



---

**Policyholder:**

BAYCARE HEALTH SYSTEMS  
1035 KEPLER DR  
GREEN BAY, WI 54311-8320

**POLICY 19328-001**

01/01/2026 - 12/31/2026

The rates associated with this legal plan are:

Monthly Rate: \$19.54

Annual Rate: \$234.48

This document is comprised of two portions – an insurance contract and a service plan which creates the legal service plan offered to BayCare Health Systems employees. Each portion of the plan has a separate rate associated with it. The rate employees pay is calculated by combining the two rates.

To calculate the correct per-pay-period rate, begin with the total annual rate and divide by the number of pay periods during the year. This will equal the amount of your payroll deduction.

## **Group Legal Insurance Policy and Service Plan**

**Important:**

For purposes of the BayCare Health Systems policy, the **Policyholder** has defined eligible dependents to mean: The plan member's spouse or both same and opposite sex domestic partner is covered. In addition, the plan member's children until the end of the month when they reach age 26 if married or unmarried are covered.

Policy Number: 19328-001

**ARAG INSURANCE COMPANY**  
**500 Grand Avenue, Suite 100**  
**Des Moines, Iowa 50309**  
**GROUP LEGAL EXPENSE INSURANCE POLICY**  
**DECLARATIONS**

1. Name of **Policyholder**, Address

BAYCARE HEALTH SYSTEMS  
1035 KEPLER DR  
GREEN BAY, WI 54311-8320

2. Policy Period

The term of this Policy shall be from January 1, 2026 to December 31, 2026 Standard Time at the address of **Policyholder**

3. Premium

\$19.20 monthly Composite rate per **Named Insured** and eligible dependents

4. Eligible persons

The Policyholder determines who is eligible to enroll, please contact your benefits administrator for information.

5. Policy Index

BENEFITS.....	As Endorsed
DEFINITIONS.....	4
AGREEMENT.....	6
EXCLUSIONS.....	6
CONDITIONS.....	6

6. Benefits

PULDRIVP2_16	05/16	Driving Privilege Protection
PULDRVPRST2_16	05/16	Driving Privilege Restoration
PULHABEAS_16	05/16	Habeas Corpus Proceedings
PULMNTFC2_16	05/16	Minor Traffic - Broad (excluding DWI-related)
PULPARENTAL_16	05/16	Parental Responsibilities
PULPROPREF1_16	05/16	Refinancing - Primary Residence
PULPURCH_16	05/16	Purchase of Real Estate
PULSALE_16	05/16	Sale of Real Estate
PULTRUSTS1_16	05/16	Irrevocable Trusts
PULTRUSTS2_16	05/16	Revocable Living Trusts
PULWILL_16	05/16	Wills & Durable Power of Attorney
PULHOMEEQUITY1_16	05/16	Home Equity Loan - Primary Residence
PULHOMEEQUITY2_16	05/16	Home Equity Loan - Secondary Residence

PULPROPF2_16	05/16	Refinancing - Secondary Residence
PULDOCREV_16	03/18	Document Review
PULDOMESTIC2_16	03/18	Protection from Domestic Violence - Named Insured
PULDOMESTIC3_16	03/18	Protection from Domestic Violence - Insured
PULBANK3_16	04/19	Bankruptcy
PULIRS3_16	04/19	IRS Collection Defense
PULIRS4_16	04/19	IRS Audit Protection
PULPROPT3_16	04/19	Purchase/Sale of Secondary Residence
PULSTATELOCALTAX3_16	04/19	State and Local Tax Collection Defense
PULSTATELOCALTAX4_16	04/19	State and Local Tax Audit
PULDOCPREP3_16	04/19	Document Preparation
PULJUVNL4_16	04/19	Juvenile Court
PUELDERLAWADVICE_16	12/19	Advice for Parents and Grandparents
PUELDERLAWDOCPREP_16	12/19	Document Preparation for Parents and Grandparents
PUELDERLAWDOCREV_16	12/19	Document Review for Parents and Grandparents
PUELDERLAWWILL6_16	12/19	Wills & Durable Power of Attorney for Parents and Grandparents
PULNAME2_16	12/19	Name Change
PUELDERLAW3_16	12/20	Elder Law - Member Support
PULRESTRNORDER3_16	12/20	Restraining/Protective Order - Named Insured
PULRESTRNORDER4_16	12/20	Restraining/Protective Order - Insured
PUELDERLAWMISCOFFICEPGP4_16	01/22	Miscellaneous Services for Parents and Grandparents - 4 hours
PULCRDTRCRD2_16	03/23	Credit Records Correction
PULBLDGCDE3_16	05/23	Building Codes
PULBLDGCDE4_16	05/23	Building Codes - Secondary Residence
PUEASEMENT3_16	05/23	Easement
PUEASEMENT4_16	05/23	Easement - Secondary Residence
PULFORECL3_16	05/23	Foreclosure
PULFORECL4_16	05/23	Foreclosure - Secondary Residence
PULINCM2_16	05/23	Mental Incompetency or Infirmary Proceedings
PULPROPTAX3_16	05/23	Property Tax
PULPROPTAX4_16	05/23	Property Tax - Secondary Residence
PULSMCLM4_16	05/23	Small Claims Court
PULSSVTMD3_16	05/23	Social Security/Veterans/Medicare
PULZONVAR3_16	05/23	Zoning and Variances
PULZONVAR4_16	05/23	Zoning and Variances - Secondary Residence
PULADOPTPIF_16	11/24	Adoption
PULCIVIL3PIF_16	11/24	Defense of Civil Damage Claims
PULCONSM2PDPIF_16	11/24	Consumer Protection
PULDEBT4_16	11/24	Defense of Debt Collection
PULGARN3_16	11/24	Defense of Garnishment
PULGUARDPIF_16	11/24	Guardianship/Conservatorship
PULHOMEASSOC2DPIF_16	11/24	Homeowner Association Disputes
PULINS2DPIF_16	11/24	Insurance Disputes
PULMECHANICSLIEN2_16	11/24	Mechanic's Lien
PULMISCOFFICE4HOURSYEAR_16	11/24	Miscellaneous Services - 4 hours
PULNBRDISP3DPIF_16	11/24	Neighbor Disputes
PULNBRDISP4DPIF_16	11/24	Neighbor Disputes - Secondary Residence
PULNBRDISPB3PDPIF_16	11/24	Neighbor Disputes - Boundary
PULNBRDISPB4PDPIF_16	11/24	Neighbor Disputes - Boundary - Secondary Residence
PULNBRDISPNH3DPIF_16	11/24	Neighbor Disputes - Nuisance & Harassment
PULNBRDISPNH4DPIF_16	11/24	Neighbor Disputes - Nuisance & Harassment - Secondary Residence
PULPERSPROP2DPIF_16	11/24	Personal Property Protection
PULREDISP3DPIF_16	11/24	Real Estate Disputes

Continued

PULREDISP4DPIF_16	11/24	Real Estate Disputes - Secondary Residence
PULREDISPPT3PDPIF_16	11/24	Real Estate Disputes - Property Title
PULREDISPPT4PDPIF_16	11/24	Real Estate Disputes - Property Title - Secondary Residence
PULRESCONT2DPIF_16	11/24	Residential Contractor Disputes
PULSCHLADMN2DPIF_16	11/24	School Administrative Hearings
PULSTUDENTLOANDEBT3_16	11/24	Student Loan Debt Collection
PULTENANT2DPIF_16	11/24	Tenant Matters
PULCHLDCUSSUPAGR2CONCAP8EVENT_16	12/24	Child Custody/Child Support Agreement - 8 hours
PULDISSCONCAP30EVENT_16	12/24	Divorce - 30 hours
PULPOSTDEC2CONCAP8EVENT_16	12/24	Alimony, Child Support, Child Custody and Child Visitation - 8 hours
PULTLAS_16	05/16	Immediate Advice Attorneys

---

Countersignature (if required)

---

## DEFINITIONS

---

**"AMOUNT IN DISPUTE"** – means the monetary amount that can be calculated or proven in order to compensate **you** for incurred damage to or loss of **your** property.

**"BENEFITS"** – the legal coverages listed on the declarations page of the policy or in the **benefits** section of the **Certificate of Insurance**.

