

Accident Insurance



The Standard Accident Plan is included as an embedded benefit (Total Trust Perk) for MIT primary medical members.

▶ HELPS YOUR FINANCES AFTER A MISHAP.

When you, your spouse or child has a covered accident, like a fall from a bicycle that requires medical attention, you can receive cash benefits to help cover the unexpected costs.

▶ HELPS COVER RELATED EXPENSES.

While health plans may cover direct costs associated with an accident, you can use accident benefits to help cover related expenses like lost income, child care, deductibles and co-pays.

▶ PAYS CASH BENEFITS DIRECTLY TO YOU.

Accident Insurance can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are payable directly to you. And get this – there are no health questions or pre-existing conditions limitations.

What's more, all family members on your plan are eligible for a wellness-screening benefit, also paid directly to you once each year per covered person.

You can purchase this coverage for you and your family. Child coverage is available to age 26.

ACCIDENT FAST FACTS

Falls

are the leading cause of injuries treated in emergency rooms every year, for people of all ages.¹

This coverage pays benefits for accidents that occur off the job.

SOUTH CAROLINA MEDICAL ASSOCIATION
VOLUNTARY EMPLOYEES' BENEFICIARY
ASSOCIATION WELFARE BENEFIT PLAN
AND TRUST (MIT)

POLICY # 954430

Sun Life Assurance Company of Canada

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Accident Insurance

What's covered

Once your coverage goes into effect, you can file a claim for covered accidents that occur after your insurance plan'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 meets your needs and your budget.

	STANDARD PLAN		ENHANCED PLAN	
DISLOCATIONS	OPEN (SURGERY)	CLOSED (NO SURGERY)	OPEN (SURGERY)	CLOSED (NO SURGERY)
Hip	\$6,000	\$3,000	\$10,000	\$5,000
Knee, ankle, or bones of the foot	\$3,000	\$1,000	\$4,000	\$1,500
Elbow, wrist, Shoulder, Collarbone, bones of the hand or Lower jaw	\$2,000	\$1,000	\$2,000	\$1,000
Finger(s) or toe(s)	\$400	\$200	\$400	\$200
FRACTURES	OPEN (SURGERY)	CLOSED (NO SURGERY)	OPEN (SURGERY)	CLOSED (NO SURGERY)
Hip or thigh	\$6,000	\$3,000	\$6,000	\$3,000
Skull-depressed	\$10,000	\$5,000	\$12,000	\$6,000
Skull-simple	\$4,000	\$2,000	\$5,000	\$2,500
Vertebral processes, Bones of the face, Nose, Upper jaw, upper arm, Lower jaw, Collarbone, Shoulder, Hand, Wrist, Foot, Ankle, Elbow or Heel	\$1,500	\$750	\$1,500	\$750
Leg	\$3,000	\$1,500	\$3,000	\$1,500
Vertebrae, Sternum	\$2,400	\$1,200	\$3,000	\$1,500
Pelvis	\$3,200	\$1,600	\$3,200	\$1,600
Forearm	\$700	\$350	\$1,500	\$750
Kneecap	\$1,500	\$350	\$1,500	\$750
Rib, Finger, Toe or Coccyx	\$600	\$300	\$600	\$300
Multiple ribs	\$2,000	\$1,000	\$2,000	\$1,000
ADDITIONAL INJURIES				
Eye Injury - surgical repair	\$500		\$500	
Eye Injury - object remove	\$200		\$300	
Brain injury	\$500		\$500	
Paralysis—paraplegia	\$25,000		\$40,000	
Paralysis—quadriplegia	\$50,000		\$75,000	
Coma	\$10,000		\$15,000	
Concussion	\$500		\$500	
BURNS	2ND DEGREE	3RD DEGREE	2ND DEGREE	3RD DEGREE
21-40 square centimeters	\$300	\$750	\$400	\$1,000
41-65 square centimeters	\$600	\$1,500	\$800	\$2,000
66-160 square centimeters	\$800	\$4,500	\$1,200	\$6,000
161-225 square centimeters	\$1,200	\$10,000	\$1,600	\$14,000
More than 225 square centimeters	\$1,500	\$15,000	\$2,000	\$20,000
Skin graft	50% of the applicable Burn Benefit		50% of the applicable Burn Benefit	
LACERATIONS				
No sutures and treated by doctor	\$35		\$35	
Single laceration under 5 cm with sutures	\$65		\$65	
5-15 cm with sutures (total of all lacerations)	\$250		\$250	
Greater than 15 cm with sutures (total of all lacerations)	\$500		\$500	

