Plan Highlights

Group Accident Insurance



ISAC

COVERAGE

Accident insurance provides a range of fixed, lump-sum benefits for injuries resulting from a covered accident, or for accidental death and dismemberment. Emergency care must be sought within 72 hours of an accident to be covered. These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and childcare.

ELIGIBILITY

Employees: All eligible employees waiving coverage in the ISAC Health Plan.

Dependents:

Your legal spouse or your domestic partner. Spouse must be under age 80 at date of application.

Your dependent children* from birth to 26 years.

*An eligible employee's child(ren) from birth to 26 years, including natural children, legally adopted children, children who are dependent on the eligible employee during the waiting period before adoption, stepchildren, and foster children.

Foster children must be in the custody of the eligible employee to be considered a Dependent; and an eligible employee's child(ren) beyond the limiting age who is incapable of selfsustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the eligible employee for support and maintenance.

A person may not have coverage as both an Employee and Dependent.

BENEFITAMOUNT

See Schedule of Benefits on reverse side.

BENEFIT REDUCTION DUE TO AGE

(Applicable to AD&D coverage only)

Age	Original Benefit Reduced to
75	50%

CONTRIBUTION REQUIREMENTS

The Core and Enhanced plans are 100% employee paid for employees not enrolled in an ISAC Health Plan.

MONTHLY EMPLOYEE PREMIUMS:

Contact Brad Holtan or Ryan Berven for more information and for premiums.

FEATURES

- Accidental Death & Dismemberment
- Wellness benefits
- Online claim submission
- Pre-tax payroll deduction

EXCLUSIONS

Benefits will not be paid for any loss caused by:

- Suicide; war; air travel (except as a passenger on commercial flights); assault/felony; acute or chronic intoxication; voluntary consumption of illegal or controlled substance or prescribed narcotic or drug.
- Injuries arising out of or in the course of employment for wage or profit. (AD&D coverage is 24 hour coverage)

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-9547-0318, et al.



Schedule of Benefits

	Accident Benefits	Core Plan	Enhanced Plan
EMERGENCY CARE	Initial Accident Treatment	Physician: \$100	Physician: \$150
	(within 72 hours of accident)	Emergency Room: \$225	Emergency Room: \$300
	Hospital Admission Hospital Confinement	\$1,000	\$1,500
	(per day; up to 365 days)	\$200	\$400
	ICU Admission	\$1,500	\$2,250
	ICU Confinement (per day; up to 365 days)	\$400	\$800
	Ambulance	Ground: \$200; Air: \$1,000	Ground: \$300; Air: \$1,500
	X-Ray	\$100	\$100
	Major Diagnostic Imaging	\$100	\$150
SUPPORT CARE	Office Follow-up (1 visit per accident)	\$100	\$150
	Chiropractic (up to 6 visits per accident)	\$50	\$75
	Physical Therapy (up to 6 visits per accident)	\$75	\$100
SPECIFIC INJURY	Lacerations	То \$800	To \$1,200
	Dislocation	To \$4,800	То \$6,400
	Fracture	To \$6,250	To \$7,500
	Concussion	\$150	\$200
	Coma	\$20,000	\$25,000
	Paralysis	\$15,000 - \$30,000	\$25,000 - \$50,000
	Dental Benefit (per tooth)	\$75 - \$225	\$100 - \$300
	Eye Injuries	\$200 - \$400	\$300 - \$600
SURGICAL	Exploratory	\$200	\$300
	Knee Cartilage	\$600	\$900
	Abdominal or Thoracic	\$2,000	\$3,000
	Ruptured Disc	\$1,000	\$1,500
	Tendon, Ligament or Rotator Cuff	To \$1,200	To \$1,800
AD &D	Accidental Death Benefits		
	Employee AD&D	\$50,000	\$100,000
	Spouse AD&D	\$25,000	\$25,000
	Child AD&D	\$12,500	\$20,000
	Wellness (Health Screening) Benefit		
	Employee Wellness	\$75	\$100
	Spouse/Child Wellness	\$75 (up to 3x)	\$100 (up to 3x)

