

# Group Accident Expense Insurance

Injuries affect millions of Americans every year. Big or small, accidents happen and the costs related to recovery can add up. The average deductible for single coverage for covered workers in plans with a deductible has increased 39% over the past five years, from \$1,135 in 2013 to \$1,573 in 2018.<sup>1</sup>

Group Accident Expense insurance provides cash benefits for expenses that may not be fully covered by major medical insurance. Our plans are HSA-friendly – welcome news for those who want to preserve their savings or help bridge gaps in coverage like copays and deductibles.

At Assurity, we offer four plans at a variety of price points, along with valuable add-ons for extra financial protection. **In the event an insured person has a covered accident, we pay specific benefit amounts for:**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> <b>Emergency Care</b>       | <input checked="" type="checkbox"/> <b>Hospital Care</b>   |
| <input checked="" type="checkbox"/> <b>Supportive Care</b>      | <input checked="" type="checkbox"/> <b>Surgical Care</b>   |
| <input checked="" type="checkbox"/> <b>Specific Injury Care</b> | <input checked="" type="checkbox"/> <b>Preventive Care</b> |

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## Key Features

- **Coverage is guaranteed issue;** there are no medical exams or tests to take
- **Employee and family coverage** is available for employees (including 24-hour and off-the-job), plus their spouse/ domestic partner and children
- **Family-friendly benefits** include Child Organized Sports, Hospital Confinement-Child Care and Accidental Death-Children Education
- **A Chiropractic or Acupuncture Treatment** benefit for alternative methods of recovery



1. Kaiser Family Foundation 2018 Employer Health Benefits Survey



# Group Accident Expense Benefits

## Tier 3

Assurity's Group Accident Expense insurance plan includes the benefits listed in the schedule below for a covered accident. All treatment must be provided or prescribed by a physician and maximum benefits per insured person are one per accident unless otherwise noted. Each benefit is subject to conditions for payment as detailed in the certificate.

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### Covered Accident Expense Benefits

#### Emergency Care

#### Tier 3

<b>Initial Accident Treatment</b> One physician's office, urgent care or ER visit per accident	<b>\$150</b> Physician Office/Urgent Care <b>\$300</b> Emergency Room
<b>Telemedicine Treatment</b>	<b>\$60</b>
<b>Ambulance</b> Transport to or from hospital; one ground or air per accident	<b>\$300</b> Ground / <b>\$900</b> Air
<b>X-Rays</b>	<b>\$300</b>
<b>Diagnostic Exams</b> CT, CAT, MRI or EEG	<b>\$150</b>
<b>Blood, Plasma or Platelets</b> Processing or transfusion	<b>\$900</b>
<b>Emergency Room Observation Unit</b> Held in hospital, without admission, after ER treatment	<b>\$75</b> Held 4-20 hrs. <b>\$150</b> Held 20+ hrs.

#### Specific Injury Care

#### Tier 3

<b>Burns</b> Payable percent of benefit shown varies by degree of burn and percentage of body affected	<b>\$1,500</b>
<b>Burns - Skin Graft</b> Percentage of burn benefit	<b>50%</b>
<b>Child Organized Sport</b> Percentage of all other payable benefits for dependent child if injured during amateur organized athletic competition or supervised practice for such; up to \$1,000	<b>10%</b>
<b>Coma</b> Not medically induced or the result of drug or alcohol use	<b>\$30,000</b>
<b>Concussion</b> Not payable if traumatic brain injury benefit is paid	<b>\$75</b>
<b>Dental Emergency</b> Natural tooth treatment provided by a dentist	<b>\$300</b> Crown / <b>\$90</b> Extraction
<b>Dislocation</b> Payable percent of benefit shown varies by joint or bone and degree of dislocation	<b>\$6,000</b> Open Reduction <b>\$3,000</b> Closed Reduction