**"CERTIFICATE OF INSURANCE"** or **"CERTIFICATE"** – the document provided by **us** to the **named insured** that describes the **benefits** and terms of the insurance policy.

**"CERTIFICATE YEAR"** – twelve (12) month period as listed on the declarations page of the policy issued to the **policyholder**.

**"CONTESTED"** – **your** attorney assists with resolving any matter regardless of whether any legal forms are filed.

**"EFFECTIVE DATE"** – the date on which the **policyholder** enrolls the **named insured** and from which date premium has been paid for **you**.

**"GENERAL IN OFFICE LEGAL SERVICES"** – time spent by an attorney and their office staff for **your** legal issue that is not otherwise covered or excluded under this plan and which does not include costs such as, but not limited to: filing fees, copy costs, mileage, title insurance, expert witnesses, mediator, home studies, transcriptions, title search, and title abstracting.

**"GOODS"** – a physical product that is capable of being delivered. Ownership of a good can be transferred from the seller to the buyer.

**"INDEMNITY BENEFITS"** – means covered **legal services** which are reimbursed to the **insured** up to the **benefit** amount indicated under the specific coverage. The **insured** is responsible for all **legal services** which may exceed the amount paid by **us**.

**"INSURED"** – as dictated by premium paid and as indicated by coverages listed in the **"Benefits"** section, the **named insured** only or the **named insured** and the **named insured's** spouse, or domestic partner (who is registered with us) and/or eligible dependents. Eligible dependents and/or domestic partner are defined by mutual agreement between the **policyholder** and **us**.

**"INSURED EVENT"** – an event covered by this policy whose initiation date will be considered the earlier of the date (a) written notice of a **legal dispute** is sent or filed by **you** or received by **you**; or (b) a ticket or citation is issued; or (c) an attorney is hired.

**"INSURED RENTAL PROPERTY"** – a single dwelling (house, apartment, duplex or condominium) that **you** have an ownership interest in and that is not **your primary residence** and that for a portion of the year is rented out to another individual.

**"JUDGMENTS"** – all events and proceedings regarding an **insured event**, regardless of whether or not an action has been filed in court, that occur after a settlement agreement has been signed by all parties; an arbitrator has issued a final, binding decision or a court has issued a **judgment**.

**"LEGAL DISPUTE"** – means a disagreement between **you** and any other party regarding **your** legal rights.

**"LEGAL SERVICES"** – time spent by **your** attorney and their office staff for **your** covered legal matters which does not include costs such as, but not limited to: filing fees, copy costs, mileage, title insurance, expert witnesses, mediator, home studies, transcriptions, title search, and title abstracting.

**"MEDIATION COSTS"** – payment of a qualified mediator who assists the **insured** and another party attempt to reach a settlement regarding a covered legal matter.

**“MISCELLANEOUS LEGAL SERVICES”** – time spent by an attorney and their office staff for **your** legal issue that is not otherwise covered or excluded under this plan and which does not include costs such as, but not limited to: filing fees, copy costs, mileage, title insurance, expert witnesses, mediator, home studies, transcriptions, title search, and title abstracting.

**“NAMED INSURED”** – a person enrolled via the **policyholder** with **us** as entitled to coverage under the terms of this policy.

**“NETWORK ATTORNEY”** – means an attorney who completes and delivers a signed application to **us**; agrees to the terms of the ARAG Attorney Agreement; is accepted as a **Network Attorney** by **us** and agrees to provide **legal services** in the United States for the **benefits** noted on their application or as updated with **us**.

**“NON-NETWORK ATTORNEY”** – means an attorney, who is not a **Network Attorney**, chosen by **you** to perform **legal services** covered under the **indemnity benefits** of this policy.

**“NON-MOVING OFFENSE”** – parking ticket, equipment or other violations that are not handled in conjunction with a moving violation; however, this does not encompass violations related to electronic devices, red light cameras, speed cameras or tolls.

**“PERSONAL INJURY”** – the legal plan does not cover **legal services** for a **legal dispute** which includes allegations of harm whether it be for physical injuries to the body and/or non-physical injuries (including emotional distress, mental distress, pain and suffering and/or loss of companionship).

**“PERSONAL PROPERTY”** – means property, which is not **real property** and which does not produce income.

**“POLICYHOLDER”** – means the organization named in the declarations page.

**“PRIMARY RESIDENCE”** – **your real property** that contains the single dwelling, where **you** actually live that is considered **your** legal residence for income tax purposes.

**“REAL PROPERTY”** – land and all permanent structures attached to it.

**“REFINANCING”** – paying off one loan with the proceeds from a new loan using the same **real property** as security.

**“SECONDARY RESIDENCE”** – **your real property** that contains a single dwelling (house, apartment, duplex, or condominium) in which **you** have an ownership interest and is not **your primary residence** and is not an **insured rental property** for six months before the **insured event** and is not **your** intent to use it as an **insured rental property**.

**“SERVICE”** – a duty or labor provided from one person to another. It is the non-material equivalent of a **good**. There is no physical product that can transfer ownership.

**“TRIAL”** – means the proceeding in court or in a covered administrative proceeding when the parties try their case beginning with the impaneling of a jury in a jury **trial** or with opening statement if the parties are in a non-jury **trial**. **Trial** does not include things such as hearings, appearances on motions, negotiated pleas, pre-**trial** conferences, or appearances, and continuances by the court.

**“UNCONTESTED”** – all matters are settled or decided by all parties without the involvement of **your** attorney, and **your** attorney only assists in completing any necessary formal processes.

**“WE”, “US”, and “OUR”** – ARAG Insurance Company.

**“YOU” and “YOUR”** – an **insured**.

## ARAG INSURANCE COMPANY

---

### AGREEMENT

---

**We** will pay for covered **legal services** provided to **you** by a **Network Attorney** resulting from an **insured event** which occurs after **your effective date** and while **your Certificate of Insurance** is in effect for the **benefits** listed. The **legal services** will be paid up to the amount listed in the **Network Attorney** column of the **benefit** endorsements. If the amount listed is PAID IN FULL, **we** will pay for **legal services** up to **our** standard contract rates. If the **legal services** are provided by a **Network Attorney** on terms other than **our** standard contract rates, then the **legal services** will not exceed a reasonable maximum set by **us** based on similar **insured events**.

**You** can choose a **Non-Network Attorney** instead of a **Network Attorney**. If **you** choose a **Non-Network Attorney** for covered **benefits** provided to **you** resulting from an **insured event** which occurs after **your effective date** and while **your Certificate of Insurance** is in effect, **we** will reimburse **you** for covered **legal services** up to the maximum amounts listed in the **Non-Network Attorney (Indemnity Benefit)** column of the **benefit** endorsements.

Regardless of whether **you** choose a **Network Attorney** or **Non-Network Attorney**, only matters expressly listed are covered **benefits** and are paid as indicated on the **benefit** endorsements.

If the **named insured** purchased only individual coverage, **legal services** rendered to persons other than the **named insured** are not covered.

If **you** have any questions regarding **your** policy please call 1-800-247-4184.

---

### EXCLUSIONS

---

**We** do not provide coverage for:

1. Matters against **us**, the **policyholder** or an **insured** against the interests of the **named insured** under the same **Certificate**.
2. **Legal services** arising out of a business interest, investment interests, employment matters, employee benefits, **your** role as an officer or director of an organization, and patents or copyrights.
3. **Legal services** involving class actions, punitive damages, **personal injury**, malpractice, court appeals or judgments.
4. **Legal services** deemed by **us** to be frivolous or lacking merit, or in legal matters where **you** wish to take action against a party, regardless of whether the matter proceeds to **you** filing a lawsuit against the other party, and the amount **we** pay for **your legal services** exceeds the **amount in dispute**, or in **our** reasonable belief **you** are not actively and reasonably pursuing resolution in **your** case.

---

### CONDITIONS

---

#### Policy Period and Territory

This policy applies to **insured events** which occur worldwide while **your Certificate of Insurance** is in effect. If an **insured event** occurs outside the United States **indemnity benefits** apply.



Any **insured event** which occurs prior to the **insured's effective date** will be considered pre-existing and excluded and **benefits** will not apply.

### **Eligibility**

Each eligible person as described in the Declarations, who is registered with **us**, and for whom a premium is paid, shall become an **insured** on the **effective date**.

