# **Accident Insurance**

Member's Insurance Trust | All Eligible Employees |

# Protect your savings against an accident

Even a broken arm can result in medical costs not covered by your health plan. Accident insurance helps to protect your finances after a mishap. It pays you cash for covered accidents and treatments. You can use the money to help pay out-of-pocket medical costs or everyday expenses.

The benefit schedule on the following pages lists what the plan pays for covered accidents.



# What did Accident insurance mean for the Smiths?

This family of five is no stranger to sports accidents. Last June, their daughter Julie who is the top scorer on her soccer team tore her ACL and required surgery. Their son Robert fell and fractured his arm playing basketball that same year.

- The Smiths submitted claims for each child's ER visit, x-ray, physician appointments, and Julie's surgery.
- We reviewed the claim medical information, including details from their physicians, and approved the claims.
- The cash benefits helped the Smith family meet their medical deductible.

Falls are the leading cause of injury treated in emergency rooms every year, for people of all ages.\*



# Benefit schedule

Once your coverage goes into effect, you can file a claim for covered accidents that occur after your insurance's effective date. Unless otherwise specified, benefits are payable only once for each Covered Accident as applicable. The full list of benefits is listed here. Choose the plan that best meet your needs and your budget.

Benefit	High Plan
Life and Dismemberment Losses (shown for employee only*)	
Accidental Death	\$25,000
Accidental Death Common Carrier (pays an additional benefit if accidental death occurs while traveling as a fare-paying passenger on a public conveyance)	\$50,000
Catastrophic Loss: Both arms or both hands, both legs or both feet, one hand and one foot or one arm and one leg, or irrecoverable loss of sight of both eyes	\$50,000
Loss of one hand, foot, leg, or arm	\$7,500
Loss of sight of one eye or loss of one eye	\$7,500
Two or more fingers or toes	\$1,500
One finger or one toe	\$375

Dislocations	Open (surgery)	Closed (no surgery)
Hip	\$4,000	\$2,000
Knee, ankle, bones of the foot	\$2,000	\$1,000
Elbow or wrist	\$800	\$400
Shoulder	\$1,000	\$500
Collarbone, bones of the hand	\$1,600	\$800
Finger(s) or toe(s)	\$200	\$100
Lower jaw	\$800	\$400

Fractures	Open (surgery	Closed (no surgery)
Hip or thigh	\$4,000	\$2,000
Skull-depressed	\$6,000	\$3,000
Skull-simple	\$3,000	\$1,500
Vertebral process	\$700	\$350
Bones of the face	\$700	\$350
Bones of the nose	\$700	\$350
Leg	\$2,000	\$1,000
Vertebrae, Sternum	\$1,600	\$800
Pelvis	\$1,600	\$800
Upper jaw or upper arm	\$750	\$375
Lower jaw	\$650	\$325
Collarbone	\$650	\$325
Shoulder	\$650	\$325
Forearm	\$650	\$325
Hand/Wrist	\$650	\$325
Foot	\$650	\$325
Ankle	\$650	\$325
Kneecap	\$650	\$325
Elbow	\$650	\$325
Heel	\$650	\$325
Rib	\$350	\$175
Finger	\$350	\$175
Toe	\$350	\$175
Соссух	\$350	\$175
Multiple ribs	\$1,000	\$500
Additional Injuries		

Benefit		High	Plan	
Eye injury – Surgery			\$200	
Eye Injury – Object remove			\$100	
Gunshot wound		n/a		
Coma			\$5,000	
Concussion			\$100	
Lacerations			\$	
			¢25	
No sutures treated by doctor			\$35	
Single laceration under 5 cm with sutures			\$65	
5 to 15 cm with sutures (total of all lacerations)		\$250		
Greater than 15 cm with sutures (total of all lacerations)			\$500	
Burns		2 <sup>nd</sup> degree	3 <sup>rd</sup> degree	
21 to 40 square centimeters		\$400	\$1,000	
41-65 sq cm		\$800	\$2,000	
66-160 sq cm		\$1,200	\$6,000	
161-225 sq cm		\$1,600	\$14,000	
More than 225 sq cm		\$2,000	\$20,000	
Skin graft	50% of th	f the Burn benefit		
Medical Services				
Diagnostic Exam: CT, CAT, MRI, EEG, EKG		\$10	00	
X-ray (1 time per benefit year)		n/a		
Emergency treatment in a non-emergency room		\$50		
Physician's follow-up office visit (per visit, up to 6 visits per Covered Accident)		\$25		
Physical Therapy per visit (up to 10 visits per Covered Accident)		\$2	25	
Medical Devices		\$12	\$125	
Epidural (up to 2 injections per Covered Accident)		n/a		
Prescription Drug		n	n/a	
Prosthesis – one		\$500		
Prosthesis – two		\$1,000		
Blood, Plasma or Platelet Transfusion		\$200		
Hospital				
Hospital Admission		\$1,00	00	
Hospital Confinement per day (up to 365 days per Covered Accident)		\$200		
Rehab per day 9per day, up to 30 days per Covered Accident)		\$100		
ICU per day (up to 14 days)		\$400		
Ambulance Ground		\$200		
Ambulance Air		\$750		
Emergency Room Admission		\$150		
Family Lodging per day (up to 30 days per Covered Accident)		\$100		
Transportation (100 or more miles up to 3 times per Covered Accident)		\$15	50	
Surgery				
Miscellaneous surgery		\$25		
Open surgery			\$1,000	
Exploratory surgery or debridement		\$25		
Tendon/ligament/rotator cuff tear single		\$62		
Ruptured / herniated disc		\$625		
Torn knee cartilage		\$62	25	
Emergency Dental				
Emergency dental extraction		\$!	50	
Emergen av dentel group		\$20	00	
Emergency dental crown				