**Specific Injury Care (Continued)****Tier 3**

<b>Ear Injury</b> Resulting in hearing loss greater than 60%; once per lifetime	\$300
<b>Eye Injury</b> Requiring surgery or removal of foreign object	\$300
<b>Fracture</b> Payable percent of benefit shown varies based on joint or bone, open or closed reduction, or chip (see dislocation for amounts)	\$6,000
<b>Gunshot Wound</b> Requires hospitalization and surgery	\$1,500
<b>Lacerations</b> Payable percent of benefit shown varies by length of laceration	\$150
<b>Occupational HIV</b> Not available with off-the-job coverage	\$900
<b>Paralysis</b> Lasting 90+ days, diagnosed permanent; one quadriplegia or paraplegia benefit per lifetime	\$45,000 Quadriplegia \$22,500 Paraplegia
<b>Poisoning</b>	\$75
<b>Post-Traumatic Stress Disorder</b>	\$600
<b>Traumatic Brain Injury</b> Diagnosed by CT, CAT, MRI, EEG, PET or X-Ray	\$900
<b>Supportive Care - Payable only if Initial Accident Treatment or Telemedicine Treatment benefit was paid for same injury</b>	
<b>Tier 3</b>	
<b>Follow-Up Treatment</b> Two per accident	\$150
<b>Physical, Occupational or Speech Therapy</b> Six per accident	\$90
<b>Chiropractic/Acupuncture Treatment</b> Six per accident	\$90
<b>Epidural Pain Management</b>	\$150
<b>Prescription Medication</b> Other than while confined in hospital or nursing home; up to two per accident; six per calendar year	\$15
<b>Medical Supplies</b> Over-the-counter: once per accident; three per calendar year	\$15
<b>Appliances</b> Rented or purchased, such as crutches or wheelchair	\$375
<b>Prosthetic Devices</b> Not including hearing or dental aids, eyeglasses or cosmetic devices	\$1,500 Single / \$3,000 Multiple
<b>Residence/Vehicle Modification</b>	\$1,500
<b>Transportation</b> For physician treatment 50+ miles from residence; up to three round trips per accident	\$300 Ground / \$750 Air
<b>Lodging</b> For companion accompanying an insured traveling 100+ miles from residence for treatment; up to 30 days per accident	\$300
<b>Hospital Care - Daily benefits unless otherwise noted</b>	
<b>Tier 3</b>	
<b>Hospital Admission</b> Once per accident; once per calendar year	\$1,500

**Hospital Care - Daily benefits unless otherwise noted (Continued)****Tier 3**

<b>Hospital Confinement</b> Up to 365 days per accident	\$300
<b>Intensive Care</b> Up to 30 days per accident	\$600
<b>Sub-Acute Intensive Care</b> Up to 30 days per accident	\$450
<b>Rehabilitation Unit</b> Up to 30 days per accident; 60 days per calendar year	\$300
<b>Hospital Confinement - Child Care</b> For all dependent children, by licensed provider, while insured is confined to hospital; up to 30 days per accident	\$60

**Surgical Care****Tier 3**

<b>Open Abdominal, Thoracic or Cranial Surgery</b> Does not include hernia	\$3,000
<b>Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery</b>	\$1,500
<b>Ruptured Disc Surgery</b>	\$1,500
<b>Hernia Surgery</b>	\$750
<b>Exploratory Surgery</b> Diagnostic arthroscopic or laparoscopic and not payable if any other surgery benefit is paid	\$750
<b>Miscellaneous Outpatient Surgery</b> Requires anesthesia and not payable if any other surgery benefit is paid	\$300
<b>Anesthesia</b> Administered for a payable surgery benefit	\$300

**Preventive Care (Not available in CT, MN, MO and ND)****Tier 3**

<b>Wellness Benefits</b> <ul style="list-style-type: none"> <li>• Blood screening for triglycerides, cholesterol, HDL, LDL or fasting blood glucose</li> <li>• Annual physical exam</li> <li>• Routine eye exam</li> <li>• Immunization</li> </ul> Once per day, up to two per insured per calendar year; maximum of four for all insured persons combined per calendar year	\$50
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**Accidental Death and Dismemberment Rider (Form R G1712C)****Tier 3**

<b>Accidental Death and unless otherwise noted below.</b> 50% spouse/25% child; not payable if Accidental Death-Common Carrier benefit is paid	\$60,000
<b>Accidental Death - Seatbelt</b> Additional benefit if seatbelt in use; 50% spouse/25% child	\$15,000
<b>Accidental Death - Common Carrier</b> If fare-paying passenger on common carrier; 50% spouse/25% child	\$150,000
<b>Accidental Death - Children Education</b> Additional benefit for dependent children enrolled in post-secondary educational institution; one per accidental death, per qualifying dependent child	\$1,500
<b>Accidental Dismemberment</b> Percent of benefit shown varies by body part; 50% spouse/25% child	\$60,000

**Optional Riders** **Outpatient Care Rider** **Hospital Sickness Rider** **Accident-Only Disability Income Rider**  
(HSA compatible)