### **Cancellation and Termination**

**We** will not cancel this policy during the term defined in the Declarations except for fraud or failure to pay premium due. **We** will give **you** ten (10) days written notice of cancellation for nonpayment of premium and sixty (60) days written notice for any other reason or the intention not to renew the policy. The written notice will contain an explanation specifically detailing the reasons for cancellation or denied renewal and will be sent by registered mail or by mail evidenced by a United States Post Office certificate of mailing.

If the basis for cancellation is nonpayment of premium **you** may continue the coverage and avoid the effect of the cancellation by payment in full at any time prior to the **effective date** of cancellation.

If the **named insured** ends employment or membership in the group to which this policy is issued (except upon the **named insured's** death), or the policy is canceled by the **policyholder**, **your** coverage will cease at the end of the term for which premium has been paid.

### **Waiver of Premium**

Upon the death of the **named insured**, coverage for the surviving spouse or domestic partner and the **insured** dependents continues under the policy for one year, and **we** waive further premium payments during this time. Coverage shall terminate prior to the end of the one year period if the **policyholder** cancel the policy during that time frame, in such case, coverage shall cease as of the date the **policyholder** cancels the policy.

Should a **named insured** be deployed for a period of more than thirty (30) consecutive days for the purposes of military service or of responding to a declared national emergency, coverage for the spouse or domestic partner and the **insured** dependents will continue, without the payment of premium, for the length of the **named insured's** absence and for so long as the **named insured** remains eligible for **benefits** through the **policyholder**.

### **Conversion**

**You** may continue insurance when **you** no longer qualify as an employee of the **policyholder** or as a member of the group to which this policy is issued. **You** must notify **us** within ninety (90) days of this disqualifying event to make arrangements for premium payment. Payment of premium is required from the last date of **your** eligibility under this policy.

### **Adjustment of Premium**

Adjustment of premium based upon termination or addition of **insured's** shall be calculated by **us**. Payments or refunds shall be due on the first day of the following calendar month.

Notice to any agent or knowledge possessed by any agent or by any other person shall not affect a waiver or change any part of this policy or stop **us** from asserting any right under the terms of this policy; nor shall the terms of this policy be waived or changed except as stated above.

Any terms of this policy which are in conflict with the state where issued are amended to conform to the statutes.

### **Coordination of Benefits**

This policy coordinates **benefits** as defined in the National Association of Insurance Commissioners Model Coordination of Benefits Provisions.

If **you** are entitled to receive **legal services** or reimbursement for **legal services** from any other person or organization, **our** coverage will be excess.

Payment by **us** for **legal services** under this policy does not preclude **your** attorney from seeking and recovering attorney fees from an opposing party, where authorized by law, court rule or contract, at the attorney's usual and customary or prevailing rate. If **you** receive reimbursement of attorney's fees, then **you** will reimburse **us** for payments made under this policy.

#### **Payment Limitations**

**You** may not make claims under separate **benefits** for one legal matter.

#### **Notice of Claim, Proof of Expense Incurred and Payment of Claim**

**You** or **your** representative must submit a written notice of claim to **us** within one year after the **insured event**. A claim form and itemized billing are required within one hundred eighty (180) days after **legal services** for which **you** seek payment are completed.

**You** are responsible for verifying **your** legal matter is covered under **your** legal plan with **us** prior to receiving **legal services**. **You** will be responsible for payment to the attorney at their usual and customary rate if **your** matter is not covered.

**You** must give **us** all information **we** request with respect to the circumstances of an **insured event** or **service** provided. **We** have the right to withhold **benefits** if the requested information is not provided to **us**.

#### **Fraud or Abuse**

**We** do not provide **benefits** for **you** if **you** have intentionally concealed or misrepresented any material fact or circumstance or have made false statements or engaged in fraudulent conduct relating to **your** insurance. **We** may discontinue **your** benefits if **we** deem that **you** are exhibiting hostile or abusive behavior towards **us**, **our** employees and/or **Network Attorneys**.

#### **Subrogation**

**We** may require **you** to assign all rights of recovery of legal fees to the extent that payment is made by **us**. If an assignment is sought, **you** must cooperate with **us**.

#### **Relation of the Parties**

**You** have the unrestricted right to choose an attorney. The attorney is not **our** agent or employed by **us** or the **policyholder**. **We** and the **policyholder** shall at no time control or interfere with the performance of the attorney and **we** do not guarantee the skill of the attorney. Any payment to a **network attorney** for **legal services** is **our** responsibility up to **your** policy limits.

#### **Grievances**


If **you** have a problem with a **Network Attorney** in the handling of a legal matter covered under this insurance policy, contact **us** for assistance in resolving **your** issue.

**You** have the right to file a complaint with the State Bar about **your** attorney at any time.

#### **Non-Assessable Policy**

This policy is non-assessable. **You** are not subject to contingent liability, nor liable to assessment.

This policy is signed at Des Moines, Iowa on behalf of ARAG Insurance Company by **our** President and Secretary. It is countersigned by **our** authorized agent (if required).

The image shows two handwritten signatures in black ink. The signature on the left is for Ann Cosimano, appearing as 'A Cosimano' with a long horizontal flourish. The signature on the right is for David R. Murray, appearing as 'David R Murray' in a cursive script.

Ann Cosimano  
Secretary

David R. Murray  
President

## Driving Privilege Protection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b><u>Driving Privilege Protection</u></b>		
<b>Legal services</b> for an <b>insured</b> in the defense of a traffic offense where conviction of the offense will directly result in the suspension or revocation of <b>your</b> driving privileges.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

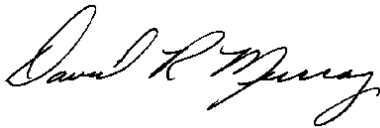
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Driving Privilege Restoration***

See Policy "Agreement" Section


<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Driving Privilege Restoration</u></b>		
<b>Legal services</b> for an <b>insured</b> in an administrative proceeding for the restoration of suspended or revoked driving privileges of an <b>insured</b> .	PAID IN FULL	\$ 240*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Habeas Corpus Proceedings***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Habeas Corpus Proceedings</u></b>		
<b>Legal services</b> for an <b>insured</b> in habeas corpus proceedings.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

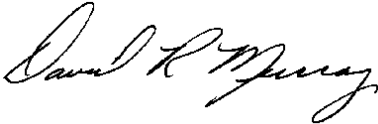
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Minor Traffic - Broad (excluding DWI-related)***

See Policy "Agreement" Section

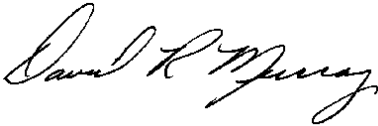
<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Minor Traffic - Broad (excluding DWI-related)</u></b>		
<b>Legal services</b> for an <b>insured</b> in the defense of a traffic offense, the conviction of which would not result in suspension or revocation of <b>your</b> driving privileges. (Does not include driving while impaired or under the influence of drugs or alcohol or any <b>non-moving offense</b> .)	PAID IN FULL	\$ 240*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Parental Responsibilities***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Parental Responsibilities</u></b>		
<b>Legal services</b> for an <b>insured</b> in juvenile court proceedings (except those involving traffic matters) where a state has brought an action regarding <b>your</b> parental responsibilities for an <b>insured</b> child.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Refinancing - Primary Residence***

See Policy "Agreement" Section

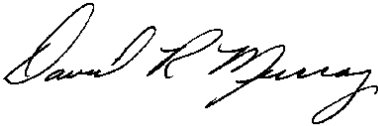
<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Refinancing - Primary Residence</u></b>		
Advice and review of relevant documents regarding <b>refinancing of your primary residence.</b>	PAID IN FULL	\$ 160*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Purchase of Real Estate***

See Policy "Agreement" Section


<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Purchase of Real Estate</u></b>		
<b>Legal services</b> for an <b>insured</b> for the purchase of <b>your primary residence</b> for the review and preparation of documents including contract for purchase and attendance at closing.	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Sale of Real Estate***

See Policy "Agreement" Section


<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Sale of Real Estate</u></b>		
<b>Legal services</b> for an <b>insured</b> for the sale of <b>your primary residence</b> for the review and preparation of documents including the contract for sale and attendance at closing.	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Irrevocable Trusts***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Irrevocable Trusts</u></b>		
<b>Legal services</b> for an <b>insured</b> for the preparation of a stand-alone irrevocable trust.	PAID IN FULL	\$ 320* single document
		\$ 400* spousal documents

