



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	\$9.87	
You and your spouse	\$16.50	
You and your child(ren)	\$16.53	
You, your spouse and child(ren)	\$23.16	

For illustrative purposes only. Actual cost may vary.

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^{*}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

Chips	Covered injuries	Benefit amount	
(dependent on location of injury)\$100 to \$5,000Closed Reduction (dependent on location of injury)\$50 to \$2,500Chips25% of closed amounDislocationsOpen Reduction (dependent on location of injury)\$200 to \$4,000Closed Reduction (dependent on location of injury)\$100 to \$2,000Burns2nd degree - \$0 3rd degree - \$1,250At least 10 square inches, but less than 20 square inches, but less than 35 square inches2nd degree - \$0 3rd degree - \$1,25035 or more square inches of the body surface2nd degree - \$500 3rd degree - \$7,50035kin grafts for 2nd and 3rd degree burns2nd degree - \$500 3rd degree - \$7,500Skin grafts for any other accidental traumatic loss of skinAt least 10 square inches\$75At least 20 square inches, but less than 25 square inches\$75At least 20 square inches, but less than 35 square inches\$12535 or more square inches of the body surface\$250Concussion\$100Coma\$5,000Ruptured disc\$600Knee cartilage\$100Torn with surgical repair\$500Exploratory surgery or cartilage shaved, only\$100Laceration\$25 - \$400Tendon/ligament and rotator cuffSurgical repair of two or more\$900Exploratory surgery without repair\$100Dental work, emergencyExtraction\$50	Fractures		
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Exploratory surgery without repair \$100 Dental work, emergency Extraction \$50 Crown \$150	Surgical repair of one	\$600	
Dental work, emergency Extraction \$50 Crown \$150	Surgical repair of two or more	\$900	
Extraction \$50 Crown \$150	Exploratory surgery without repair	\$100	
Crown \$150	Dental work, emergency		
	Extraction	\$50	
Eye injury \$200	Crown	\$150	
	Eye injury	\$200	

Accident	coverage	ic a	limited	policy
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Emergency and hospitalization benefits	Benefit amount	
Ambulance (ground, once per accident)	\$200	
Air ambulance	\$750	
Emergency room treatment	\$100	
Emergency treatment in physician office/urgent care facility	\$50	
Hospital admission (admission or intensive care admission once per covered accident)	\$750	
Intensive care admission (same as above)	\$1,125	
Hospital confinement (per day up to 365 days)	\$100	
Intensive care confinement (per day up to 15 days)	\$300	
Medical imaging test (once per accident)	\$100	
Outpatient surgery facility service (once per accident)	\$150	
Pain management (epidural, once per accident)	\$50	
Treatment and other services	Benefit amount	
Surgery benefit	I	
Open abdominal, thoracic	\$1,000	
Exploratory (without repair)	\$100	
Hernia repair	\$100	
Physician follow-up visit (2 visits per accident)	\$50	
Chiropractic visit (up to 3 visits per calendar year)	\$15	
Therapy services (up to 10 per accident)		
Occupational therapy	\$15	
Speech therapy	\$15	
Physical therapy	\$15	
Prosthetic device or artificial limb		
One	\$500	
More than one	\$1,000	
Appliance (once per accident)	\$50	
Blood, plasma and platelets	\$300	
Travel due to accident Transportation of more than 50+ miles from residence; 3 trips per accident; max 1,200 miles per round trip	\$0.30 per mile	
Lodging		
(per night up to 30 days per accident)	\$100	

Accidental death and other covered losses	Benefit amount			
Accidental death*				
Employee	\$25,000			
Spouse	\$10,000			
Child	\$5,000			
*The accidental death benefit doubles if the insured individual is injured as a fare-paying passenger on a common carrier: Employee – \$50,000; spouse – \$20,000; child – \$10,000				
Initial accidental dismemberment — o accident, not payable with initial accidental accidental control of the c				
Loss of both hands or both feet; or	\$5,000			
Loss of one hand and one foot; or	\$5,000			
Loss of one hand or one foot;	\$2,500			
Loss of two or more fingers, toes or any combination; or	\$750			
Loss of one finger or toe	\$250			
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)	\$10,000			
Spouse and child	\$5,000			
Employee (ages 65–69)	\$5,000			
Spouse and child	\$2,500			
Employee (70+ years old)	\$2,500			
Spouse and child	\$1,250			
Accidental loss — paralysis, sight, hearing and speech Initial accidental loss — one benefit per accident, not payable with initial dismemberment				
Permanent paralysis; or	\$5,000			
Loss of sight of both eyes; or	\$5,000			
Loss of sight of one eye; or	\$2,500			
Loss of the hearing of one ear	\$2,500			
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)	\$10,000			
Spouse and child	\$5,000			
Employee (ages 65–69)	\$5,000			
Spouse and child	\$2,500			
Employee (70+ years old)	\$2,500			
Spouse and child	\$1,250			
†Catastrophic accidental benefit — payable after fulfilling a 365 day elimination period.				

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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Level 1 with AD&D

EN-1974 (1-20) **FOR EMPLOYEES** R0763300

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 legally intoxicated under state limits 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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Unum Life Insurance Company of America, Portland, Maine

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