



curative

CURATIVE HEALTH PLAN

GROUP APPLICATION

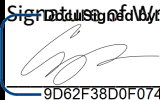
BASIC EMPLOYER INFORMATION

Group/Employer's Legal Name		Calallen Independent School District	
EIN	SIC	Nature of Business	# of yrs in business
74-6000464	8299	Schools and Educational Services	110
Organization Type			
<input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> Other <u>Public School District</u>			
Primary Address		City	Zip Code
4205 Wildcat Drive		Corpus Christi	78410
Billing Address		City	Zip Code
4205 Wildcat Drive		Corpus Christi	78410
Administrative Contact	Title	Phone #	Email Address
Kelsey Ramos	Assistant Superintendent	(361) 242-5600 X 10022	kramos@calallen.org
Billing Contact	Title	Phone #	Email Address
Melissa Saldana	Employee Benefits & Records Specialist	(361) 242-5600 X 10016	msaldana@calallen.org
Coverage Effective Date	Plan Year (Month/Month)		
September 1, 2024	September - September		
Current Carrier Information			
Name of Carrier	Initial Effective Date		Coverage End Date
TSHBP			8/31/2024
Will you be terminating the coverage? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<i>Note: Curative Health Plan can be offered along with other health plan coverage as long as current minimum participation requirements are met.</i>			
Please provide a copy of the current benefit booklet and last monthly billing statement.			
Do you want to offer the Fertility Rider? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Do you have Workers Compensation?		If so, name of Carrier	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		SchoolComp	

Employer Name Calallen Independent School District**ELIGIBILITY INFORMATION**

# of Total Employees <u>619</u>	# of Eligible Employees in the Curative Service Area <u>619</u>	# of Hours per week to be eligible <u>20</u>
Eligible Classifications <input checked="" type="checkbox"/> Full-Time <input checked="" type="checkbox"/> Part-Time <input type="checkbox"/> Retirees <input type="checkbox"/> Other _____		Classifications Excluded _____
Waiting Period for new hires (cannot exceed 90 days) <input type="checkbox"/> 1st of the Month following Date of Hire <input type="checkbox"/> 1st of the Month following ____ <input type="checkbox"/> months <input type="checkbox"/> days of employment <input checked="" type="checkbox"/> Date of Hire (no waiting period) <input type="checkbox"/> ____ <input type="checkbox"/> months <input type="checkbox"/> days of employment following Date of Hire		Waiting period waived for initial enrollees <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No % of Employer Contribution Employee Dependents <u>\$375</u> <u>\$0</u>
Do you continue medical coverage during a leave of absence (not including State Continuation or COBRA Coverage)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Note: Limited to no more than 13 consecutive weeks for non-medical leave and 26 consecutive weeks for a medical leave.</i>		

PRODUCER INFORMATION

1. Writing Agent's Name <u>Coby James</u>	Agency Name <u>Higginbotham Public Sector</u>	Phone # <u>(800) 583 - 6908</u>	Email Address <u>CBJames@higginbotham.net</u>
Street Address <u>2175 N Glenville Drive</u>		City <u>Richardson</u>	Zip Code <u>75082</u>
Commission paid to: <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Agency			
Signature of Writing Agent  <u>9D62F38D0F074BF...</u>		Date <u>8/5/2024</u>	
2. Agent's Name	Agency Name	Phone #	Email Address
Street Address		City	Zip Code
Commission paid to: <input type="checkbox"/> Agent <input type="checkbox"/> Agency			
Signature of Agent		Date	
If commission is split between 2 agents, designate percentage for each Agent: Agent #1 _____% Agent #2 _____%			

Employer Name Calallen Independent School District

The Employer certifies that the information provided in this Application is complete and accurate. The Employer shall notify Curative promptly of any changes in this information that may affect the eligibility of employees or their dependents, including the addition of a newly eligible employee and dependents. Prior to receiving notification of approval, the Employer shall notify Curative promptly of any significant changes in the health status of an eligible employee or dependent including any inpatient hospital admissions. Curative shall be entitled to rely on the most current information in its possession regarding the eligibility and status of any employees and their dependents in providing coverage under the policy/policies which application is being made.

I represent to the best of my knowledge the information I have furnished is accurate and includes any employees and dependents who have elected continuation of insurance benefits. I understand that intentional misstatements and misrepresentations of a material fact or omissions that constitute fraud, in the information requested on this form can result in the adjustment of rating or voiding of insurance.