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Revocable Living Trusts***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Revocable Living Trusts</u></b>		
<b>Legal services</b> for an <b>insured</b> for the preparation of a stand-alone revocable trust.	PAID IN FULL	\$ 320* single document
		\$ 400* spousal documents

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Wills & Durable Power of Attorney***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Wills &amp; Durable Power of Attorney</u></b>		
Individual will or spousal will(s). (Does not include any tax planning services done in connection with the will.)	PAID IN FULL	\$ 320 single document  \$ 400 spousal documents
Codicil (an amendment to a will)	PAID IN FULL	\$ 40 single document  \$ 80 spousal documents
Living Will / Health Care Directive	PAID IN FULL	\$ 40 single document  \$ 80 spousal documents
Durable / Financial Power of Attorney	PAID IN FULL	\$ 40 single document  \$ 80 spousal documents

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Home Equity Loan - Primary Residence

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Home Equity Loan - Primary Residence</b>		
<b>Legal services</b> for an <b>insured</b> for the preparation and review of home equity loans for <b>your primary residence</b> .	PAID IN FULL	\$ 160*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Home Equity Loan - Secondary Residence

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Home Equity Loan - Secondary Residence</b>		
<b>Legal services</b> for an <b>insured</b> for the preparation and review of home equity loans for <b>your secondary residence</b> .	PAID IN FULL	\$ 160*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Refinancing - Secondary Residence***

See Policy "Agreement" Section

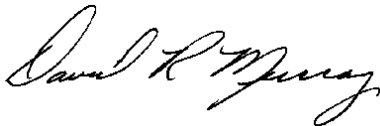
<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Refinancing - Secondary Residence</u></b>		
Advice and review of relevant documents regarding <b>refinancing of your secondary residence.</b>	PAID IN FULL	\$ 160*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

**Document Review**

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
----------	------------------------------	--

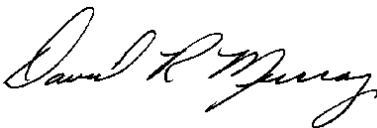
**Document Review**

<b>Legal services</b> for an <b>insured</b> for the review of <b>your</b> personal legal documents.	PAID IN FULL	\$ 40 per document
--	--------------	--------------------

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Protection from Domestic Violence - Named Insured***

See Policy "Agreement" Section

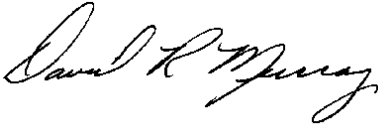
<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Protection from Domestic Violence - Named Insured</u></b>		
<b>Legal services</b> for the <b>named insured</b> to obtain a protective order related to domestic violence.	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Protection from Domestic Violence - Insured***

See Policy "Agreement" Section

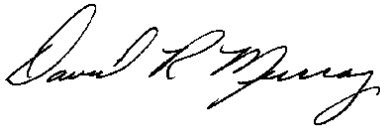
<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Protection from Domestic Violence - Insured</u></b>		
<b>Legal services</b> for an <b>insured</b> to obtain a protective order related to domestic violence when the opposing party is not an <b>insured</b> under the same <b>Certificate</b> .	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Bankruptcy***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Bankruptcy</u></b>		
<b>Legal services</b> for an <b>insured</b> up to and including filing of a Chapter 7 bankruptcy final report.	PAID IN FULL	\$ 880*
<b>Legal services</b> for an <b>insured</b> up to and including confirmation of a Chapter 13 bankruptcy. This <b>benefit</b> does not include the ongoing maintenance of a Chapter 13 repayment plan.	PAID IN FULL	\$ 1,200*
<b>Legal services</b> for an <b>insured</b> to file an amendment/modification to a Chapter 7 post-discharge or a Chapter 13 post-confirmation bankruptcy.	PAID IN FULL	\$ 240*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## IRS Collection Defense

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>IRS Collection Defense</b>		
<b>Legal services</b> for an <b>insured</b> in defense against collection actions by the Internal Revenue Service (IRS) related to errors on <b>your</b> personal tax return where the initial written notice is received after <b>your effective date</b> . This <b>benefit</b> does not include collection actions related to <b>your</b> failure to file a personal tax return or <b>your</b> failure to pay the taxes <b>your</b> filed personal tax return indicated <b>you</b> owed.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

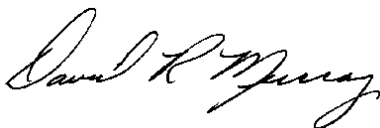
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## IRS Audit Protection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>IRS Audit Protection</b>		
<b>Legal services</b> for an <b>insured</b> involving Internal Revenue Service (IRS) audits related to <b>your</b> personal tax return where the initial written notice is received after <b>your effective date</b> . This <b>benefit</b> does not include audits related to <b>your</b> failure to file a personal tax return or <b>your</b> failure to pay the taxes <b>your</b> filed personal tax return indicated <b>you</b> owed.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Purchase/Sale of Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Purchase/Sale of Secondary Residence</u></b>		
<b>Legal services</b> for an <b>insured</b> for the purchase or sale of <b>your secondary residence</b> for the review and preparation of documents including the contract for purchase or sale and attendance at closing.	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## State and Local Tax Collection Defense

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b><u>State and Local Tax Collection Defense</u></b>		
<b>Legal services</b> for an <b>insured</b> in defense against collection actions by state and/or local tax authority related to errors on <b>your</b> personal state tax return or personal local taxes where the initial written notice is received after <b>your effective date</b> . This <b>benefit</b> does not include collection actions related to <b>your</b> failure to file a personal tax return or <b>your</b> failure to pay the taxes <b>your</b> filed personal tax return indicated <b>you</b> owed.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## State and Local Tax Audit

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>State and Local Tax Audit</b>		
<b>Legal services</b> for an <b>insured</b> involving state and/or local tax authority audits related to <b>your</b> personal state tax return or personal local taxes where the initial written notice is received after <b>your effective date</b> . This <b>benefit</b> does not include audits related to <b>your</b> failure to file a personal tax return or <b>your</b> failure to pay the taxes <b>your</b> filed personal tax return indicated <b>you</b> owed.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Document Preparation***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Document Preparation</u></b>		
<b>Legal services</b> for an <b>insured</b> for the preparation of Deeds, Mortgages, Promissory Notes, Affidavits, Lease Contracts, Demand Letters, Installment Contracts, Bill of Sale, HIPAA Authorization and Certification of Trust.	PAID IN FULL	\$ 40 per document

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Juvenile Court***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Juvenile Court</u></b>		
<b>Legal services</b> for an <b>insured</b> child charged with a crime (except those involving traffic matters or felony charges) when the court proceedings are held in juvenile court. If the matter is removed from juvenile court, coverage under this <b>benefit</b> will cease as of the date of the removal.	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Advice for Parents and Grandparents***

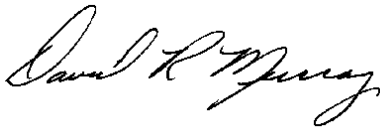
See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Advice for Parents and Grandparents</u></b>		
Telephone access to obtain legal advice and consultation on how the law relates to <b>your</b> parents and grandparents' legal matters and which actions may be taken.	PAID IN FULL	N/A

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Document Preparation for Parents and Grandparents***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Document Preparation for Parents and Grandparents</u></b>		
<b>Legal services</b> for <b>your</b> parents and grandparents for the preparation of Deeds, Mortgages, Promissory Notes, Affidavits, Lease Contracts, Demand Letters, Installment Contracts, Bill of Sale, HIPAA Authorization and Certification of Trust.	PAID IN FULL	\$ 40 per document

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Document Review for Parents and Grandparents***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Document Review for Parents and Grandparents</u></b>		

**Legal services** for the review of **your** parent's and grandparent's personal legal documents.

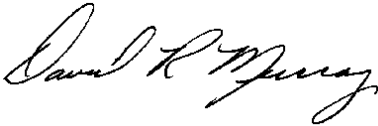
PAID IN FULL

\$ 40 per document

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Wills & Durable Power of Attorney for Parents and Grandparents***

