Partnership Healthplan of California





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

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.

Since our founding in 1848, Unum has been a leader in the employee benefits business.

Innovation, integrity and an unwavering commitment to our customers has helped us become a global leader in financial protection benefits.

^{*}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

Covered injuries	Benefit amount	Eme
Fractures		hosp
Open Reduction (dependent on location of injury)	\$100 to \$5,000	Ambu (grou
Closed Reduction (dependent on location of injury)	\$50 to \$2,500	Air a
Chips	25% of closed amount	Emer
Dislocations		in ph
Open Reduction (dependent on location of injury)	\$200 to \$4,000	Hosp (adm
Closed Reduction (dependent on location of injury)	\$100 to \$2,000	admi
Burns		Inten
At least 10 square inches, but less than 20 square inches	2nd degree – \$0 3rd degree – \$1,250	(same
At least 20 square inches, but less than 35 square inches	2nd degree – \$0 3rd degree – \$2,500	Inten (per d
35 or more square inches of the body surface	2nd degree – \$500 3rd degree – \$7,500	Medi (once
Skin grafts for 2nd and 3rd degree burns	50% of burn benefit	Outpa
Skin graft for any other accidental tra	aumatic loss of skin	(once
At least 10 square inches, but less than 20 square inches	\$75	(epid
At least 20 square inches, but less than 35 square inches	\$125	Trea othe
35 or more square inches of the body surface	\$250	Surge
Concussion	\$100	Expl
Coma	\$5,000	Herni
Ruptured disc	\$600	Physi
Knee cartilage		(2 vis
Torn with surgical repair	\$500	Chiro (up to
Exploratory surgery or cartilage shaved, only	\$100	Thera
Laceration	\$25 - \$400	Occu
Tendon/ligament and rotator cuff		Spee
Surgical repair of one	\$600	Phys
Surgical repair of two or more	\$900	Prost
Exploratory surgery without repair	\$100	One
Dental work, emergency		More
Extraction	\$50	Appli
Crown	\$150	Blood
Eye injury	\$200	Trave

Accident	coverage	ic a	limited	policy
Accident	coverage	: IS a	IIIIIIIIII	policy.

Emergency and hospitalization benefits	Benefit amount			
Ambulance (ground, once per accident)	Not available in CA			
Air ambulance	Not available in CA			
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				
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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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:

- \cdot participating in war or act of war, whether declared or undeclared;
- · 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;
- · committing or trying to commit suicide or injuring oneself, 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.

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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