Accident Insurance

Enrollment at a glance

For the employees of: Atlantic Corporation of Wilmington Inc. Group #702030

What is Accident Insurance?

Accident Insurance pays you benefits for specific injuries and events resulting from a covered accident that occurs on or after your coverage effective date. The benefit amount depends on the type of injury and care received. You have the option to elect Accident Insurance to meet your needs. Accident Insurance is a limited benefit policy. It is not health insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Features of Accident Insurance include:

- Guaranteed issue: No medical questions or tests are required for coverage.
- Flexible: You can use the benefit payments for any purpose you like.
- Portable: If you leave your current employer or retire, you can take your coverage with you.

How can Accident Insurance help?

Below are a few examples of how your Accident Insurance benefits could be used:

- Medical expenses, such as deductibles and copays
- Home healthcare costs
- Lost income due to lost time at work
- Everyday expenses like utilities and groceries

Who is eligible for Accident Insurance?

- You—All active employees working 30+ hours per week.
- Your spouse*—If you have coverage on yourself, you may enroll your spouse, as long as your spouse is not covered under your employer's plan as an employee. Your spouse will be covered for the same Accident benefits as you are.
- Your children**—If you have coverage on yourself; your natural children, stepchildren, adopted children or children for whom you are a legal guardian; are eligible to be covered under your employer's plan, up to the age of 26. Your children will be covered for the same Accident benefits as you are and one premium amount covers all of your eligible children. If both you and your spouse are covered under this policy as an employee; then only one, but not both, may cover the same children for Accident Insurance. If the parent who is covering the children stops being insured as an employee, then the other parent may apply for children's coverage.

When is my coverage effective?

The coverage effective date is the date you are eligible to begin filing claims. The diagnosis of the covered condition must occur on or after the coverage effective date.

Annual Enrollment

Your coverage becomes effective on October 1, 2020, following the election of coverage. Coverage for your spouse and/or children becomes effective on the same date as your coverage, if elected.

New Hires

For new hires, after the initial enrollment period, please refer to the certificate of insurance to learn when your coverage will become effective.



^{*}The use of "spouse" in this document means a person insured as a spouse as described in the applicable rider.

^{**}The definition of "child" may vary by state. Please contact your employer for more information.

What accident benefits are available?

The following list is a summary of the benefits provided by Accident Insurance. You may be required to seek care for your injury within a set amount of time. Note that there may be some variations by state. For a list of standard exclusions and limitations, go to the end of this document. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders.

Event	Benefit		
Accident hospital care			
Surgery open abdominal, thoracic	\$2,500		
Surgery exploratory or without repair	\$350		
Blood, plasma, platelets	\$650		
Hospital admission	\$1,750		
Hospital confinement per day, up to 365 days	\$450		
Critical care unit confinement per day, up to 15 days	\$700		
Rehabilitation facility confinement per day, up to 90 days	\$225		
Coma duration of 14 or more days	\$20,000		
Transportation per trip, up to three per accident	\$840		
Lodging per day, up to 30 days	\$225		
Family care per child per day, up to 45 days	\$30		
Accident care			
Initial doctor visit	\$120		
Urgent care facility treatment	\$300		
Emergency room treatment	\$300		
Ground ambulance	\$600		
Air ambulance	\$2,500		
Follow-up doctor treatment	\$120		
Chiropractic treatment up to six per accident	\$75		
Medical equipment	\$250		
Physical or occupational therapy up to six per accident	\$75		
Speech therapy up to 6 per accident	\$75		
Prosthetic device (one)	\$1,500		
sthetic device (two or more) \$2,400			
lajor diagnostic exam \$500			
Outpatient surgery (one per accident)	\$300		
X-ray	\$75		
Common injuries			
Burns second degree, at least 36% of the body	\$1,750		
Burns third degree, at least nine but less than 35 square inches of the body	\$10,000		
Burns third degree, 35 or more square inches of the body	\$22,000		
Skin grafts	25% of burn benefit		
Emergency dental work	\$480 crown, \$180 extraction		
Eye injury removal of foreign object	\$120		
Eye injury surgery	\$420		
orn knee cartilage surgery with no repair or if cartilage is shaved \$280			
Torn knee cartilage surgical repair	\$1,000		
aceration ¹ treated no sutures \$60			
Laceration¹ sutures up to 2"	\$120		

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Laceration ¹ sutures 2" – 6"	\$480	
Laceration sutures 2 = 0 Laceration sutures over 6"	\$960	
Ruptured disk surgical repair	\$1,000	
	\$7,000	
Tendon/ligament/rotator cuff exploratory arthroscopic surgery with no repair Tendon/ligament/rotator cuff one, surgical repair	\$1,020	
Tendon/ligament/rotator cuff two or more, surgical repair	\$1,520	
Concussion	\$450	
Paralysis - paraplegia	\$20,000	
Paralysis - quadriplegia	\$30,000	
Dislocations	Closed/open reduction ²	
Hip joint	\$4,000/\$8,000	
Knee	\$3,000/\$6,000	
Ankle or foot bone(s) other than toes	\$1,800/\$3,600	
Shoulder	\$2,200/\$4,400	
Elbow	\$1,500/\$3,000	
Wrist	\$1,500/\$3,000	
Finger/toe	\$350/\$700	
Hand bone(s) other than fingers	\$1,500/\$3,000	
Lower jaw	\$1,500/\$3,000	
Collarbone	\$1,500/\$3,000	
Partial dislocations	25% of the closed reduction amount	
Fractures	Closed/open reduction ³	
Hip	\$5,000/\$10,000	
Leg	\$2,800/\$5,600	
Ankle	\$2,500/\$5,000	
Kneecap	\$2,500/\$5,000	
Foot excluding toes, heel	\$2,500/\$5,000	
Upper arm	\$2,750/\$5,500	
Forearm, hand, wrist except fingers	\$2,500/\$5,000	
Finger, toe	\$400/\$800	
Vertebral body	\$4,200/\$8,400	
Vertebral processes	\$2,000/\$4,000	
Pelvis except coccyx	\$4,000/\$8,000	
Соссух	\$500/\$1,000	
Bones of face except nose	\$1,400/\$2,800	
Nose	\$750/\$1,500	
Upper jaw	\$1,750/\$3,500	
Lower jaw	\$2,000/\$4,000	
Collarbone	\$2,000/\$4,000	
Rib or ribs	\$600/\$1,200	
Skull – simple except bones of face	\$1,750/\$3,500	
Skull – depressed except bones of face	\$5,000/\$10,000	
Sternum	\$500/\$1,000	
Shoulder blade	\$2,500/\$5,000	
Chip fractures	25% of the closed reduction amount	
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What does my Accident Insurance include?