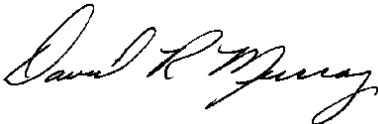
See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Wills &amp; Durable Power of Attorney for Parents and Grandparents</u></b>		
Preparation of the documents listed below for <b>your</b> parents and grandparents.		
Individual will or spousal will(s). (Does not include any tax planning service done in connection with the will.)	PAID IN FULL	\$ 320 single document
		\$ 400 spousal documents
Codicil (an amendment to a will)	PAID IN FULL	\$ 40 single document
		\$ 80 spousal documents
Living Will / Health Care Directive	PAID IN FULL	\$ 40 single document
		\$ 80 spousal documents
Durable / Financial Power of Attorney	PAID IN FULL	\$ 40 single document
		\$ 80 spousal documents

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Name Change***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Name Change</u></b>		
<b>Legal services</b> for an <b>insured</b> to legally change <b>your</b> name.	PAID IN FULL	\$ 240*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Elder Law - Member Support***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Elder Law - Member Support</u></b>		
Initial advice for an <b>insured</b> on the impact of <b>your</b> parent's/grandparent's personal legal matter on <b>you</b> .	PAID IN FULL	\$ 25
<b>Legal services</b> for an <b>insured</b> for the preparation and review of a deed granted by a parent/grandparent where <b>you</b> are the grantee.	PAID IN FULL	\$ 40 per document
<b>Legal services</b> for an <b>insured</b> for the preparation and review of a promissory note where <b>your</b> parent/grandparent is the payor and <b>you</b> are the payee.	PAID IN FULL	\$ 40 per document
<b>Legal services</b> for an <b>insured</b> for the review of <b>your</b> parent's/grandparent's personal legal documents, including estate planning documents where <b>you</b> have been named as an agent or executor/personal representative.	PAID IN FULL	\$ 40 per document

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Restraining/Protective Order - Named Insured***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Restraining/Protective Order - Named Insured</u></b>		
<b>Legal services</b> for the <b>named insured</b> to obtain a restraining/protective order.	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Restraining/Protective Order - Insured***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Restraining/Protective Order - Insured</u></b>		
<b>Legal services</b> for an <b>insured</b> to obtain a restraining/protective order when the opposing party is not an <b>insured</b> under the same <b>Certificate</b> .	PAID IN FULL	\$ 320*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Miscellaneous Services for Parents and Grandparents - 4 hours***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Miscellaneous Services for Parents and Grandparents - 4 hours</u></b>		
<b>Miscellaneous legal services.</b>	4 hours	\$ 320*
(This <b>benefit</b> is limited to four hours per certificate year.)		

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Credit Records Correction

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b><u>Credit Records Correction</u></b>		
Advice, document review, document preparation and correspondence for an <b>insured</b> related to correcting inaccuracies or misrepresentations on <b>your</b> credit record.	PAID IN FULL	\$ 160*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Building Codes

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Building Codes</b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action for permit or code violations relating to the renovation and/ or improvement of <b>your</b> existing <b>primary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

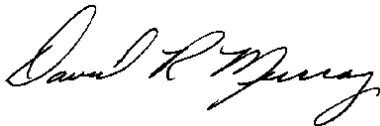
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Building Codes - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Building Codes - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action for permit or code violations relating to the renovation and/ or improvement of <b>your</b> existing <b>secondary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

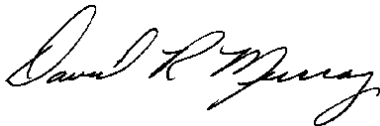
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Easement***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Easement</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action regarding an easement on <b>your primary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Easement - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Easement - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action regarding an easement on <b>your secondary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Foreclosure

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Foreclosure</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding written notice of a foreclosure related to <b>your primary residence</b> when a party is taking action against <b>you</b> .	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Foreclosure - Secondary Residence

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Foreclosure - Secondary Residence</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding written notice of a foreclosure related to <b>your secondary residence</b> when a party is taking action against <b>you</b> .	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Mental Incompetency or Infirmary Proceedings***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Mental Incompetency or Infirmary Proceedings</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> related to mental incompetency or infirmity proceedings when a party is taking action against <b>you</b> .	PAID IN FULL	\$ 960*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Property Tax

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Property Tax</b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action to reduce the property tax assessment on <b>your primary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

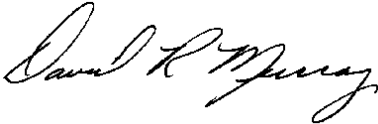
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Property Tax - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Property Tax - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action to reduce the property tax assessment on <b>your secondary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

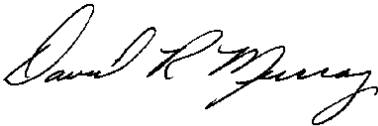
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Small Claims Court

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Small Claims Court</b>		
<b>Legal services</b> for a <b>legal dispute</b> in Small Claims Court (or similar court of limited civil jurisdiction) when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit. This <b>benefit</b> does not include representation in court.	PAID IN FULL	\$ 320*
<b>Legal services</b> for a <b>legal dispute</b> in Small Claims Court (or similar court of limited civil jurisdiction) including representation in court where allowed by law, when a party is taking action against <b>you</b> .	PAID IN FULL	\$ 400*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Social Security/Veterans/Medicare***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Social Security/Veterans/Medicare</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative proceeding arising out of Social Security, Veterans, Medicare or Medicaid benefits.	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

(Exclusion #2 as it relates to employment matters for Veterans benefit is waived for this **benefit**.)

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Zoning and Variances***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Zoning and Variances</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action related to a zoning change, variance or an eminent domain proceeding involving <b>your primary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

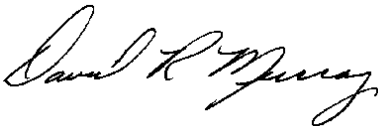
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Zoning and Variances - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Zoning and Variances - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in an administrative action related to a zoning change, variance or an eminent domain proceeding involving <b>your secondary residence</b> .	PAID IN FULL	\$ 400*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Adoption

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Adoption</b>		
<b>Legal services</b> <sup>1</sup> in an adoption for an <b>insured</b> to become an adoptive parent(s).		
<b>Uncontested</b>	PAID IN FULL	\$ 400*
<b>Contested</b>	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

<sup>1</sup>In international adoptions, where a foreign attorney is necessary, **you** are eligible to receive indemnity reimbursement in addition to the **benefits** available in the United States

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

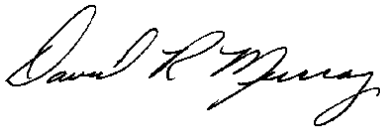
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Defense of Civil Damage Claims

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Defense of Civil Damage Claims</b>		
<b>Legal services</b> for a <b>legal dispute</b> for <b>you</b> in defense against civil damage(s) claims, except claims involving the ownership or use of a motorized vehicle; claims which are covered by other insurance; claims related to libel, slander, defamation, or reputation; or claims related to a felony charge. This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction.)	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Consumer Protection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Consumer Protection</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding written, verbal or implied contracts or warranties relating to consumer <b>goods</b> or <b>services</b> (excluding real estate, residential contractor and insurance disputes) when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Defense of Debt Collection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Defense of Debt Collection</b>		
<b>Legal services</b> for a <b>legal dispute</b> related to consumer <b>goods</b> or <b>services</b> (excluding foreclosures, garnishment, mechanic's lien and student loan debt collection) when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Defense of Garnishment

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Defense of Garnishment</b>		
<b>Legal services</b> for a <b>legal dispute</b> for a garnishment to collect <b>judgment</b> related to <b>goods</b> or <b>services</b> when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

(Exclusion #3 as it relates to **judgments** garnishment is waived for this **benefit**.)

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Guardianship/Conservatorship***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Guardianship/Conservatorship</u></b>		
<b>Legal services</b> in a Guardianship/Conservatorship for an <b>insured</b> to appoint or be appointed as a Guardian/ Conservator.		
<b>Uncontested</b>	PAID IN FULL	\$ 480*
<b>Contested</b>	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Homeowner Association Disputes

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Homeowner Association Disputes</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding written, verbal or implied contracts or obligations related to <b>your</b> homeowner association when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Insurance Disputes

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Insurance Disputes</b>		
<b>Legal services</b> for a <b>legal dispute</b> relating to <b>your</b> insurance carrier when the insurance carrier is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Mechanic's Lien***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Mechanic's Lien</u></b>		
<b>Legal services</b> for an <b>insured</b> to remove a mechanic's lien. This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount


\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Miscellaneous Services - 4 hours***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
-----------------	--------------------------------------	--

### **Miscellaneous Services - 4 hours**

**Miscellaneous legal services.**

4 hours

\$ 320\*

This **benefit** is limited to four hours per **certificate year**.

