

# **Accident insurance**

# Don't let an accident hurt more than it should

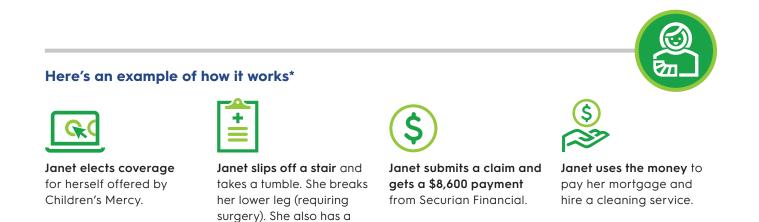
Accident insurance offers additional financial protection by providing a cash payment directly to you if an accident occurs.

## Why would you need accident insurance?

Accident insurance is a cost-effective way to help with the expenses above and beyond what your health insurance plan covers. These expenses can include health care deductibles, groceries, child care, dog sitter, travel expenses and more.

# **Key benefits**

- \$75 health and wellness benefit available to everyone insured for completing an eligible health screening, including an annual exam
- Multiple cash payments may be received for accidents throughout the year
- Additional payments may be available if also enrolled in critical illness
- Many accidents are covered, including injury and hospital care benefits, child and adult organized sports, emergency care and follow-up care
- Cash payments paid directly to you to use for medical and non-medical expenses



\*Actual experience and benefit payouts may vary from this example.

(non-ICU).

concussion and spends two days in the hospital

# What does your accident insurance plan cover and how much will you receive?

It provides a cash payment to help you offset expenses occurred due to an accident.

Injury benefits	
Severe burns	
2nd degree < 10%	\$300
2nd degree 10-20%	\$750
2nd degree > 20%	\$1,500
3rd degree < 10%	\$3,000
3rd degree 10-20%	\$7,500
3rd degree > 20%	\$15,000
Concussion	\$500
Dislocation	
Ankle	\$4,000
Collarbone	\$2,000
Elbow	\$2,000
Finger	\$1,000
Foot	\$4,000
Hand (excluding fingers)	\$3,000
Hip/thigh	\$10,000
Knee	\$7,500
Lower jaw	\$2,500
Ribs	\$2,000
Shoulder	\$4,000
Тое	\$1,000
Wrist	\$3,000
Non-surgical dislocation (% of surgical)	50%
Partial dislocation (% of non-surgical)	25%
Eye injury	
With surgery	\$400
Removal of foreign object	\$100
Fractures	
Ankle	\$4,500
Collarbone	\$4,000
Соссух	\$1,500
Facial (excluding lower jaw)	\$3,500
Finger	\$1,500
Foot	\$4,500
Hand (excluding fingers)	\$4,500
Hip/thigh	\$10,000
Kneecap	\$4,500
Lower jaw	\$4,000
Lower leg	\$5,500
Nose	\$3,000
Pelvis	\$7,500
Ribs	\$2,500

Sacrum	\$5,000
Shoulder blade	\$5,000
Skull - depressed	\$15,000
Skull - non-depressed	\$10,000
Sternum	\$7,500
Тое	\$1,000
Upper arm	\$3,500
Vertebral body	\$8,500
Vertebral processes	\$2,000
Wrist or forearm	\$4,500
Non-surgical fracture (% of surgical)	50%
Chip fracture (% of non-surgical)	25%
Lacerations	
With repair	\$600
Without repair	\$150
Organized sports (% increase in benefit	) 50%
Paralysis	
Quadriplegia	\$50,000
Paraplegia	\$25,000
Hemiplegia	\$25,000
Uniplegia	\$12,500
Traumatic brain injury	\$1,500

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Ground or water ambulance	\$500
Air ambulance	\$2,000
Blood, plasma or platelets transfusion	\$800
Emergency dental	
Crown	\$400
Extraction	\$150
Filling	\$75
Emergency room visit	\$300
Initial physician office visit	\$200
Urgent care facility visit	\$300

Covered benefits may vary by state; see your plan documents for more information.

