

OKLAHOMA AMENDATORY ENDORSEMENT

This Rider is attached to and made part of the “policy” as of the Policy Effective Date shown in the Policy’s Application effective February 1, 2016. It is subject to all the provisions, limitations and exclusions of the “policy” except as this Rider specifically modifies them.

The “policy” and Summary of Benefits are amended as follows:

1. The following fraud warning is added to the “policy”:

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

2. The following provision is added to the section entitled **FILING A CLAIM:**

Within forty-five (45) days after receipt of an “insured’s” proof of “loss”, “we” shall inform such “insured” in writing of our acceptance or denial of the claim or if further investigation is necessary. If further investigation is required, “we” shall complete such investigation of a claim within sixty (60) days after notification of proof of “loss” unless such investigation cannot reasonably be completed within such time. If such investigation cannot be completed, or if “we” need more time to determine whether a claim should be accepted or denied, “we” shall so notify the “insured” within sixty (60) days after receipt of the proof of “loss”, giving reasons why more time is needed. If the investigation remains incomplete, “we” shall, within sixty (60) days from the date of the initial notification, send to such “insured” a letter setting forth the reasons additional time is needed for investigation. Except for an investigation of possible fraud which is supported by specific information giving a reasonable basis for the investigation, the time for investigation shall not exceed one hundred twenty (120) days after receipt of proof of “loss”.

2. The section entitled **EXCLUSIONS**, item 10, **Terrorism**, is deleted in its entirety.

3. With regard to Oklahoma “Participating Organizations,” the following language is added to the **TERMINATION OF INSURANCE** provision:

During the first forty-five (45) business days that a “participating organization’s” coverage is in effect, “we” may cancel or non-renew its coverage under this “policy” by mailing or delivering to the “master policyholder” and “participating organization” written notice at least:

- a. Fifteen (15) days before the effective date of cancellation if “we” cancel for nonpayment of premium; or
- b. Forty-five (45) days before the effective date of non-renewal or cancellation, if “we” cancel for any reason.

After the “participating organization’s” coverage under the “policy” has been in force for more than forty-five (45) business days or more than forty-five (45) business days after the effective date of a renewal, “we” may cancel or non-renew for the following reasons only:

- a. Nonpayment of premium;
- b. Discovery of fraud or material misrepresentation in the procurement of the insurance or with respect to any claims submitted thereunder;
- c. Discovery of willful or reckless acts or omissions on the part of the named insured or “participating organization” which increase any hazard insured against;
- d. The occurrence of a change in the risk which substantially increases any hazard insured against after insurance coverage has been issued or renewed;
- e. A determination by the Commissioner of Insurance that the continuation of the “policy” would place us in violation of the insurance laws of this state;
- f. Conviction of the named insured of a crime having as one of its necessary elements an act increasing any hazard insured against; or
- g. Loss of or substantial changes in applicable reinsurance.

“We” will give ten (10) days advance written notice for a cancellation and forty-five (45) days advance written notice for a non-renewal of the “participating organization’s” coverage and provide the reason for such action.

There are no other changes to the “policy” or Summary of Benefits.