

ATTEST:
CLERK OF THE CIRCUIT COURT
Clerk

BY: [Signature]
Deputy Clerk

APPROVED AS TO FORM FOR THE RELIANCE
OF LEE COUNTY ONLY:

BY: [Signature]
OFFICE OF THE COUNTY ATTORNEY



Request for Group Insurance Amendment

Standard Insurance Company
900 SW Fifth Avenue
Portland, OR 97204-1282

Employee Benefits Consultant: Jarod Hayer
Employee Benefits Service Representative: Dayton Baird
Employee Benefits Sales and Service Office: Tampa

Policyholder: Lee County Board of County Commissioners
Group Number: 164657

As an authorized representative of the Employer, I request that Standard Insurance Company ("The Standard") amend the above Employer's coverage under the Group Policy to make the following change(s):

- o Change the waiting period to 1st of the month following date of hire
- o Remove Class 3 on the Life coverages.

I request that the amendment become effective on 07/01/2022. I understand that the amendment will not become effective unless approved and issued by The Standard.

I request that the amendment be approved by The Standard subject to The Standard's usual underwriting requirements, including, if applicable, Evidence of Insurability or a Pre-existing Condition provision.

I understand that the amendment, if approved by The Standard, will be issued in the policy language customarily used by The Standard.

I understand that any increase in Insurance for a Member who is not Actively At Work all day on the Member's last regular work day before the scheduled effective date of the amendment will be deferred until the first day after the Member completes one full day of Active Work.

I request that the amendment, if approved and issued by The Standard, become effective by its terms without any further acceptance by the Employer, and that a copy of this Request for Group Insurance Amendment form be attached to and made a part of the amendment.

Sign Name: Brian Hamman Title: CHAIR
Authorized Representative

Print Name: BRIAN HAMMAN Date: 12/10/22

**Approved as to Form for the
Reliance of Lee County Only**

1 of By: Ardena Jones 6/16/2022 6:21 AM
Office of the County Attorney



Request for Group Insurance Amendment

Standard Insurance Company
900 SW Fifth Avenue
Portland, OR 97204-1282

Employee Benefits Consultant: Jarod Hayer
Employee Benefits Service Representative: Dayton Baird
Employee Benefits Sales and Service Office: Tampa

Policyholder: Lee County Board of County Commissioners
Group Number: 164657

As an authorized representative of the Employer, I request that Standard Insurance Company ("The Standard") amend the above Employer's coverage under the Group Policy to make the following change(s):

- Active Basic Life and AD&D rate will be .162/.017
- Retiree Life rate will be = 2.67.
- Rates will be guaranteed for three years.
- Employee Additional Life GI will increase to \$300,000
- For January 1, 2023 enrollment there will be a full open enrollment on employees and spouses, not to exceed the GI.
- For subsequent annual enrollments (1/1/24 and beyond) employees and spouses, eligible or enrolled, may increase their coverage by \$10,000, not to exceed the GI, provided they have not been prior declined by The standard as a member of Lee County BOCC.

I request that the amendment become effective on 01/01/2023. I understand that the amendment will not become effective unless approved and issued by The Standard.

I request that the amendment be approved by The Standard subject to The Standard's usual underwriting requirements, including, if applicable, Evidence of Insurability or a Pre-existing Condition provision.

I understand that the amendment, if approved by The Standard, will be issued in the policy language customarily used by The Standard.

I understand that any increase in Insurance for a Member who is not Actively At Work all day on the Member's last regular work day before the scheduled effective date of the amendment will be deferred until the first day after the Member completes one full day of Active Work.

I request that the amendment, if approved and issued by The Standard, become effective by its terms without any further acceptance by the Employer, and that a copy of this Request for Group Insurance Amendment form be attached to and made a part of the amendment.

Sign Name: Brian Hamman Title: CHAIR
Authorized Representative

Print Name: Brian Hamman Date: 12/10/22

Approved as to Form for the
Reliance of Lee County Only

By: Andrea Jace
Office of the County Attorney