MEDICAL SERVICES		
Diagnostic Exam - Arteriogram, Angiogram, CT, CAT, EKG, EEG, or MRI (1 time per benefit year)	\$200	\$300
Diagnostic Exam - X-ray (1 time per covered accident)	\$100	\$200
Accident Emergency Treatment, non-emergency room (once per covered accident)	\$150	\$200
Physician's Follow-up Treatment office visit (per visit, up to 6 times per covered accident)	\$150	\$200
Physical Therapy (per visit up to 10 visits per covered accident)	\$75	\$100
Medical Devices	\$200	\$300
Epidural Pain Management (up to 2 times per covered accident)	\$50	\$100
Prescription drug	\$15	\$35
Prosthesis (one)	\$1,000	\$1,500
Prosthesis (two)	\$2,000	\$2,500
Blood, Plasma, or Platelet Transfusion	\$200	\$200
HOSPITAL		
Hospital Admission (once per benefit year)	\$1,000	\$1,500
Hospital Confinement (per day up to 365 days per covered accident)	\$200	\$400
Intensive Care Unit Admission (once per Benefit Year; payable instead of Hospital Admission benefit if Confined immediately to ICU)	\$1,500	\$2,000
Intensive Care Unit Confinement (per day up to 15 days, payable in addition to any Hospital Confinement benefit)	\$200	\$400
Ambulance (Ground)	\$500	\$700
Ambulance (Air)	\$1,500	\$2,000
Emergency Room Admission	\$200	\$250
Family Lodging (per day up to 30 days per benefit year)	\$125	\$150
Transportation (100 or more miles up to 3 times per covered accident)	\$400	\$600
Rehabilitation Unit (per day up to 30 days per covered accident)	\$150	\$200
SURGERY		
Miscellaneous Surgery requiring general anesthesia (not covered by any other benefit)	\$750	\$750
Open Surgery	\$2,000	\$3,000
Exploratory Surgery or Debridement	\$500	\$500
Tendon/Ligament/Rotator Cuff Tear	\$1,500	\$2,000
Torn Knee Cartilage	\$1,000	\$2,000
Ruptured/Herniated Disc	\$1,000	\$2,000
EMERGENCY DENTAL		
Emergency Dental extraction	\$100	\$150
Emergency Dental crown	\$300	\$500
WELLNESS		
Wellness Screening Benefit (once per benefit year)	\$25	\$100

LIFE AND DISMEMBERMENT LOSSES*		STANDARD	ENHANCED
Accidental Death		\$50,000	\$75,000
Accidental Death Common Carrier (pays an additional benefit if accidental death occurs while traveling as a fare-paying passenger on a public conveyance)		\$150,000	\$200,000
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		\$75,000	\$75,000
Loss of one hand, foot, leg, or arm		\$15,000	\$15,000
Loss of sight of one eye or loss of one eye		\$15,000	\$15,000
Two or more fingers or toes		\$3,000	\$3,000
One finger or one toe		\$1,500	\$1,500
Loss of hearing of one ear or loss of one ear		\$5,000	\$5,000

*Benefits displayed for life and dismemberment are for the employee only. Spouse benefits are 100% of the employee benefit amount for death and 100% of the employee benefit amount for dismemberment. Dependent children benefits are 50% of the employee benefit amount for death and 50% of the employee benefit amount for dismemberment.