By initialing here DS, I understand and consent to the Benefit Booklet and other documents, notices and communications regarding the benefit plan indicated herein on this Application may be transmitted electronically to Employer for delivery to Employer's enrolled employees. This consent remains in effect until it is withdrawn. Employer may withdraw its consent at any time or request a document in a paper or non-electronic form.

Knowingly or willfully presenting a false or fraudulent claim for payment of a loss or benefit or knowingly or willfully presenting false information, or concealing information for the purpose of misleading, in an application for insurance, is a crime punishable by fines and confinement in prison.

Upon receipt by Curative of this signed Employer Application and payment of the required monthly premium, the Group Policy is deemed executed. The deposit check in the estimated amount of the first month's premium is not considered payment of the required policy charges.

DocuSigned by:		
<u>Kelsey Ramos</u>	Assistant Superintendent	8/5/2024
DA65153D561724...	Title	Date
Employer Signature		

PRIOR COVERAGE SHOULD NOT BE TERMINATED BEFORE RECEIVING APPROVAL CONFIRMATION FROM CURATIVE



Employer: Calallen Independent School District

Effective Date: September 1, 2024

Associated Companies: names of other affiliated/owned entities of this Employer (*Applicable Large Employer*)

Final Monthly Premiums: if other than composite or 4-Tier rates, attach a separate sheet

Tier	Plan Name or ID	Plan Name or ID	Plan Name or ID
	EPO	PPO	PPO+
Employee Only (EE)	\$ 443.82	\$ 522.33	\$ 575.79
Employee + Spouse (ES)	\$ 1241.75	\$ 1461.44	\$ 1611.00
Employee +Child(ren) (EC)	\$ 843.71	\$ 992.99	\$ 1094.60
Family (F)	\$ 1638.85	\$ 1928.79	\$ 2126.18

This Group Health Care Contract ("Group Contract") is made between Curative Insurance Co., a Texas Insurance Company hereinafter referred to as "Curative" and Calallen Independent School District (Employer), a Texas-based employer of more than 50 Employees, for the provision of health services.

Curative agrees to arrange for the health care benefits described in the Benefit Booklet attached hereto and made a part of this Group Contract, subject to the Group Contract's terms. This promise is based on the Employer's application and payment of the required premiums. In the absence of fraud, all statements made by the policyholder or any insured person shall be deemed representations and no warranties, and no statement made for the purpose of effecting insurance shall avoid the insurance or reduce benefits unless contained in a written instrument signed by the policyholder or the person, a copy of which has been furnished to the policyholder.

The Employer must reasonably and appropriately safeguard PHI created, received, maintained, or transmitted to or by the Employer on behalf of the health plan. Employer shall not use PHI for employment or benefits-related decisions.

All provisions in the Benefit Booklet apply to the Group Contract as fully outlined in the Group Contract. The Group Contract is effective on the Contract Date, as set forth above if the initial premium has been paid and the Group Contract is duly executed below. The Group Contract continues if the required premiums are paid unless terminated, as outlined in Article 5. Curative may increase the required premiums at renewal consistent with Section 4.3.

Curative will electronically provide to each member of the insured group a Benefit Booklet. The Benefit Booklet will include the health care benefits and terms or exclusions regarding the health care benefits to be provided by this Group Contract.

Any notice required to be given according to the terms of this Group Health Care Contract shall be in writing and shall be sent by first-class mail, postage prepaid, or by certified mail or hand delivery to the receiving party at the following addresses:

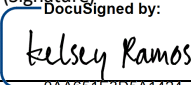
If to Employer:

Calallen Independent School District
4205 Wildcat Drive
Corpus Christi, TX 78410

If to Curative:

Curative Insurance Co.
 900 Congress Ave, Suite 500
 Austin, TX 78701

IN WITNESS WHEREOF, the parties hereto, being first duly authorized, have set their hands on the dates set forth below.

Employer	Curative Insurance Co.
(Print Name) Kelsey Ramos	
(Signature) DocuSigned by:  UAA651E3D5A1424...	
(Date) 8/5/2024	

Article 1 - DEFINITIONS

Section 1.1 Group Contract Terms. The terms used in the Group Contract have the meanings set forth herein and in the Benefit Booklet, attached hereto, and made a part of this Group Contract.