(Exclusion #3 as it relates to **judgments** is not intended to exclude family law decree matters.)

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Neighbor Disputes

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Neighbor Disputes</b>		
<b>Legal services</b> for a <b>legal dispute</b> with <b>your</b> neighbor related to <b>your primary residence</b> (excluding boundary, nuisance and harassment disputes) when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Neighbor Disputes - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Neighbor Disputes - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> with <b>your</b> neighbor related to <b>your secondary residence</b> (excluding boundary, nuisance and harassment disputes) when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

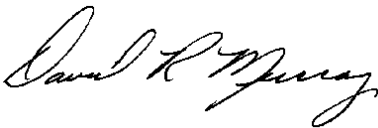
\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Neighbor Disputes - Boundary

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Neighbor Disputes - Boundary</b>		
<b>Legal services</b> for a <b>legal dispute</b> with <b>your</b> neighbor related to the boundary of <b>your primary residence</b> when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## Neighbor Disputes - Boundary - Secondary Residence

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b><u>Neighbor Disputes - Boundary - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> with <b>your</b> neighbor related to the boundary of <b>your secondary residence</b> when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Neighbor Disputes - Nuisance & Harassment

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Neighbor Disputes - Nuisance &amp; Harassment</b>		
<b>Legal services</b> related to <b>your primary residence</b> , involving a <b>legal dispute</b> with <b>your</b> neighbor for nuisance or harassment, when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Neighbor Disputes - Nuisance & Harassment - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Neighbor Disputes - Nuisance &amp; Harassment - Secondary Residence</u></b>		
<b>Legal services</b> related to <b>your secondary residence</b> , involving a <b>legal dispute</b> with <b>your</b> neighbor for nuisance or harassment, when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 720*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Personal Property Protection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Personal Property Protection</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding contracts or obligations for the transfer of <b>your personal property</b> or <b>your personal property</b> rights when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 320*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Real Estate Disputes

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Real Estate Disputes</b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding contracts or obligations for the construction, purchase or sale of <b>your primary residence</b> (excluding property title disputes) when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 1,200*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Real Estate Disputes - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Real Estate Disputes - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding contracts or obligations for the construction, purchase or sale of <b>your secondary residence</b> (excluding property title disputes) when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 1,200*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Real Estate Disputes - Property Title***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Real Estate Disputes - Property Title</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding the property title of <b>your primary residence</b> when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 1,200*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Real Estate Disputes - Property Title - Secondary Residence***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Real Estate Disputes - Property Title - Secondary Residence</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding the property title of <b>your secondary residence</b> when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . This <b>benefit</b> does not include Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 1,200*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



## ***Residential Contractor Disputes***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Residential Contractor Disputes</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> regarding written, verbal or implied contracts or obligations related to a residential contractor when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 800*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***School Administrative Hearings***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>School Administrative Hearings</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> in administrative public or private formal school proceedings regarding disabilities and accompanying educational accommodations or when an <b>insured</b> violates student policy when the school is taking action against <b>you</b> .	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Student Loan Debt Collection

See Policy "Agreement" Section

COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Student Loan Debt Collection</b>		
<b>Legal services</b> for a <b>legal dispute</b> related to <b>your</b> student loan when a party is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 480*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Tenant Matters***

See Policy "Agreement" Section

<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Tenant Matters</u></b>		
<b>Legal services</b> for a <b>legal dispute</b> with <b>your</b> landlord as tenant of <b>your primary residence</b> , including but not limited to, eviction and security deposit disputes, when <b>your</b> landlord is taking action against <b>you</b> . This <b>benefit</b> does not include matters in Small Claims Court (or similar court of limited civil jurisdiction).	PAID IN FULL	\$ 320*
<b>Trial</b> for three (3) days or less	PAID IN FULL	\$ 1,800**
<b>Trial</b> starting on day four (4) until completion	PAID IN FULL	\$ 100,000***

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

\*\* **Trial Indemnity Benefits** are (\$300 per 1/2 day of **Trial** time) up to the stated amount

\*\*\* **Trial Indemnity Benefits** are (\$400 per 1/2 day of **Trial** time) up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## Child Custody/Child Support Agreement - 8 hours

See Policy "Agreement" Section

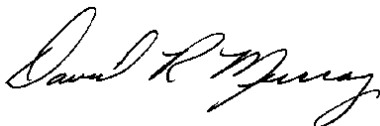
COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b>Child Custody/Child Support Agreement - 8 hours</b>		
<b>Legal services</b> for the creation of an initial <b>uncontested</b> child custody, child support, or child visitation agreements when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . The <b>benefit</b> does not include the modification of current agreements.	PAID IN FULL	\$ 320*
<b>Legal services</b> for a <b>legal dispute</b> for the creation of an initial <b>contested</b> child custody, child support, or child visitation agreements when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> . The <b>benefit</b> does not include the modification of current agreements.	PAID IN FULL (up to 8 hours per <b>insured event</b> )	\$ 640*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

***Divorce - 30 hours***

See Policy "Agreement" Section

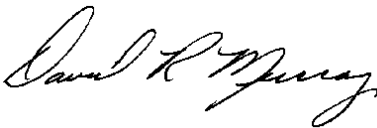
COVERAGE	Network Attorney Benefits	Non-Network Attorney INDEMNITY Benefits
<b><u>Divorce - 30 hours</u></b>		
<b>Legal services</b> for the <b>named insured</b> in an <b>uncontested</b> divorce, a legal separation and/or an annulment of marriage.	PAID IN FULL	\$ 640*
<b>Legal services</b> for the <b>named insured</b> in a <b>contested</b> divorce, a legal separation and/or an annulment of marriage. (up to 30 hours per <b>insured event</b> )	PAID IN FULL	\$ 2,400*

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Alimony, Child Support, Child Custody and Child Visitation - 8 hours***

See Policy "Agreement" Section


<b>COVERAGE</b>	<b>Network Attorney Benefits</b>	<b>Non-Network Attorney INDEMNITY Benefits</b>
<b><u>Alimony, Child Support, Child Custody and Child Visitation - 8 hours</u></b>		
<b>Legal services</b> for an <b>uncontested</b> motion to enforce or modify a final decree for child support, child custody, child visitation, or alimony when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> .	PAID IN FULL	\$ 320*
<b>Legal services</b> for a <b>legal dispute</b> regarding a <b>contested</b> motion to enforce or modify a final decree for child support, child custody, child visitation, or alimony when <b>you</b> wish to take action against a party regardless of whether the matter proceeds to the filing of a lawsuit or when a party is taking action against <b>you</b> .	PAID IN FULL (up to 8 hours per <b>insured event</b> )	\$ 640*
(Exclusion #3 as it relates to <b>judgments</b> is not intended to exclude child custody, child visitation, child support and alimony matters.)		

\* **Non-Network Attorney Indemnity Benefits** are up to the stated amount

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative

## ***Immediate Advice Attorneys***

We will pay the attorney fees of a **Telephone Legal Access Law Firm** as defined below for **Telephone Legal Access Services** provided by a **Telephone Legal Access Law Firm** while **your Certificate** is in effect.

**"Telephone Legal Access Law Firm"** - means an independent law firm that has entered into a written agreement with us to provide **Telephone Legal Access Services** to **you** within the territory of the United States.

**"Telephone Legal Access Services"** - means the type of **legal services** which, within the applicable standard of professional care and conduct, may be rendered by the **Telephone Legal Access Law Firm** in one or more telephone conversations with a client and which may be connected with other **legal services** based on telecommunication which are specifically listed below.