#### Accident insurance continued

#### Hospital care

Hospital care	
Coma	\$30,000
Diagnostic testing	\$300
Hospital stay	
Initial - non ICU	\$2,000
Initial - ICU	\$3,000
Daily - non ICU	\$300
Daily ICU	\$600
Spinal injection for pain management	\$150
General anesthesia	\$200
Regional anesthesia	\$100
X-ray	\$175
Surgery	
Abdominal or pelvic	\$2,500
Cranial	\$2,500
Thoracic	\$2,500
Inpatient surgery	\$2,000
Joint replacement surgery	\$2,000
Knee cartilage	
Surgical	\$2,000
Arthroscopic	\$1,000
Outpatient surgery	
Tier 1	\$500
Tier 2	\$1,000
Ruptured disc	\$2,000
Skin graft	50% of
	applicable
<b>—</b> 1 /// 1 / 7 / 7 / 7 / 7 / 7 / 7 / 7 / 7	burn benefit
Tendons/ligament/rotator cuff	<b>*</b> •••••
Surgical	\$2,000
Arthroscopic	\$1,000

Follow-up care	
Adaptive home & vehicle	\$3,500
Appliances	
Tier 1	\$200
Tier 2	\$1,000
Follow-up physician's visit	\$150
PTSD	\$1,000
Prescription drug	\$30
Prosthetics	
One prosthetic	\$2,000
Two or more prosthetics	\$4,000
Rehabilitative therapy	
Inpatient	\$200
Outpatient	\$600
Transportation	\$500
Support care	High plan
Adult companion lodging	\$200
Family care	\$100
Pet boarding	\$50
Accidental death and dismemberment	
Death	\$50,000
Dismemberment	
Both hands or both feet	\$50,000
Sight of both eyes	\$50,000
Speech and hearing in both ears	\$50,000
One hand and one foot	\$50,000
One foot and sight of one eye	\$50,000
One hand and sight of one eye	\$50,000
Sight of one eye	\$25,000
Speech or hearing in both ears	\$25,000
One hand or one foot	\$25,000
Thumb and index finger of one hand	\$12,500
Public transportation (common carrier)	\$50,000

# Monthly cost of coverage

#### Coverage type

Employee only	\$9.98
Employee + Spouse/Domestic partner	\$16.61
Employee + Child	\$23.32
Employee + Family	\$33.42

Rates are subject to change.

# Are dependent parents eligible?

Yes, your parents and those of your spouse/domestic partner are eligible at 10 percent of the benefit amount provided you cover more than half of their out-of-pocket costs, including housing, food, clothing and medical services or a dependent parent is claimed as a dependent on IRS income tax forms. The dependent parent only needs to meet one of these two requirements. The benefit is payable to the covered team member.



## Get paid \$75 for annual wellness screenings including an annual exam

**It pays to visit the doctor.** You, your spouse/domestic partner and children are eligible for a \$75 health and wellness payment each year when you are enrolled in accident insurance. There is a maximum of one health and wellness benefit payment per insured, per year.

To file a health and wellness claim, go to LifeBenefits.com.

# When to enroll and how to file a claim

#### When can you enroll?

#### You can enroll through Infor HR Talent:

- Within 60 days of your initial eligibility period
- During your annual enrollment window
- Within 31 days of a qualified life event or status change

It's quick and easy to enroll without answering health questions or a doctor's exam.

## How to file an accident benefit claim

It's easy to file an accident claim and receive the benefits you're entitled to. You can use payments any way you choose to cover costs such as copays, deductibles, child care and more.

#### Information needed to initiate the claim

#### Team member

• Personal information will be pre-filled in • Date of event the submission

#### Spouse/domestic partner or child

- Insured's full name
  Address
- Date of birth
  Date of event

#### How to submit the claim

Go to the Securian Financial website **LifeBenefits.com** and log in.

- User ID: CMKC followed by your team member ID number
- Initial password: Your eight-digit date of birth (MMDDYYYY) followed by the last four digits of your Social Security number
- If you've previously logged in to LifeBenefits<sup>™</sup>, use the password you created.
- Select "Start a new claim."
- Answer all questions to the best of your ability with your claim.

If you do not have the necessary documents available at the time of submission, you can upload it and any additional information by returning to LifeBenefits.com and clicking on "My claims."