Section 1.2 Included Employers. Included Employers under the Group Contract are the Employer and its Associated Companies, as defined below if any. An Employee of more than one Included Employer will be considered an Employee of only one of those employers for the Group Health Care Coverage. On any date when an employer ceases to be an Included Employer, the Group Contract will be considered to end for Employees of that Employer. This applies to all those Employees except those who, on the next day, is within the covered classes of the Group Contract as Employees of another Included Employer.

Section 1.3 Associated Companies. Associated Companies are employers that are the Employer's subsidiaries or affiliates listed as "Included Employers" on the Group Enrollment Application.

Section 1.4 Notification. Employer must notify Curative, in writing, when an employer listed as an Associated Company is no longer one of its subsidiaries or affiliates.

Article 2 - EMPLOYER REQUIREMENTS

Section 2.1 Employer Eligibility. During this Group Contract term, the Employer will promptly notify Curative of any significant changes in the Employer's group composition, eligibility requirements, or employees' costs associated with coverage. Any such change that is deemed adverse by Curative (unless agreed to in writing by Curative before such change) shall give Curative the option, in its discretion, of terminating this Group Contract, adjusting rates, or limiting enrollment. Curative may exercise its options by giving the Employer at least 31 days' prior written notice.

Section 2.2 Participation Requirement. During this Group Contract term, the Employer must maintain at a minimum 25 employees enrolled in the Curative Health Plan.

Section 2.3 Employer Contribution. During this Group Contract term, the Employer will contribute no less than 50% of the Employee's premium for their lowest Health Plan Premium.

Article 3 – ELIGIBILITY OF INDIVIDUALS

Individuals are eligible for enrollment hereunder only upon meeting and continuing to meet the following requirements:

Section 3.1 Eligible Employee. Eligible employees of the Employer and their eligible Dependents shall be those persons who meet the criteria outlined in the Benefit Booklet and specified in the "Eligibility Information" section of the Group Application. Eligible Employees include employees who work on a full-time basis and who usually work at least 30 hours a week. The term includes a sole proprietor, a partner, and an independent contractor, if the individual is included as an employee under a health benefit plan of the employer. The term does not include employees who:

- [work on a part-time, temporary, seasonal, or substitute basis]
- [are covered under another health benefit plan]
- [are covered under a self-funded or self-insured employee welfare benefit plan that provides health benefits and is established in accordance with the Employee Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et seq.)]
- elect not to be covered under the employer's health benefit plan and are covered under:

- the Medicaid program
- another federal program, including the CHAMPUS program or Medicare program
- a benefit plan established in another country

Section 3.2 Employees. Employees include individuals employed by Employer.

Section 3.3 Extension of Eligibility. Curative and the Employer may together agree to the extension of eligibility to persons other than those provided in the Benefit Booklet. Any such extension of eligibility shall be in writing.

Section 3.4 Subsequent Enrollment. After the Employer's first open-enrollment period during which Eligible Persons may enroll in Curative, Eligible Persons may enroll in Curative during any subsequent annual open-enrollment period or within 31 days of having satisfied the Employer's eligibility requirements. To enroll, eligible persons must submit a completed enrollment form to the Employer and any other information that Curative may reasonably request.

Applicants will be considered enrolled after Curative has accepted the enrollment form. Curative acceptance will be based upon timely receipt from the Employer of the enrollment form and the applicable Premium Rate and satisfaction of all the Group Contract requirements.

Article 4 - PREMIUMS

Section 4.1 Payment of Premiums. Employer shall pay premiums to Curative for the Group Contract duration by reverse automated clearing house transfer by the designated due date, in accordance with the Premium Rates as noted in this form on the cover page. Except as indicated in Section 4.2, the rates shall remain in effect throughout the Group Contract; but not to exceed 12-months.

All premiums are due on or before the fifth day of the month for which coverage is provided.

If payment is not made within 30 calendar days of the due date, Curative may terminate this Group Contract coverage. If coverage is terminated under the terms of this provision, employees and dependents covered under this Group Contract will no longer be covered, and Curative will not be responsible for payment of charges for services and supplies after the effective date of termination. In addition, no continuation coverage or individual conversion option will be available.

Section 4.2 Rate Changes. Curative retains the right to amend the premium rates under this Group Contract on any of the following dates:

- a. Contract Anniversaries, or
- b. If the federal or state government mandates that a new benefit be included in the package of benefits or if a benefit is removed, the Benefit Booklet shall be amended to add or remove the new benefit. The premiums shall be adjusted accordingly.

