



Accident Insurance

can pay you money for covered accidental injuries and their treatment.

How does it work?

Accident Insurance can pay a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur off the job. And it includes a range of incidents, from common injuries to more serious events.

What's included?

Wellness Benefit

Every year, each family member who has Accident coverage can also receive \$50 for getting a health screening test, such as:

- Blood tests
- Chest X-rays
- Stress tests
- Colonoscopies
- Mammograms

Why is this coverage so valuable?

- It can help you with out-of-pocket costs that your medical plan doesn't cover, like co-pays and deductibles.
- You're guaranteed base coverage, without answering health questions.
- The cost is conveniently deducted from your paycheck.
- You can keep your coverage if you change jobs or retire. You'll be billed directly.

Who can get coverage?

You	If you're actively at work*	
Your spouse	Ages 17 and up	
Your children	Dependent children from birth until their 26th birthday, regardless of marital or student status.	

How much does it cost?

Monthly Premium		
You	\$11.75	
You and your spouse	\$18.23	
You and your child(ren)	\$21.27	
You, your spouse and child(ren)	\$28.25	

For illustrative purposes only. Actual cost may vary.

*Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage. Spouses and dependent children must reside in the United States to receive coverage.

Accident Insurance – Schedule of Benefits

Covered injuries	Benefit amount			
Fractures				
Open reduction (dependent on location of injury)	\$150 to \$7,500			
Closed reduction (dependent on location of injury)	\$75 to \$3,750			
Chips	25% of closed amount			
Dislocations				
Open Reduction (dependent on location of injury)	\$300 to \$6,000			
Closed Reduction (dependent on location of injury)	\$150 to \$3,000			
Burns				
At least 10 square inches, but less than 20 square inches	2nd degree – \$0 3rd degree – \$2,500			
At least 20 square inches, but less than 35 square inches	2nd degree – \$0 3rd degree – \$5,000			
35 or more square inches of the body surface	2nd degree – \$1,000 3rd degree – \$10,000			
Skin grafts for 2nd and 3rd degree burns	50% of burn benefit			
Skin graft for any other accidental	traumatic loss of skin			
At least 10 square inches, but less than 20 square inches	\$150			
At least 20 square inches, but less than 35 square inches	\$250			
35 or more square inches of the body surface	\$500			
Concussion	\$150			
Coma	\$10,000			
Ruptured disc	\$800			
Knee cartilage				
Torn with surgical repair	\$750			
Exploratory surgery or cartilage shaved, only	\$150			
Laceration	\$25-\$600			
Tendon/ligament and rotator cuff				
Surgical repair of one	\$800			
Surgical repair of two or more	\$1,200			
Exploratory surgery without repair	\$150			
Dental work, emergency				
Extraction	\$100			
Crown	\$300			
Eye injury	\$300			

Accident coverage is a limited policy.

Underwritten by:

Unum Life Insurance Company of America, Portland, Maine The information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to policy form GA-1 or contact your Unum representative.

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FOR EMPLOYEES

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Emergency room treatment Figure 1 Emergency treatment in physician of fice Either ER room or Primary Care/Specialist Primary care physician I Specialist I Urgent care facility I Hospital admission (admission or intensive care admission once per covered accident) I Intensive care confinement (per day up to 15 days) I Intensive care confinement (once per accident) I Intensive care confinement	\$150 /urgent care facility
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(per day up to 15 days)Image: Comparison of the section	\$200
(once per accident) Outpatient surgery facility service (once per accident) Pain management (epidural, once per accident)	\$400
(once per accident) Pain management (epidural, once per accident)	\$200
(epidural, once per accident)	\$50
	\$100
Treatment and other services	Benefit amount
Surgery benefit	
Open abdominal, thoracic	\$1,500
Exploratory (without repair)	\$150
Hernia repair	\$150
Physician follow-up visit (2 visits per accident)	
Primary care physician	\$75
Specialist	\$75
Urgent care facility	\$75
Chiropractic visit (up to visits per calendar year)	N/A
Therapy services (up to 10 per accident)	
Occupational therapy	\$25
Speech therapy	\$25
Physical therapy	\$25
Prosthetic device or artificial limb	
One	\$750
More than one	\$1,500
Appliance (once per accident)	\$100
Blood, plasma and platelets	\$400
Travel due to accident Transportation of more than 50+ miles from residence; 3 trips per accident; max 1,200 miles per round trip	