If you have questions, need assistance or want to file your claim over the phone, call Securian Financial at **1-888-658-0193**.

# **Additional information**

# Can I take my coverage with me if I leave Children's Mercy?

If you leave Children's Mercy for any reason, including retirement, you can elect to port your coverage and pay premiums directly to Securian Financial. Initially, rates are the same as what you pay as an active team member, but rates are subject to change.

# Who is eligible for coverage?

- You all active full-time and part-time team members, working at least 16 hours per week
- Spouse/domestic partner only if team member coverage is elected
- Your child(ren) from live birth to age 26 only if team member coverage is elected
- Dependent parents your parents and those of your spouse/domestic partner provided you cover more than half of their out-of-pocket costs, including housing, food, clothing and medical services or a dependent parent is claimed as a dependent on IRS income tax forms

Please note that your spouse/domestic partner cannot receive coverage as both a team member and dependent, and a child cannot be covered by more than one parent, if you are both team members of Children's Mercy.

# We're here to help

#### Accident insurance questions?

Call 1-855-750-1906 to chat with a Securian Financial customer service representative.

# Learn more

Visit https://www.cmenrollmentguide.com.

#### Accident insurance exclusions and limitations

#### Are there any other exclusions that apply?

Yes. In no event will we pay benefits where the insured's accident, injury or loss is caused directly or indirectly by, results in whole or in part from or during, or there is contribution from, any of the following:

1. intentionally self-inflicted injury, self-destruction, or autoeroticism while sane;

2. suicide or attempted suicide while sane;

3. the insured's participation in, or attempt to commit, a crime, assault, felony, or any illegal activity, regardless of any legal proceedings thereto;

4. bodily or mental infirmity, illness, disease, or infection, other than pyogenic infection, occurring simultaneously with and as a direct and independent result of an accidental injury, or a bacterial infection which results from the accidental ingestion of contaminated substances;

5. the insured's use of alcohol;

6. the insured's use of prescription drugs, non-prescription drugs or medications, unless taken or used as prescribed by a physician or as directed by the manufacturer, illegal drugs, as well as the intentional or voluntary inhalation of poisons, gases, fumes, or other substances taken, absorbed, ingested, or injected;

7. motor vehicle collision or accident where the insured is the operator of the motor vehicle and the insured's blood alcohol level meets or exceeds the level at which intoxication is defined in the state where the collision or accident occurred, regardless of any legal proceedings thereto;

8. medical or surgical treatment or diagnostic procedures including any resulting complications, or when the outcome is not as planned or expected, including claims of medical malpractice;

9. travel in or descent from any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight on a licensed passenger aircraft;

10. war or any act of war, whether declared or undeclared;

11. the insured's participation in the following activities: scuba diving, bungee jumping, base jumping, hang gliding, sail gliding, parasailing, parakiting, or mountain climbing;

12. the insured riding or driving in any motor-driven vehicle in a race, stunt show or speed test;

13. the insured practicing for or participating in any semi-professional or professional competitive athletics; or

14. repetitive stress syndromes including but not limited to rotator cuff syndrome, bursitis, tendonitis, carpal tunnel syndrome, ulnar nerve syndrome, stress fractures, neuropathy, epicondylitis, or neuritis (This exclusion does not apply to an accidental death benefit). Benefits are not payable for any care, treatment or diagnostic measures which were received outside of the United States or a United States territory.

#### Are there any additional limitations that apply?

Other benefit limitations may exist and vary by covered benefit. Please refer to your plan documents for more information.

#### Group accident insurance

Limitations and exclusions apply. This is a summary of plan provisions related to the insurance policy issued by Securian Life Insurance Company to Children's Mercy Hospital. This policy has exclusions, limitations, reduction of benefits, terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact Securian Financial Group. In the event of a conflict between this summary and the policy and/or certificate, the policy and/or certificate shall dictate the insurance provisions, exclusions, all limitations and terms of coverage. All elections or increases are subject to the actively-at-work requirement of the policy. Products are offered under policy form series 23-32590.24 or a state variation thereof. Product availability and features may vary by state.

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