Curative reserves the right to change premium rates when a substantial change occurs in the number or composition of covered Members. A substantial change will be deemed to have occurred when the

number of covered Members changed by ten percent (10%) or more over a thirty (30) day period or twenty-five (25%) or more over a ninety (90) day period.

- c. If the premium amounts for the Group Contract are age rated and a Member's age is misstated, the premium will be retroactively adjusted to the accurate age.

Curative shall provide Employer with 120 days' written notice of such change in premiums.

Section 4.3 Additions and Terminations. Curative will not bill prorated amounts for additions, terminations, or modifications of Members coverage during any month. Premiums are due in full for the full month of a Member's coverage.

Section 4.4 Retroactive Adjustments. Employer must notify Curative in writing within ten days of received an enrollment, termination, or change form. At the discretion of Curative, retroactive adjustments may be made for any additions and terminations of Members. However, retroactive credit will not be provided for any period more than two months before the date on which Curative received notice of termination of the Member or change in coverage class.

Additionally, no retroactive adjustment will be made if Covered Services' claims have been made for service dates after the requested termination date. Furthermore, by requesting a retroactive termination date, the Employer confirms there have been no premiums taken from the Member after the retroactive termination date.

Article 5 - TERM AND TERMINATION

Section 5.1 Term. The term of this Group Contract shall run for one year following the Contract Date appearing on this document's cover page. Unless otherwise terminated in accordance with the Group Contract, the Group Contract shall be automatically renewed for successive one-year terms on each Anniversary of the Contract Date, subject to Curative's then-current premium rates. Curative shall provide Employer with written notice of any change in premium rates, as outlined in Article 4.

Section 5.2 Failure to Pay Premiums. Curative may terminate the Group Contract if the Employer defaults on paying a premium, as outlined in Article 4. Such right of termination shall be in addition to any other remedies Curative may have at law or in equity concerning such default. Policy reinstatement shall be at the discretion of Curative.

Section 5.3 Fraud. Upon written notice to the Employer, Curative may, at its discretion, immediately terminate or rescind this Group Contract for fraud or a material misstatement made in writing and signed by the Contract Holder or may terminate the coverage of a Member for fraud or material misstatement by such Member relating to coverage under this Group Contract.

Section 5.4 Other Curative Terminations. In addition to those rights of termination otherwise provided for herein, Curative may terminate the Group Contract to the extent and in the manner permitted or required under applicable law.

Section 5.5 Termination Without Cause. The Employer may terminate the Group Contract without cause. The termination date will be effective by providing written notice to Curative with at least 60-days notice.

Section 5.6 Effect of Termination of Group Contract. Upon termination, by failure to pay premiums, all rights to benefits shall terminate at the end of the period for which all required premiums have been paid. Upon termination, all rights to services shall terminate upon the requested date by request or in writing. In either case, Employer agrees to be responsible for notifying its employees that the Group Contract has ended. Upon termination, Employer shall be obligated to pay to Curative all billed charges for all health services and benefits received by a Member or a Member's dependent after the Group Contract is terminated. Upon default in making payments, Curative shall notify Employer and Members of the effective date of termination, and individual conversion coverage will not be available. No termination shall relieve the Employer from any obligation incurred before the date of termination of this Group Contract. It is the Employer's responsibility to notify the Members of the Group Contract's termination in compliance with all applicable laws. However, Curative reserves the right to inform Members affected by the Group Contract for any reason, including non- payment of premium. The Employer shall provide written notice to Members of their rights upon termination of coverage.

Section 5.7 Termination of Member's Coverage. Coverage under this Group Contract will terminate at midnight of the last day of the month in which a Member ceases to meet the eligibility requirements outlined in the Benefit Booklet and Group Enrollment Application and notice to Curative is provided by Employer. Employer is obligated to pay Curative the full monthly premium based upon the Member's enrollment.

Article 6 - THE CONTRACT

Section 6.1 Contract Documents. The parties agree that the entire Group Contract shall consist of the following parts:

- a) Group Health Care Contract;
- b) Group Enrollment Application;
- c) Employee Group Enrollment Application(s);
- d) Benefit Booklet;
- e) Summary of Benefits & Coverages; and
- f) Riders to the "Benefit Booklet."

Section 6.2 Amendment of Group Contract. The Group Contract may be amended:

- a) by Curative upon a change in federal or state law or by federal or state directive;
- b) as requested in writing by Curative and agreed to by Employer; or
- c) as required by Curative and agreed to by Employer.

