

Disclosures

Disability Income Benefits are offered under Group Accident Only Insurance Policy/Certificate Form Series MP-1400/GC-1400, underwritten by Guarantee Trust Life Insurance Company. The policy is issued to Health Depot Association (HDA) and includes the following: exclusions, limitations, reductions of benefits, and terms of renewal and cancellation. Subject to state availability, variability, and GTL's right to increase premium rates.

Cancellation/Termination of Benefits/Renewability: Coverage terminates when HDA terminates the policy, your membership ceases, insurance ceases for your class, for non-payment of premium by HDA, or the date of fraud or misrepresentation of a material fact. The group policy terminates for non-payment of premium, if group participation requirements are not met or on any premium due date for any of the following reasons: fraud or misrepresentation of a material fact; failure of HDA to provide required information; or at GTL's option with 30 days notice. Notice of termination provided to HDA is considered notice of termination to all members and will not be sent to you individually by GTL. The policy automatically renews each policy anniversary until cancellation/termination.

GTL does not provide nor is affiliated with the discount programs provided as a part of membership in HDA.

Member Only coverage - we are not offering it to dependent children or spouses.

The following monthly rates apply for the coverage underwritten by Guarantee Trust Life Insurance Company as part of your membership in the HD BasicShield membership. The rates by plan are: Level 1-\$125 Disability Income; Member = \$1.08. Level 2-\$250 Disability Income; Member = \$1.67.

Exclusions & Limitations

The Policy does not provide benefits for:

- Treatment, services or supplies
 - Are not Medically Necessary, as determined by the treating Doctor;
 - Are not prescribed by a Doctor as necessary to treat an Injury;
 - Are determined to be Experimental/Investigational in nature;
 - Are received without charge or legal obligation to pay;
 - Are received from persons employed or retained by any Family Member, unless otherwise specified; or unless the treatment, services, or supplies are received from a dentist licensed in Texas;
 - Are not specifically listed as Covered Charges in the Policy.
- Injury by acts of war, whether declared or not.
- Injury received while traveling or flying by air, except as a fare-paying passenger and not as a pilot or crew member, on a regularly scheduled commercial airline.
- Injury covered by Worker's Compensation, Employer Liability law or Occupational Disease Act or Law. Dental treatment, except as specifically stated.
- Injury sustained while committing or attempting to commit a felony.
- Prescription Drugs except as specifically stated.
- Suicide or attempted suicide while sane or insane.
- Intentionally self-inflicted Injury.
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state or jurisdiction in which the Injury occurs.
- Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Doctor.
- Injury sustained while participating in or practicing for any professional, intercollegiate or club sports activity, except as specifically provided.
- Injury which occurs while a Covered Person is on active duty service in any armed forces. Reserve or National Guard active duty for training is not excluded unless it extends beyond 31 days.
- Injury sustained flying in an ultra-light, hang gliding, parachuting or bungee-cord jumping, by flight in a space craft or any craft designed for navigation above or beyond the earth's atmosphere.
- Injury sustained while driving or riding on vehicles for off-road use including but not limited to all-terrain vehicles (ATV's).
- Injury sustained where a Covered Person is the operator and does not possess a current and valid motor vehicle operator's license, except in a Driver's Education Program.
- Treatment in any Veteran's Administration or federal Hospital, except if there is a legal obligation to pay.
- Cosmetic surgery, except for reconstructive surgery on an injured part of the body.
- Covered Charges incurred outside of the United States or its possessions.
- Competing in motor sports races or competitions;
- Competing in water sports races or competitions;
- Testing cars/trucks on any racetrack or speedway;
- Handling, storing or transporting explosives;
- Scaling up cliffs or mountain walls; Spelunking (exploring caves);
- Handling or working with dangerous animals.
- Injury sustained while water skiing or surfboarding; Injury sustained while snow skiing or snowboarding;
- Injury sustained while roller blading or skateboarding; Injury sustained while participating in a rodeo.
- Reinjury or complications of an Injury caused or contributed to by a condition that existed during the 12 months before the Covered Person's effective date.
- Repetitive motion injuries, strains, hernia, tendonitis, bursitis and heat exhaustion not related to a specific Injury.

Please see certificates for state specific exclusions and limitations.

Notice to MA consumers: This program does not meet the minimum creditable coverage requirements under M.G.L. c. 111M and 956 CMR 5.00.