PARTNER LOGO FPO

Putting Benefits To Work For People℠

An extra layer of support in times of need

New York Life Group Benefit Solutions
Accident insurance



The costs related to an accident, whether minor or major, can add up fast and make an already stressful time even worse. Our accident insurance pays you a lump-sum cash benefit for injuries that come from a covered accident and can help pay for expenses that may not be covered by traditional health insurance.

Who is eligible for accident insurance?
[All active [full-time [employees][associates][members][participants] regularly working a minimum of [30] hours per week are eligible for coverage.]

What are some of the covered accidents under this plan?

	[Plan Design Name]	[Plan Design Name]	[Plan Design Name]
Coverage Tier	[Employee], [Employee + [[Spouse] /[Domestic Partner*]], [Employee + 1], [Employee + Child(ren)], [Employee + Family]	[Employee], [Employee + [[Spouse] /[Domestic Partner*]], [Employee + 1], [Employee + Child(ren)], [Employee + Family]	[Employee], [Employee + [[Spouse] /[Domestic Partner*]], [Employee + 1], [Employee + Child(ren)], [Employee + Family]
Accident Coverage Type:	[On the Job &] Off the Job Coverage	[On the Job &] Off the Job Coverage	[On the Job &] Off the Job Coverage
[Fractures]	[$400 - $5,600]	[$600 - $8,000]	[$800 - $10,000]
[Dislocations]	[$500-$6,400]	[$600-$8,000]	[$700-$10,000]
[Other Common Injuries]			
[Burns (2nd and 3rd Degree)]	[$250 - $12,500]	[$300 - $15,000]	[$375 -$20,000]
[Coma]	[$14,500]	[$17,000]	[$18,500]
[Concussion]	[$175]	[$225]	[$275]
[Paralysis]	[$13,500 - $20,000]	[$16,000 - $24,000]	[$20,000 - $30,000]
[Lacerations]	[$25 - $400]	[$30 - $480]	[$50 - $750]

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[Emergency and Hospitalization Benefits]			
[Ambulance ([ground and] [air])]	[[$300/][$1,250]]	[[$360/][$1,500]]	[[$400/][$2,000]]
[Emergency room]	[$200]	[$225]	[$250]
[Urgent Care]	[$200]	[$225]	[$250]
[Hospital Admission]	[$1,125]	[$1,125]	[$1,750]

[Health screening [benefits][incentives]]
[Our health screening [benefit][incentive] provides a payment if you, [your covered spouse, and covered dependent child(ren)] complete a health screening test. This [benefit][incentive] pays [$50] per screening limited to [10] per calendar year.[1]]

[Affiliated health care provider health screening [benefit][incentive] The affiliated health care provider health screening [benefit] [incentive] provides a payment of [$150] if you receive a health screening test at a facility that is owned by your employer.]

Additional Benefits	[Plan Design Name]	[Plan Design Name]	[Plan Design Name]
[Affiliated health care provider [benefit] [incentive]] Provides an increase in benefits if you are treated at a health care facility that is owned by your employer for [Common Injury Benefits (Fractures, Dislocation and Other Common Injuries),] [Emergency Hospitalization Benefits] [and/or] [Treatment and Other Services].	Benefits increased by [25%,] to a maximum additional benefit of [$1,000]	Benefits increased by [25%,] to a maximum additional benefit of [$1,000]	[Benefits increased by [25%,] to a maximum additional benefit of [$1,000]
[Organized sports] Provides an increase in the [Common Injury Benefits (Fractures, Dislocation and Other Common Injuries),] [Emergency Hospitalization Benefits] [and/or] [Treatment and Other Services] benefits if your accident occurs while participating in an organized sporting activity.	Benefits increased by [25%,] to a maximum additional benefit of [$1,000]	[Benefits increased by [25%,] to a maximum additional benefit of [$1,000]	Benefits increased by [25%,] to a maximum additional benefit of [$1,000]

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[What other benefits are offered as part of my coverage?
Your accident insurance may include access to benefits that can help in certain scenarios, available on your first day of coverage.]

- **[No premium payments in certain situations (also known as "Waiver of Premium")]**
  If you are unable to work due to a disability [prior to age [Waiver of Premium – disabled before age]], and you have been unable to work [for [Waiver of Premium – Elimination Period] months], we will waive the premium for accident insurance for you [and your dependents] while you are unable to work due to a covered loss for up to [Waiver of Premium –Disability Duration] months.
- **[Take your accident coverage with you if you leave your job (also known as "Portability")[2]]**
  If your employment is terminated, you can continue your accident insurance, [and accident insurance for your insured [spouse] [and] [dependent children],] on a direct-bill basis.
- **[Support for your health care questions.]**
  Through our Health Care Support program, you'll have access to trained advocates and registered nurses to help you effectively navigate your health care plan and provide support for your questions and concerns.[3]

[Contact [contact name/department] to] review the accident insurance benefits summary and policy documents to learn more about plan details, exclusions, and limitations.]

[For more information, [call [Phone Number] to speak with [contact name/department]/ [email [abc@abc.com] / visit [www.companyintranetsite.com]].

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[* Domestic partner is defined in the group policy. For purposes of this brochure, wherever the term spouse appears, it shall also include domestic partner registered under any state which legally recognizes domestic partnerships or civil unions. Additional information is available from your benefit services representative.]

[1] The benefit is only payable once per day even if multiple Health Screenings are provided in a single day.

[2] Portability is referred to as Continuation due to loss of Eligibility in some states. Refer to your certificate.

[3] These programs are NOT insurance and do not provide reimbursement for financial losses. Some restrictions may apply. This service is provided exclusively by ComPsych® Corporation. Customers are required to pay the entire discounted charge for any discounted products or services available through these programs. Some services are available at the option of the employer for an additional cost. Programs are provided through third party vendors who are solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location and are not available where prohibited by law. Not available for individuals who reside in Washington.

Accident Insurance is a limited benefit policy and pays benefits for accidents only. This product is not health care insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act. This product is issued by New York Life Insurance and Annuity Corporation (NYLIAC), a subsidiary of New York Life Insurance Company. Policy provisions and product availability may vary by state. Policy form: Accident: GBS-AI-1000.00

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Alternate Waiver of Premium Language

[If you are unable to work due to a disability and you have been unable to work [for [Waiver of Premium - Elimination Period] months,] we will waive the premium for accident insurance for you [and your dependents] while you are unable to work due to a covered loss for up to [Waiver of Premium - Disability Duration] months.

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