To be effective, a change must:

- a) be indicated in an endorsement signed by an officer of Curative;
- b) in the case of a federal or state law or directive, be shown in an amendment and signed

by an officer of Curative;

c) in the case of a change required by Curative, be reflected in an amendment signed by an officer of Curative and accepted by Employer. Employer's acceptance shall be demonstrated by payment of a premium by Employer on or after the effective date of such change; or in the case of a change that Curative requested by an amendment signed by both the Employer and an officer of Curative. Rates may be amended in accordance with Article 4.

Section 6.3 Modification of Coverage. Curative shall have the right to modify the Group Contract in accordance with Texas law regarding prescription drug formulary modifications or for other reasons if the modification occurs at the time of coverage renewal, is effective uniformly among all employers covered by the Curative plan, and Curative provides notice to the Commissioner of Insurance and each affected covered employer of the modification not later than the 120th day before the date the modification is effective.

Article 7 - GENERAL PROVISIONS

Section 7.1 Material Provided to Employees. Curative shall provide to individual identification cards and a Benefit Booklet document including a Summary of Benefits & Coverages for each Member.

Section 7.2 Payment to Providers. Curative will assure that in-network Providers or facilities that treat Members will seek reimbursement from Curative and not from a Member or Employer, except with respect to plan cost share amounts such as Copayments, Co-Insurance, Deductibles, and other costs or expenses required to be paid by a Member directly to a Provider according to the Benefit Booklet.

Section 7.3 Records. The parties agree that Curative must obtain and review specific information about Members to meet its obligations under this Group Contract. Curative is under no obligation to tell, nor obtain the consent of, a Member to obtain such information.

Employer will keep a record of all Members, including key facts about their coverage under the Group Contract. Employer agrees to notify Curative immediately upon any change in any Member's eligibility, including termination of the employee's employment. If Employer fails to notify Curative of a change in eligibility, Employer shall be responsible for any premiums for any Member or Members' covered dependents on or after the date such Member fails to satisfy the eligibility requirements. Curative agrees to retain in confidence any medical information it possesses concerning a Member but may release such information to its authorized agents and Participating Providers as necessary to process the claim.

Section 7.4 Authorization to Use and Disclose Information and Records

Employer hereby certifies that it maintains all authorizations to release information from each employee to Curative to permit the use and disclosure of the employee's Protected Health Information ("PHI") as such is defined by the Health Insurance Portability and Accountability Act of 1996, as amended ("HIPAA") for enrollment according to the Group Contract and to disclose such information to any third-party vendors or business associates of the Employer or Curative for enrollment. Employer agrees to provide copies of all authorizations to Curative upon request and defend and hold Curative harmless from any claims, losses, costs, expenses, and liabilities that arise

from the disclosure of employee information to a third party for the purposes described herein.

Employer hereby expressly authorizes Curative to use and disclose the information contained within the Enrollment Application, including all employee-related enrollment information for healthcare benefits and disclosures to third parties that provide health and welfare benefit programs and ancillary products.

Employer acknowledges and affirms that it has the binding authority to authorize the use and disclosure of employee information, including PHI, for the purposes described by this Agreement.

Section 7.5 Independent Contractors. Each party, including its officers, agents, and employees, is an independent contractor at all times as to the other party. Nothing in this Group Contract shall be construed to make or render either party or any of its officers, agents, or employees an agent, servant, or employee of, or joint venture of or with, the other.

The relationship between Curative and Participating Providers is a contractual relationship among independent contractors. Participating Providers are not agents or employees of Curative, an agent or employee of any Participating Provider.

Participating Providers are solely responsible for any health services rendered to their Member patients. Curative makes no express or implied warranties or representations concerning the qualifications, continued participation, or quality of services of any Participating Provider. A Participating Provider's participation may be terminated at any time to the Employer or Members. Members will be provided advance notice of any Participating Provider termination.

Section 7.6 Compliance with Terms. Failure to insist upon strict compliance with any term herein (by way of waiver or breach) by either party hereto shall not be deemed to be a waiver of any other term herein or a continuous waiver in the event of any future breach or waiver of any condition hereunder.

Section 7.7 Assignment. This Group Contract may not be assigned, delegated, or transferred by either party without the express written consent of the other, and such transfer or assignment shall be void except that either party may assign this Group Contract to any affiliated entity that controls, is controlled by, or that is under common control with it now or in the future, or which succeeds to its business through a sale, merger, or other corporate transaction.