### **Coverage**

**You will receive:**

### **Attorney Fees**

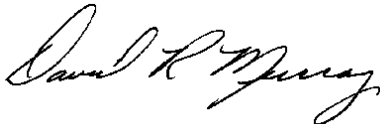
- |   |              |
|---|--------------|
| • Toll-free telephone advice on how the law relates to <b>your</b> personal legal matter and which action may be taken.                                   | PAID IN FULL |
| • Follow-up correspondence and telephone calls to third parties related to <b>your</b> personal legal matter.   | PAID IN FULL |
| • Specific document preparation and document review.  | PAID IN FULL |
| • <b>You</b> will receive legal assistance from the <b>Telephone Legal Access Law Firm</b> for the preparation or review of a: Standard Will or Codicils. | PAID IN FULL |

Standard Will means a will document without trust provisions other than a support trust for dependent children limited to appointing a guardian and placing assets for dependent children until they reach their age of majority.

This agreement forms a part of Policy Number 19328-001 issued to BayCare Health Systems and is effective January 01, 2026.

By ARAG Insurance Company of Des Moines, Iowa

By



Authorized Representative



**ARAG Services, LLC  
500 Grand Avenue, Suite 100  
Des Moines, Iowa 50309-**

**SERVICE PLAN**

1. Name of Plan Member, Address  
BAYCARE HEALTH SYSTEMS  
1035 KEPLER DR  
GREEN BAY, WI 54311-8320
2. Service Period  
The term of this Plan shall be from Jan 1, 2026 to December 31, 2026 Standard Time at the address of the Plan Sponsor.
3. Price  
\$0.34 monthly Composite rate per **Named Plan Member** and eligible dependents
4. Services Provided  
As per attached

## **SERVICE PLAN**

for

BayCare Health Systems

ARAG Services, LLC as plan administrator, will provide the services described in this document (hereinafter referred to as the “plan”) in compliance with all provisions herein in return for plan member’s service fee. This plan incorporates any and all terms and provisions of the plan member’s Certificate of Insurance. If the named plan member purchased only individual membership the services described below will be available only to him/her.

---

## **TERMS AND CONDITIONS**

---

This plan may be amended or changed at any time by written agreement between the plan sponsor and us.

Any terms of this plan which are in conflict with any state or federal law are amended to conform to all applicable federal or state regulations.

We do not provide services for you if you have intentionally concealed or misrepresented any material fact or circumstance or have made false statements or engaged in fraudulent conduct relating to your membership or the plan.

We reserve the right to terminate this service plan under the following conditions:

- (1) If an associated insurance policy is terminated for any reason;
- (2) If you fail to pay a Network Attorney the amounts due for a matter covered under this service plan; or
- (3) If you have intentionally concealed or misrepresented any material fact or circumstance, made false statements, or engaged in fraudulent conduct relating to your membership or the plan.

---

## REDUCED FEE LEGAL SERVICES

---

If your legal matter is not fully covered under your insurance policy and is not listed under the "Exclusions" in your Service Plan, you are eligible to work with a Network Attorney and receive a reduced fee that will be at least 25% off the attorney's normal rate. The initial consultation for each legal matter will be provided at no cost. If you retained the services of the Network Attorney prior to the effective date of your legal insurance membership, the reduced fee benefit is not available. Payment of attorney fees is handled directly between the plan member and the Network Attorney. Access to a Network Attorney is subject to availability. You are encouraged to contact ARAG to determine proximity to a Network Attorney within legal practice areas.

For matters that include a cap on the number of hours ARAG will pay a Network Attorney, and where your legal matter will exceed the amount covered by ARAG, the Network Attorney will bill you directly at reduced rates of at least 25% off their normal rate. You pay the attorney directly.

For Telephone Advice, if your matter cannot be resolved over the phone and is not fully covered under your insurance policy and not excluded under the "Exclusions" in your Service Plan, you are eligible to work with a Network Attorney and receive a reduced fee that will be at least 25% off the attorney's normal rate. Payment of attorney fees is handled directly between the plan member and the Network Attorney.

### **REDUCED CONTINGENCY FEES**

If your legal matter is not covered under your insurance policy and is not listed under the "Exclusions" in your Service Plan, you are eligible to work with a Network Attorney for a legal matter the Network Attorney deems to be appropriately handled through the use of a contingency fee. The Network Attorney will represent you under a contingent fee arrangement where the contingent fee will not exceed 25% of the net recovery if successfully resolved before trial, or will not exceed 33% of the net recovery if successfully resolved during or after trial, or will not exceed 40% of the net recovery if successfully resolved on or after an appeal. The initial consultation for each legal matter will be provided at no cost. If you retained the services of a Network Attorney prior to the effective date of your legal insurance membership, the reduced contingency fee benefit is not available.

---

## IDENTITY THEFT SERVICES

---

A service that gives you access to:

- **Identity Theft Specialists** who will help you determine appropriate steps to begin recovery and help you monitor the progress of your recovery.
- **Toll-free legal advice** from a Telephone Network Attorney to assist with legal-related problems that the theft of your identity may have caused.
- **Identity Theft Materials**, including:
  - An Identity Theft Prevention Kit to help protect yourself from becoming a victim of identity theft in the first place,
  - An Identity Theft Victim Action Kit to help speed your recovery should you become an identity theft victim,
  - A tracking document to help you keep track of phone calls, e-mails and letters for attorneys, and
  - An Identity Theft Affidavit to help you report your identity theft to necessary parties.

---

## IMMIGRATION

---

A service that gives you toll-free access to Telephone Network Attorneys for:

- Legal advice and consultation
  - Immigration processes and guidelines.
  - Filing and processing of applications and petitions.
  - Laws and regulations governing various types of immigration benefits; including asylum, adjustment of status, business visas, and employment authorizations.
  - Deportation and removal proceedings.
- Document review of any immigration forms
- Document preparation of affidavits and powers of attorney
- Preparation for immigration hearings

For additional immigration services, Network Attorneys provide a reduced rate of at least 25% off their normal rates for any representation-based immigration services. Network Attorneys will bill the member directly.

---

## LEARNING CENTER

---

**Learning Center** – Access the Learning Center for an extensive online library of easy-to-read articles, guidebooks and videos created to help you:

- Learn more about dealing with common legal and financial matters, like estate planning, identity theft and consumer protection.
- Understand how the legal insurance plan works and the coverages, services and resources it provides.

---

## DIY DOCS®

---

**Do-It-Yourself Legal Documents** - Online access to documents authored and reviewed by attorneys for accuracy and state-specific compliance in all 50 states. These documents can assist you with everyday life, including issues involving:

- |                         |                          |
|-------------------------|--------------------------|
| • Automobiles           | • Childcare              |
| • Caregiving            | • Residential Contractor |
| • Estate Administration | • Finances               |

*Easy-to-Use Interactive Document Assembly Tool:* Helps you efficiently create your own documents by asking simple questions.

*My Documents:* Online document storage and 24/7 access to create, update, retrieve and print your documents.

*Legacy Planning:* Create essential legal documents yourself with the help of DIY Docs, including:

- |                                 |                 |
|---------------------------------|-----------------|
| • Financial Power of Attorney   | • Living Will   |
| • Health Care Power of Attorney | • Standard Will |

---

## CAREGIVING SERVICES

---

**Reduced Fee Services** - Should your parents/grandparents legal matter require legal representation, Network Attorneys provide reduced fee services of at least 25% off their normal rate for most legal matters. Payment of the attorney fees is handled directly between the parent/grandparent and the Reduced Fee Network Attorney. Access to a Reduced Fee Network Attorney is subject to availability. You are encouraged to contact ARAG to determine proximity to a Reduced Fee Network Attorney within legal practice areas.

**Caregiver Support Services** - Balancing work and taking care of loved ones can be overwhelming. Fortunately, members have access to personalized guidance from expert Care Coaches and digital educational and support tools to assist them with their caregiving needs.

Caregiving services assists members and their families in finding adult and senior care, empowering them to:

- **Gain access to personalized content and resources:** Member answers a few simple questions to optimize their experience with tailored insights, services and learning resources for informed caregiving decisions based on their needs.
- **Work with a coach:** Dedicated Care Coaches provide proactive, personalized support in navigating caregiving challenges. Wherever members are on their caregiving journey, Care Coaches can help members:
  - Understand and identify the appropriate care options for their loved ones, including in-home care, nursing home and assisted living, confirming availability, assistance with the application process, validating licensure and certifications and identifying pricing, costs and payment obligations.
  - Sort through the essential financial resources, including health and long-term care insurance, Medicare, Medicaid and VA benefits.
- **Plan and manage care:** Use the robust mobile landing page and app to create and share caregiver support plans, upload and track important legal documents, providers, medications and coordinate with their care team of friends, family and professionals.

