

**ATTACHMENT E**  
**DEPENDENT STUDENT CARE RIDER**

The benefits in this Rider supplement the benefits set forth in the Certificate, of which this Rider is a part. Nothing contained herein shall be held to vary, alter, waive or extend any of the terms, conditions, provisions or limitations of the Plan Document, except as expressly stated below. Capitalized terms have the meaning ascribed to them in the Plan Document.

I.     Benefit

Services to treat an illness or injury for Covered Dependents will be covered out of the Service Area while they are full time students at an accredited educational institution located out of the Service Area, subject to the Copayments in Attachment A and the maximum benefit listed below, with authorization from VIVA Health prior to obtaining the service. For purposes of this section an accredited educational institution is an institution of higher education accredited by an association recognized by the United States Secretary of Education and qualified to participate in the Student Financial Assistance Program (SFAP).

Health services provided in the Service Area and Emergency Services continue to be covered according to the terms of the Certificate and are not modified by this rider.

Maximum Benefit Per Calendar Year    [\$1,500]

II.    Limitations

Covered Services under this Rider are limited to health services to treat an illness or injury only and do not include preventive care. Elective surgery is covered in the Service Area only, subject to the limitations, Copayments or Deductibles and required authorizations as stated in the Plan Document and applicable Attachments.

Emergencies are covered under the Emergency Care Section as set forth in the Certificate.

Covered Dependents remain eligible for Covered Services within the Service Area as set forth in the Certificate and applicable Attachments.