Section 7.8 Benefits. This Group Contract shall be binding upon and shall inure to the parties' benefit hereto and their respective successors and assigns.

Section 7.9 Gender and Number. The use of the masculine, feminine, or neuter gender and the use of the singular and plural shall not be given the effect of any exclusion or limitation herein; and the use of the word "person" or "party" shall mean and include any individual, trust, corporation, partnership, or other entity.

Section 7.10 Severability. If any portions of this Group Contract shall, for any reason, be invalid or unenforceable, such portions shall be ineffective only to the extent of any such invalidity or unenforceability, and the remaining portion or portions shall nevertheless be valid, enforceable, and of full force and effect; provided, however, that if the invalid provision is material to the overall purpose and operation of this Group Contract, then this Group Contract shall terminate upon the

severance of such provision.

Section 7.11 Governing Law. The laws of Texas shall govern this Group Contract without regard to its choice of law rules.

Section 7.12 Entire Group Contract. This Group Contract, including the Benefit Booklet, amendments, all applications, all attachment riders, and endorsements attached hereto, represents the entire Agreement and understanding of the parties hereto and all prior or concurrent agreements, whether written or oral, regarding the subject matter hereof, are and have been merged herein.

Section 7.13 Inability to Arrange Services. If due to circumstances not within the reasonable control of Curative, including but not limited to a major disaster, epidemic, complete or partial destruction of facilities, riot, civil insurrection, disability of a significant part of Curative's Participating Providers or entities with whom Curative has arranged for services under this Group Contract, or similar causes, the rendition of medical or hospital benefits or other services provided under this Group Contract is delayed or rendered impractical, Curative shall not have any liability or obligation on account of such delay or failure to provide services, except to refund the amount of the unearned prepaid premiums held by Curative on the date such event occurs. Curative is required only to make a good- faith effort to arrange for the provision of services, considering the impact of the event.

Section 7.14 Incontestability. The validity of the Group Contract may not be contested after it has been in force for two years after the date of issue. In the absence of fraud, a statement made by any individual covered by the Group Contract relating to the individual's insurability may not be used in contesting the validity of the insurance with respect to which the statement was made after the insurance has been in force before the contest for two years during the individual's lifetime, and unless the statement is contained in a written instrument signed by the individual making the statement.

Recurring Commercial ACH Authorization

This Recurring Commercial ACH Authorization (the “Agreement”) authorizes Curative Insurance Company (“Curative”) to initiate ACH debit transactions from the checking or savings account listed in the Depository Account Information section below on a monthly basis for payment of policy premiums owed to Curative, along with any late charges or other fees reflected on Curative’s billing statement to Company (named below). Monthly premium payments will be initiated between the 25th and the 6th business day. Curative will provide to Company a bill or other notice of the amount to be debited prior to the draft date. This Agreement also authorizes Curative to initiate ACH credit transactions to Company’s account below to correct erroneous debits or refund money to Company and such other ACH debit transactions as may be subsequently agreed to by Curative and the Company.

Company Name: Calallen Independent School District
(must match name on account identified below)
TIN: 74-6000464
Address: 4205 Wildcat Drive, Corpus Christi, TX 78410
Phone Number: 361-242-5600
Email Address: kramos@calallen.org
Policy Number: _____

Invoice Mailing Contact

Contact Name: Melissa Saldana
Contact Email Address: msaldana@calallen.org
Contact Phone Number: 361-242-5600

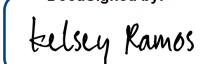
Depository Account Information

Bank Name: Frost Bank
Routing No.: 114000093
Account No.: 920009288
Type of Account: ☒ Checking ☐ Saving

By signing this form, you certify that you are an authorized representative of the Company named above and are authorized to execute this Agreement on behalf of the Company. The Company understands that this Agreement will remain in full force and effect until it is cancelled in writing by mail to Denise Fleming, Leading Account Manager, via email at denisefleming@curative.com, with copy to the Accounting Department via email at healthplanbilling@curative.com. The Company understands that Curative requires notice

