





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 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

Sickness Hospital Confinement Benefit

This optional benefit pays a daily amount if you're in the hospital for a covered illness. It's available to each family member who has Accident coverage. You can receive \$100 per day. Coverage for children is 75% of that amount.

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. |

Unum has been a leading provider in **group disability benefits** for over **4** decades.¹



#3

Voluntary Benefits⁵ Critical Illness⁶

#2 Group Disability⁴

1 Employee Benefit Plan Review, "Group Accident & Health Surveys 1976-1990" (1977-1991); Gen Re, "U.S. Group Disability Market Surveys 1991-2013" (1992-2014); LIMRA, "U.S. Group Disability Insurance 2014-2016 Annual Sales and In Force" (2015-2017).

2 LIMRA, "4Q 2017 U.S. Workplace Disability Insurance Inforce (2018), based on inforce premium. 3 Eastbridge, "U.S. Worksite/Voluntary Sales Report: Carrier Results for 2016" (2017). 4 LIMRA, "4Q 2017 U.S. Workplace Disability Insurance Inforce (2018), based on inforce premium. 5,6 Eastbridge, "U.S. Worksite/Voluntary Sales Report: Carrier Results for 2016" (2017).

^{*}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

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 a work related injury
- 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.

Sickness Hospital Confinement Benefit exclusions

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;
- \cdot committing acts of terrorism;
- treatment for alcoholism or drug addiction, unless the insured is addicted to a narcotic taken on the advice of a physician;
- · treatment for dental care or dental care procedures;
- elective procedures and/or cosmetic surgery or reconstructive surgery, unless it is a result of trauma, infection or other diseases;
- hospital confinement caused by, contributed to by, or resulting from your mental illness.
 However, dementia as a result of stroke, trauma, viral infection, Alzheimer's disease or other conditions not listed which are not usually treated by a mental health provider or other qualified provider using psychotherapy, psychotropic drugs, or other similar methods of treatment are covered under this policy;
- any hospital confinement of a newborn following the birth unless the newborn is sick or injured.

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 if you elect to continue coverage under the Portability provision or 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.

THIS IS A LIMITED BENEFITS POLICY

This 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 et al. or contact your Unum representative.

Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by-

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Accident Insurance – Schedule of Benefits

Emergency and hospitalization benefits

Ambulance

| 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 | | | |

| Ambulance (ground, once per accident) | \$400 | Reha (per d |
|---|------------------|--------------------------|
| Air ambulance | \$1500 | per ca |
| Emergency room treatment | \$150 | Accic cove |
| Emergency treatment in physician of Either ER room or Primary Care/Specia payable once per covered accident | . 3 | Accide Emplo |
| Primary care physician | \$50 | Spous |
| Specialist | \$50 | *The a |
| Urgent care facility | \$50 | is injur Emplo |
| Hospital admission (admission or intensive care admission once per covered accident) | \$750 | Initial accide |
| Intensive care admission (same as above) | \$1,125 | Loss o |
| Hospital confinement (per day up to 365 days) | \$200 | Loss of |
| Intensive care confinement (per day up to 15 days) | \$400 | Loss (|
| Medical imaging test (once per accident) | \$100 | — onc |
| Outpatient surgery facility service (once per accident) | \$300 | foot Emple |
| Pain management (epidural, once per accident) | \$100 | Spo |
| Treatment and other | Desofit assesset | Spo |
| services | Benefit amount | Emple |
| Surgery benefit | | Spo |
| Open abdominal, thoracic | \$1,500 | Accide |
| Exploratory (without repair) | \$150 | Initial a |
| Hernia repair | \$150 | with in |
| Physician follow-up visit (2 visits per accident) | | Perm Loss o |
| Primary care physician | \$50 | Loss |
| Specialist | \$50 | Loss |
| Urgent care facility | \$50 | Catast |
| Chiropractic visit | NA | payab Perma the ab |
| Therapy services (up to 6 per accident) | | Emplo |
| Occupational therapy | \$25 | Spo |
| Speech therapy | \$25 | Empl |
| Physical therapy | \$25 | Spo |
| Prosthetic device or artificial limb | | Empl |
| One | \$750 | Spo |
| More than one | \$1,500 | †Catast |
| Appliance (once per accident) | \$100 | 365 da |
| 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 — or accident, not payable with initial accid | ne benefit per ental 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 por payable with catastrophic dismembern Permanent paralysis; or loss of hearing the ability to speak; or loss of sight of be | ment in both ears; or loss of | | | |
| 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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