



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 on and 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	\$15.40
You and your spouse	\$25.19
You and your child(ren)	\$27.46
You, your spouse and child(ren)	\$37.99

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

Emergency and hospitalization benefits	Benefit amount
Ambulance (ground, once per accident)	\$400
Air ambulance	\$1500
Emergency room treatment	\$150
Emergency treatment in physician office/urgent care facility Either ER room or Primary Care/Specialist/Urgent Care benefit is payable once per covered accident	
Primary care physician	\$75
Specialist	N/A
Urgent care facility	\$75
Hospital admission (admission or intensive care admission once per covered accident)	\$1,000
Intensive care admission (same as above)	\$1,500
Hospital confinement (per day up to 365 days)	\$200
Intensive care confinement (per day up to 15 days)	\$400
Medical imaging test (once per accident)	\$200
Outpatient surgery facility service (once per accident)	\$300
Pain management (epidural, once per accident)	\$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 (75 visits per accident)	
Primary care physician	N/A
Specialist	N/A
Urgent care facility	\$75
Chiropractic visit (up to 3 visits per calendar year)	\$25
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	\$0.40 per mile

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 — one benefit per accident, not payable with initial accidental loss	
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 dismemberment† — once per lifetime, not payable with catastrophic loss Loss of both hands or both feet; or loss of one hand and one foot	
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	\$12,500
Accidental loss — paralysis, sight, hearing and speech Initial accidental loss — one benefit per accident, not payable 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 per lifetime, not payable with catastrophic dismemberment Permanent paralysis; or loss of hearing in both ears; or loss of the ability to speak; or loss of sight of both eyes	
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	\$12,500
†Catastrophic accidental benefit — payable after fulfilling a 365 day elimination period.	

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

Accident Insurance

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:

- participating in war or act of war, whether declared or undeclared;
- committing acts of terrorism;
- 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 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;
- 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.

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