The benefits listed below are included with your Accident Insurance coverage. For a list of standard exclusions and limitations, please refer to the end of this document. For a complete description of your available benefits, exclusions and limitations, see your certificate of insurance and any riders.

- **Sports Accident Benefit**: If your accident occurs while participating in an organized sporting activity as defined in the certificate; the accident hospital care, accident care or common injuries benefit will be increased by 25%; to a maximum additional benefit of \$1000.
- Wellness Benefit: This provides an annual benefit payment if you complete a health screening test.
 - The annual benefit amount is \$50 for completing a health screening test.
 - o Your spouse's benefit amount is \$50.
 - The benefit for child coverage is 50% of your benefit amount per child, with an annual maximum of \$100 for all children.
- Accidental Death and Dismemberment (AD&D) coverage: If you are severely injured or die as a result of a
 covered accident, an AD&D benefit may be payable to you or your beneficiary.
 - Common carrier: If the death occurs as a result of a covered accident on a common carrier, a higher benefit will be payable. Common carrier means any commercial transportation that operates on a regularly scheduled basis between predetermined points or cities.

Accidental Death Benefits	Benefit
Common carrier	
Employee	\$200,000
Spouse	\$100,000
Children	\$50,000
Other accident	
Employee	\$100,000
Spouse	\$40,000
Children	\$20,000
Accidental Dismemberment Benefits	
Loss of both hand or both feet or sight in both eyes	\$40,000
Loss of one hand or one foot AND the sight of one eye	\$30,000
Loss of one hand AND one foot	\$30,000
Loss of one hand OR one foot	\$15,000
Loss of two or more fingers or toes	\$2,500
Loss of one finger or one toe	\$1,500

How much does Accident Insurance cost?

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¹ Laceration benefits are a total of all lacerations per accident.

² Closed reduction of dislocation = Non-surgical reduction of a completely separated joint. Open reduction of dislocation = Surgical reduction of a completely separated joint.

³ Closed reduction of fracture = Non-surgical. Open reduction of fracture = Surgical.

All employees pay the same rate. See the chart below for the premium amounts. Rates shown are guaranteed until November 1, 2023.

Monthly Rates				
Employee	Employee and Spouse	Employee and Children	Family	
\$20.54	\$36.17	\$43.23	\$58.86	
Weekly Rates (52 Pay Periods)				
Employee	Employee and Spouse	Employee and Children	Family	
\$4.74	\$8.35	\$9.98	\$13.58	

Exclusions and Limitations*

Exclusions for the Certificate, Spouse Accident Insurance, and Children's Accident Insurance and AD&D are listed below. (These may vary by state.)

Benefits are not payable for any loss caused in whole or directly by any of the following*:

- Participation or attempt to participate in a felony or illegal activity.
- An accident while the covered person is operating a motorized vehicle while intoxicated. Intoxication means the
 covered person's blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of
 the state where the accident occurred.
- Suicide, attempted suicide or any intentionally self-inflicted injury, while sane or insane.
- War or any act of war, whether declared or undeclared, other than acts of terrorism.
- Loss sustained while on active duty as a member of the armed forces of any nation. We will refund, upon written notice of such service, any premium which has been accepted for any period not covered as a result of this exclusion.
- Alcoholism, drug abuse, or misuse of alcohol or taking of drugs, other than under the direction of a doctor.
- Riding in or driving any motor-driven vehicle in a race, stunt show or speed test.
- Operating, or training to operate, or service as a crew member of, or jumping, parachuting or falling from, any aircraft or hot air balloon, including those which are not motor-driven. Flying as a fare-paying passenger is not excluded.
- Engaging in hang-gliding, bungee jumping, parachuting, sail gliding, parasailing, parakiting, kite surfing or any similar activities.
- Practicing for, or participating in, any semi-professional or professional competitive athletic contests for which any type of compensation or remuneration is received.
- Any sickness or declining process caused by a sickness.



^{*}Definition and limitations/exclusions may vary by state.



For more information, please contact or go to:

- Voya Employee Benefits Customer Service at (877) 236-7564
- https://go.voya.com/atlanticcorporation

This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Accident Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy Form #RL-ACC3-POL-16; Certificate Form #RL-ACC3-CERT-16; and Rider Forms: Spouse Accident Rider Form #RL-ACC3-SPR-16, Children's Accident Rider Form #RL-ACC3-CHR-16, Wellness Benefit Rider Form #RL-ACC3-WELL-16, Accidental Death & Dismemberment (AD&D) Rider Form #RL-ACC3-ADR-16.Form numbers, provisions and availability may vary by state.

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