Lodging (per night up to 30 days per accident)	\$150		
Rehabilitation unit confinement (per day up to 15 days; max 30 days per calendar year)	\$100		
Accidental death and other covered losses	Benefit amount		
Accidental death*			
Employee	\$50,000		
Spouse	\$20,000		
Child	\$10,000		
*The accidental death benefit triples if the insured individual is injured as a fare-paying passenger on a common carrier: Employee-\$150,000; spouse-\$60,000; child-\$30,000			
Initial accidental dismemberment — or accident, not payable with initial accident \ensuremath{acc}			
Loss of both hands or both feet; or	\$15,000		
Loss of one hand and one foot; or	\$15,000		
Loss of one hand or one foot;	\$7,500		
Loss of two or more fingers, toes or any combination; or	\$1,500		
Loss of one finger or toe	\$750		
Catastrophic accidental dismembermen — once per lifetime, not payable with Loss of both hands or both feet; or loss foot	catastrophic loss of one hand and one		
Employee (prior to age 65)	\$100,000		
Spouse and child	\$50,000		
Employee (ages 65–69)	\$50,000		
Spouse and child	\$25,000		
Employee (70+ years old)	\$25,000		
Spouse and child Accidental loss — paralysis, sight, hea Initial accidental loss — one benefit per with initial dismemberment			
Permanent paralysis; or	\$15,000		
Loss of sight of both eyes; or	\$15,000		
Loss of sight of one eye; or	\$7,500		
Loss of the hearing of one ear	\$7,500		
Catastrophic accidental loss [†] — once p payable with catastrophic dismemberr Permanent paralysis; or loss of hearing the ability to speak; or loss of sight of b	nent in both ears; or loss of		
Employee (prior to age 65)	\$100,000		
Spouse and child	\$50,000		
Employee (ages 65–69)	\$50,000		
Spouse and child	\$25,000		
Employee (70+ years old)	\$25,000		
Employee (70° years only			
Spouse and child	\$12,500		

See Schedule of Benefits for a complete listing of what is covered.

THIS IS A LIMITED BENEFITS POLICY.

Effective date of coverage

Coverage becomes effective on the first day of the month in which payroll deductions begin.

Exclusions and limitations

Unum will not pay benefits for a claim that is caused by, contributed to by or occurs as a result of:

- $\boldsymbol{\cdot}$ participating in war or act of war, whether declared or undeclared;
- committing acts of terrorism;
- \cdot riding in or driving any motor-driven vehicle in a race, stunt show or speed test;
- operating, learning to operate, serving as a crew member of or jumping, parachuting, or falling from any aircraft or hot air balloon, including those which are not motor-driven. This does not include flying as a fare paying passenger;
- engaging in hang-gliding, bungee jumping, sailgliding, parasailing, parakiting;
- participating or attempting to participate in a felony, being engaged in an illegal occupation or being incarcerated in a penal institution;
- committing or trying to commit suicide or injuring oneself intentionally, whether sane or not;
- practicing for or participating in any semi-professional or professional competitive athletic contests for which any type of compensation or remuneration is received;
- having a work related injury
- having any sickness or declining process caused by a sickness, including physical or mental infirmity including any treatment for allergic reactions. Unum also will not pay benefits to diagnose or treat the sickness. Sickness means any illness, infection, disease or any other abnormal physical condition which is not caused by an injury. In addition to the exclusions listed above, Unum will also not pay the catastrophic accidental dismemberment or catastrophic accidental loss benefit for the following injuries that are caused by or are the result of:
- an insured's being intoxicated or under the influence of any narcotic unless administered on the advice of a physician; or
- injuries to a dependent child received during the birth.

Termination of employee coverage

If you choose to cancel your coverage under the policy, your coverage ends on the first of the month following the date you provide notification to your employer. Otherwise, your coverage under the policy ends on the earliest of the:

- date this policy is cancelled;
- · date you are no longer in an eligible group;
- · date your eligible group is no longer covered;
- \cdot date of your death;
- last day of the period for which you made any required contributions; or last day you are in active employment. However, as long as premium is paid as required, coverage will continue in accordance with the layoff and leave of absence provisions of this policy. Unum will provide coverage for a payable claim which occurs while you are covered under this policy.

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Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by:

Unum Life Insurance Company of America, Portland, Maine

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