With these caregiving services, members can get support, resources and guidance on topics like chronic diseases, mental health, home and facility-based care, financial needs and end-of-life planning.

**Caregiving Guidebook** - As a member, you have access to a "go-to" guidebook providing you with the tools and resources needed to take a proactive approach in your caregiving role.

---

## EXCLUSIONS

---

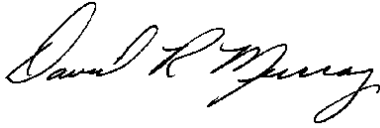
The plan services do not include:

1. Matters against us, the named plan member or the plan sponsor.
2. Matters arising out of a business interest, investment interests, employment matters, employee benefits, your role as an officer or director of an organization, and patents or copyrights.

3. Matters deemed by us to be frivolous or lacking merit.
4. Matters outside the jurisdiction of the United States of America.

This plan is effective January 01, 2026 and shall continue in effect for one year. Thereafter, the plan shall be automatically renewed for additional one year terms unless terminated by the plan administrator or plan sponsor upon thirty (30) days' prior written notice to the other party.

ARAG Services, LLC

A handwritten signature in black ink, appearing to read "David R. Murray". The signature is fluid and cursive, with the first name "David" and last name "Murray" clearly distinguishable.

David R. Murray  
President

## **ARAG'S Privacy Policy and Notice of Personal Information Practices**

This Privacy Policy and Notice of Personal Information Practices is between ARAG ("Company" or "We") and our policyholders and the plan members ("You" or "Your"). We are committed to protecting Your privacy and Your personal information that You share with us. This policy describes the type of information We may collect from You or that You may provide as a policyholder or plan member at the time of enrollment and in Your normal course of business with us and our practice for collecting, using, maintain, protecting, and disclosing that information.

Here are the basics of our privacy policy and how We collect and use Your personal information. Continue reading to see the entire policy.

- We collect personal information from You directly and from Your transactions with us.
- We will not sell Your information to third parties.
- Any third parties who perform services for us are required to safeguard any customer information and may only use it in connection with performing those services.
- We extensively secure and limit access to Your information.
- We protect information about potential, current, and former policyholders, members, applicants, attorneys, and team members.

### **The Information Collected**

We collect several types of information from You ("Personal Information"). The following sections tell You more about how and when We collect Your personal information.

#### **Information Collected**

1. Personal information We collect may consist of:

- Name.
- Address.
- Phone Number.
- Email and IP address.
- Social Security Number.
- Date of birth.
- Signature.
- Bank account number.
- Employer information if You are enrolled in a group legal plan.
- Gender.
- Geolocation data, audio and electronic information.
- Court records, government records, driving records, property information.
- Inferences may be drawn from Your personal information collected.
- Tax identification information if We conduct business with You.
- Professional and education information.
- These categories of information may also be collected for eligible dependents covered under Your legal plan.

2. Sources We may use to collect personal information:

- Directly from You when submitting an application, an enrollment form and in Your communications and transactions with us.
- Claims submitted.
- Persons, including attorneys who are or will become involved in processing Your application, Your enrollment form and servicing Your policy or any claims You may make.
- Court records, government records, driving records, property information to enable us to determine coverage and process claims.
- Your employer if You are enrolled in an employer-sponsored legal plan available through Your employer as a voluntary benefit.
- Financial institution.



- If You participate in a survey, We collected the email address and contents of the email; and information volunteered in response to the survey.

3. The information We collect is used:

- To fulfill our responsibilities to You, process and service Your policy, process premium payments, determine coverage, confirm transactions, process and settle claims, maintain and secure Your legal plan account with us, provide support and services, respond to inquiries, investigate and address Your concerns, and for testing, analysis, surveys and product development.
- To respond to law enforcement requests and as required by applicable law, court order, or governmental regulations.
- As directed by You.
- To notify You of new services and special offers.

If You do not wish to be contacted by email for non-policy related communications, You may unsubscribe by following the instructions at the bottom of any ARAG email You receive or by contacting us.

If You are a policyholder or member, You can log in to your account at [ARAGlegal.com](http://ARAGlegal.com) to manage Your email subscriptions. To access Your email subscriptions, click on My Account in the top right of the homepage, then click on Email Address and Subscriptions on the left side of the screen. If You are not a policyholder or member, You may unsubscribe via the footer of Your email or by contacting us.

### **The Information We Disclose**

Information about our team members, customers, former customers or former team members will only be shared as permitted or required by law. Information about You or Your company that has been collected is maintained in Your or Your company's policy and/or claims records. ARAG does not sell Your information. ARAG team member information is maintained in Your individual employee file.

Information about our former customers and about individuals who have obtained quotes from us is safeguarded to the same extent as information about current policyholders or plan members.

We may disclose Your personal information without prior written authorization when reasonably necessary:

- To persons or organizations who need the information to perform a business, professional or insurance function for us or You. For example, businesses that assist us with administrative functions or marketing. When We disclose personal information for business purposes, We enter into a contract that describes the purpose and requires the recipient to both keep that personal information confidential and not use it for any purpose except in performing the contract.
- To an insurance institution agent or insurance-support organization to perform its function in connection with an insurance transaction involving You or to collect information for the purpose of detecting and preventing insurance crimes or fraudulent claims.
- To those persons involved in processing Your application, enrollment, processing transactions, investigating claims, concerns and complaints. This may include investigators and attorneys who need the information to investigate or settle a claim involving You as well as another insurance company if You are involved in an incident with their insured.
- To an insurance regulatory authority, or a law enforcement or other governmental authority pursuant to law such as in response to a subpoena; to protect our legal interests as well as in cases of suspected fraud.
- For the purpose of conducting actuarial or research studies in which You will not be identified in any report and any materials that do identify You will be destroyed as soon as they are no longer needed. The research organization agrees not to disclose the information unless permitted by law.
- To a person who agrees that their only use of the information will be in connection with the marketing of a product or service and no privileged information or personal information relating to Your character or protected class information will be disclosed.

- To an affiliate whose only use of the information will be in connection with an audit of the insurance institution or agent, or the marketing of an insurance product or service and the affiliate agrees not to disclose the information for any other purpose to unaffiliated persons.
- To a group policyholder for the purpose of reporting claims experience or conducting an audit of the insurance institution's or agent's operations or services, provided the information disclosed is reasonably necessary for the group policyholder to conduct the review or audit.

#### **Access to Your Personal Information**

You or Your authorized agent have the right to submit a request to know what information We collect and maintain; the right to obtain a copy of the information You provided to us in a portable and, to the extent technically feasible, readily usable format; the right to submit a request to delete Your information; and the right to submit a request to correct inaccuracies to the information We maintain unless We are exempt from honoring Your request under law. We will not discriminate against You, nor will You face retaliation for exercising these rights. You may submit Your request to ARAG via the following mailing address:

Mailing address:

Privacy Administration  
Attention: Legal Department  
ARAG North America Incorporated  
500 Grand Avenue, Suite 100  
Des Moines, IA 50309

Or email us at [legal@ARAGlegal.com](mailto:legal@ARAGlegal.com)  
Or via our website <https://www.araglegal.com/> using the "Contact Us" tab

#### **Confidentiality and Security**

We restrict access to Your personal Information to our employees who We have determined need it in order to provide products or services to You. We train our employees to safeguard customer information, and We require them to sign confidentiality and non-disclosure agreements. We maintain strict physical, electronic, and procedural safeguards to protect Your personal information from unauthorized access by third parties.

#### **Changes to This Privacy Policy**

We may modify our privacy policy from time to time. The most recent version is always posted at [ARAGlegal.com](https://www.araglegal.com/).

#### **What to Do If You Have Privacy or Security Concerns**

If You have a concern about privacy or security at ARAG, We want to hear about it.

Please write to us at:

Privacy Administration  
Attention: Legal Department  
ARAG North America Incorporated  
500 Grand Avenue, Suite 100  
Des Moines, IA 50309

or call us at (800) 888-4184  
or email us at [legal@ARAGlegal.com](mailto:legal@ARAGlegal.com)

The Effective Date of this Privacy Policy is April 1, 2025.