received at least 10 days prior to the proposed effective date of the termination to cancel this authorization. If sufficient funds are not available on the draft day, you authorize Curative to make a second draft attempt within 7 business days. Company acknowledges that its bank may charge an insufficient fund fee if Curative attempts drafts when sufficient funds are not available. Company acknowledges that the account listed above is a corporate or commercial account and not an account used primarily for personal, family, or household purposes. Company agrees not to dispute any ACH transaction initiated by Curative that are subject to this Agreement, so long as such transactions comply with the terms of this Agreement. If any charge is dishonored for any reason, Curative shall not be under any liability even though such dishonor results in the forfeiture of insurance. By entering into this Agreement, both Curative and Company agree to be bound by applicable U.S. law and the NACHA Operating Rules as they pertain to commercial ACH transactions. The laws of the State of Texas, without regard for its choice of law rules, shall govern this Agreement and all claims or causes of action (whether in contract, tort, or statute) that may be based upon, arise out of or relate to this Agreement.

The Company authorizes Curative to initiate ACH debits and credits to collect recurring premium amounts and other amounts agreed to by the Curative and the Company and billed to the Company.

DocuSigned by:

0AA651E3D5A1424...
Signature

Kelsey Ramos

Print Name

Assistant Superintendent

Title

8/5/2024

Date

Return this Agreement to Curative via Overnight Courier:

Mail: 900 Congress Ave
Suite 500
Austin, TX 78701
United States

With Copy via email to:

(1) denisefleming@curative.com

and

(2) healthplanbilling@curative.com

CURATIVE INSURANCE COMPANY
PREMIUM REDUCTION CREDIT ENDORSEMENT

This Endorsement is attached to, made part of, and amends the Group Health Care Contract with **Calallen Independent School District**, Group #: N/A

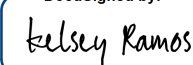
The following Section 4.5 is added as a new section to Article 4 – Premiums of the Group Health Care Contract:

Section 4.5 Premium Reduction Credit. Calallen Independent School District may be eligible for a Premium Reduction Credit equal to **\$75,000** of premium which will be applied to the premium for the 2nd month. All subsequent premium due dates, grace periods, and other requirements of the Group Contract will remain unchanged and unaffected by this Premium Reduction Credit. In the event the Group Contract terminates less than one year from the date the Premium Reduction Credit is granted, **Calallen Independent School District** agrees to pay the pro rata cost of the Premium Reduction Credit.

Except as provided above, all terms, conditions, exclusions and limitations in the Group Health Care Contract continue to apply.

Curative Insurance Company
By
Tami Wilson-Ciranna
President

Date

DocuSigned by:

0AA651E3D5A1424...

Employer Signature

Assistant Superintendent

Title **Date**

CURATIVE INSURANCE COMPANY RATE GUARANTEE ENDORSEMENT

This Endorsement is attached to, made part of, and amends the Group Health Care Contract with **Calallen Independent School District**, Group #: [X].

Section 4.1 of the Group Health Care Contract is replaced with the following:

Section 4.1 Payment of Premiums. Employer shall pay premiums to Curative for the Group Contract duration by reverse automated clearing house transfer or reverse wire transfer or check by the designated due date, in accordance with the Premium Rates as noted in this form on the cover page. Except as indicated in Section 4.2, the rates shall remain in effect throughout the Group Contract and one subsequent renewal; but not to exceed 24-months.

All premiums are due on the first day of the month for which coverage is provided.

If payment is not made within 30 calendar days of the due date, , Curative may terminate this Group Contract coverage. If coverage is terminated under the terms of this provision, employees and dependents covered under this Group Contract will no longer be covered, and Curative will not be responsible for payment of charges for services and supplies after the effective date of termination. In addition, no continuation coverage or individual conversion option will be available.

Section 5.1 of the Group Health Care Contract is replaced with the following:

Section 5.1 Term. The term of this Group Contract shall run for one year following the Contract Date appearing on this document's cover page. Unless otherwise terminated in accordance with the Group Contract, the Group Contract shall be automatically renewed for successive one-year terms on each Anniversary of the Contract Date, subject to Curative's then-current premium rates except as provided for in the applicable Curative Insurance Company Rate Guarantee Endorsement. Curative shall provide Employer with written notice of any change in premium rates, as outlined in Article 4.

Except as provided above, all terms, conditions, exclusions and limitations in the Group Contract continue to apply.

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Curative Insurance Company	Date
By	
Tami Wilson-Ciranna	
President	

<div><div>DocuSigned by:</div><div></div><div>0A651E3D5A1424...</div></div>	<hr/>	<hr/>
Employer Signature	Title	Date
	Assistant Superintendent	8/6/24