\*Benefits displayed for life and dismemberment are for the employee only.

## **Accident FAQs**

#### What happens if I am injured?

Once your claim is approved, Accident insurance pays you a benefit amount if you are hurt or receive treatment as a result of a covered accident. The benefit amount you receive depends on your injury and/or the treatment you receive. Benefits are payable only once for each Covered Accident (unless noted otherwise in the benefit schedule).

Injuries and other related benefits due to a covered accident must be diagnosed or treated within a defined period of time from the date of your accident. This could be as few as three days for certain benefits. Please refer to your certificate for details.

# Can I take my insurance with me if I leave my employer?

Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.

#### How do I file a claim?

We will ask for information from you and your doctor about the specific accident and the treatment provided. You can download forms from our website. Please complete and sign all forms. Missing information or signatures can delay your claim.

Accident insurance is a limited benefit policy. The certificate has exclusions that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate.

Read the important plan provisions section for more information including limitations and exclusions.

\*Health, United States, 2016," US Department of Health and Human Services, Table 75.

### Important plan provisions

The following coverage(s) do not constitute comprehensive health insurance (often referred to as "major medical coverage") and do not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. They do NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services.

To become insured, all persons must be actively at work and performing their regular duties at their usual place of business on the proposed effective date or their date of coverage will be deferred until they return to active work. Refer to the Certificate for details and similar requirements for dependent coverage.

#### Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

#### Accident

We will not pay a benefit that is due to or results from: suicide while sane or insane; intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; voluntary use of any controlled substance/illegal drugs; operation of a motorized vehicle while intoxicated; if you do not submit proof of your loss as required by us (this covers medical examination, continuing care, death certificate, medical records, etc.); incarceration; engaging in hang-gliding, bungee jumping, parachuting, sail gliding, parasailing, parakiting or mountaineering; participating in or practicing for any semi-professional or professional competitive athletic contest in which any compensation is received, including coaching or officiating; injuries sustained from commercial air transportation other than riding as a fare paying passenger; work-related illness or injuries unless you are enrolled in 24-hour coverage.

#### **Critical Illness**

We will not pay a benefit that is due to or results from: suicide while sane or insane; intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; voluntary use of any controlled substance/illegal drugs; operation of a motorized vehicle while intoxicated; if you do not submit proof of your loss as required by us (this covers medical examination, continuing care, death certificate, medical records, etc.); incarceration; a diagnosis that is not explicitly covered under the policy; a diagnosis that occurs prior to the effective date of coverage (unless it is a new and unrelated diagnosis that occurs after the effective date of coverage).

Covered conditions have specific diagnostic criteria that must be met (along with supporting documentation) for a benefit to be paid. For additional information regarding covered conditions, please request an outline of coverage.

#### Cancer

We will not pay a benefit that is due to or results from: services or Treatment not included in the Covered Cancer Benefits; war or an act of war; active military duty; intentionally self-inflicted injuries while sane or insane; services or Treatment for which the Insured is not charged, unless there is no charge because the facility is a United States government facility; services or Treatment provided by a Family Member; services or Treatment for premalignant conditions; services or Treatment for conditions with malignant potential; services or Treatment for non-cancer illnesses; elective plastic or cosmetic surgery.

#### Information about services offered

Value-added services are not insurance, are offered only on specific lines of coverage and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. Emergency Travel Assistance is



provided by Assist America®. Identity Theft Protection is provided by SecurAssist®, an Assist America program. HealthChampion<sup>SM</sup> (a health care support service) is not insurance and is provided by ComPsych®. ComPsych® is a registered trademark of ComPsych Corporation. The entities that provide the value-added services are not subcontractors of Sun Life and Sun Life is not responsible or liable for the care, services, or advice provided by them. Sun Life reserves the right to discontinue any of the Services at any time.

This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern. Product offerings may not be available in all states and may vary depending on state laws and regulations.

Sun Life Financial companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, "Sun Life Financial" or "Sun Life").

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 98P-ADD, 12-GP-01, 13-ADD-C-01, 15-GP-01, 15-LF-C-01, 15-ADD-C-01, 12-DI-C-01, 16-DI-C-01, TDBPOLICY-2006, TDI-POLICY, 12-AC-C-01, 16-AC-C-01, 12-SD-C-01, 16-SD-C-01, and 16-CAN-C-01.

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