

Accident insurance

For employees of Shelby County Public Schools, policy # 232668

Stay on stable financial ground, even when an accident has you off your feet.

Receive a payment if you experience any of the following injuries, care, or losses due to a covered accident. Benefits for injuries are payable once for each covered accident, and benefits for hospital stays and related care are payable up to a specific number of days or visits for each covered accident.

Injuries

Covered benefits	The plan pays
	Mid
Dislocations ¹	
Hip	\$6,000
Knee, ankle, bones of the foot	\$3,000
Elbow or wrist	\$800
Shoulder	\$800
Collarbone or bones of the hand	\$800
Finger(s) or toe(s)	\$200
Lower jaw	\$800
Fractures ¹	
Hip or thigh	\$4,000
Skull—depressed	\$6,000
Skull—simple; vertebral processes; or bones of face or nose	\$1,000
Leg	\$2,000
Vertebrae	\$2,000
Pelvis	\$2,400
Upper jaw or upper arm	\$1,000
Lower jaw, knee cap, ankle, foot, collarbone, shoulder, forearm, hand, or wrist	\$900
Rib, finger, toe, coccyx	\$300
Multiple ribs	\$1,000
Additional injuries	
Eye injury	\$250
Gunshot wound	\$500
Paralysis—monoplegia, uniplegia	\$1,000
Paralysis—diplegia	\$2,500
Paralysis—hemiplegia	\$2,500

Paralysis—paraplegia	\$2,500
Paralysis—quadriplegia	\$7,500
Coma	\$10,000
Concussion	\$150
Concussion Lifetime Maximum Benefit	\$1,500
Lacerations	
2" to 6" with sutures	\$300
Greater than 6" with sutures	\$600
Burns	
Greater than 36% of body, 2nd degree	\$1,000
9 to 18 square inches, 3rd degree	\$2,000
Over 18, up to 35 square inches, 3rd degree	\$4,000
Over 35 square inches, 3rd degree	\$12,000
Skin graft	50% of the applicable Burn Benefit

^{1.} Benefits displayed reflect amounts payable for open reductions. Benefits payable for closed reductions are 50% of open reduction amount.

Care

Covered benefits	The plan pays
	Mid
Medical services	
Diagnostic exam (one time per each Covered Accident): CT, CAT, EKG, EEG, or MRI	\$150
X-ray	\$30
Physician's follow-up treatment office visit (per visit, up to two times per Covered Accident)	\$50
Physical therapy, occupational therapy (per visit, up to six visits per Covered Accident)	\$25
Medical devices	\$100
Epidural pain management (up to two injections per Covered Accident)	\$50
Hospital	
Hospital admission	\$1,000
Hospital confinement (per day up to 365 days per Covered Accident)	\$200
Intensive Care Unit admission	\$1,500
Intensive Care Unit confinement (per day up to 15 days)	\$300
Ambulance (Ground)	\$200
Ambulance (Air)	\$1,000
Emergency Room admission or Urgent Care facility	\$100

Family lodging (per day, maximum lodging night stays: 30 days per Covered Accident)	\$125
Transportation (100 or more miles up to three times per Covered Accident)	\$300
Rehabilitation Unit (per day up to 30 days per Covered Accident)	\$125
Blood, plasma, or platelet transfusion	\$200
Surgery	
Open surgery (not otherwise listed)	\$1,500
Exploratory surgery or debridement	\$150
Laparoscopic surgery or hernia repair	\$150
Prosthesis (one)	\$750
Prosthesis (two)	\$1,500
Tendon/ligament/rotator cuff tear	\$750
Torn knee cartilage	\$750
Ruptured/herniated disc	\$750
Emergency dental	
Emergency dental extraction	\$75
Emergency dental crown	\$300

Loss

Covered benefits	The plan pays Mid
Accidental Death	\$25,000
Accidental Death Common Carrier ³	\$50,000
Catastrophic Loss ⁴	\$50,000
Accidental dismemberment: one hand, one foot, one leg, one arm, loss of sight of one eye or loss of one eye, or loss of hearing of one ear or loss of one ear	\$7,500
Two or more fingers or toes	\$1,500
One finger or one toe	\$750

- Payable for life/death and dismemberment losses that are due to a Covered Accident or Accidental Injury as defined by the policy. Benefits displayed are payable for the employee only. Life and dismemberment benefits for the spouse are 100% of the benefit amount listed. Life and dismemberment benefits for dependent children are 50% of the benefit amount listed.
- 3. Accidental Death Common Carrier pays an additional benefit if accidental death occurs while traveling as a fare-paying passenger on a public conveyance.
- 4. Both arms or both hands, both legs or both feet, one hand and one foot or one arm and one leg, irrecoverable loss of hearing of both ears, irrecoverable loss of sight of both eyes, or irrecoverable loss of speech or ability to speak.

Injuries and other related benefits due to a covered accident must be diagnosed or treated within a defined period of time from the date of your accident. This could be as few as three days for certain benefits. Please refer to your policy for details.

Accident insurance is a limited benefit policy. It provides accident coverage only and does not provide basic hospital, basic medical, or major medical insurance. This coverage does not constitute comprehensive health insurance (often referred to as "major medical coverage") and does not satisfy the requirement for Minimum Essential Coverage under the Affordable Care Act. Failing to maintain Minimum Essential Coverage may result in a tax penalty.

The certificate and its riders have exclusions and limitations that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy, certificate, and any rider, if applicable, may not be available in all states.

Exclusions

The following exclusions may vary by plan and by state laws and regulations. No benefits will be payable for any loss or Period of Disability that is the result of a Covered Accident that is due to or results from:

- war or any act of war, or any involvement in any period of any type of armed conflict (this does not include acts of terrorism);
 active military duty:
- riding in or driving any motor-driven vehicle in a race, stunt show, speed test, or while Intoxicated;
 operating, learning to operate, serving as a crew member of, or jumping or falling from any aircraft, including those that are not motor-driven.
 This does not include:
 - flying as a fare-paying passenger in a scheduled or chartered flight operated by a commercial airline; or
 - flying as a passenger with no duties on board an aircraft operated by a private business to transport its personnel or quests;
- engaging in hang-gliding, bungee jumping, parachuting, sail gliding, parasailing, parakiting, or any similar activities;
- participating in or practicing for any semi-professional or professional competitive athletic contest in which any compensation is received;
- · committing or attempting to commit an assault, felony, or other criminal act;
- committing or attempting to commit suicide or injuring oneself intentionally;
- voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now
 or hereafter amended, unless administered on the advice of a Physician and used as directed;
- improper or illegal use of inhalants, or huffing; or
- a sickness or infection including physical or mental condition that is not caused solely by or as a direct result of a Covered Accident.

For New York consumers: The expected benefit ratio for this policy is 65%. This ratio is the portion of future premiums that the Company expects to return as benefits, when averaged over all people with the policy.

Group accident insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 12-GP-01, 12-AC-C-01, 12-GPPort-01, and 12-ACPort-C-01. Product offerings may not be available in all states and may vary depending on state laws and regulations. In New York, group accident insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) under Policy Form Series 12-GP-01, 12-AC-C-01, 12-GPPort-01, and 12-ACPort-C-01.

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