



## What is it?

Accident insurance is a supplemental health product that may provide benefits if you or your covered dependent suffers a covered injury.

## Why is this coverage valuable?

This coverage provides you a lump sum cash benefit to help manage unexpected expenses. How you spend it is completely up to you — from everyday bills or childcare to other expenses.

## Your accident coverage

|                                |                                                                                                                                                                                              |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Eligibility description</b> | All full-time managers & hourly JMC employees and all part-time employees who are qualified for benefits based on the ACA requirements of working at least 1560 hours in the lookback period |
| <b>Contribution</b>            | You pay the cost of your coverage.                                                                                                                                                           |
| <b>Emergency treatment</b>     |                                                                                                                                                                                              |
| Ambulance                      | \$300                                                                                                                                                                                        |
| Air ambulance                  | \$1,500                                                                                                                                                                                      |
| Emergency care/treatment       | \$200                                                                                                                                                                                        |
| Initial care visit             | \$100                                                                                                                                                                                        |
| Major diagnostic               | \$200                                                                                                                                                                                        |
| X-ray                          | \$40                                                                                                                                                                                         |
| <b>Fractures</b>               |                                                                                                                                                                                              |
| Ankle                          | \$450                                                                                                                                                                                        |
| Arm (shoulder to elbow)        | \$875                                                                                                                                                                                        |
| Arm (elbow to wrist)           | \$450                                                                                                                                                                                        |
| Coccyx                         | \$525                                                                                                                                                                                        |
| Collarbone                     | \$525                                                                                                                                                                                        |
| Elbow                          | \$450                                                                                                                                                                                        |
| Bones of the face              | \$875                                                                                                                                                                                        |
| Fingers                        | \$100                                                                                                                                                                                        |
| Foot (except toes)             | \$450                                                                                                                                                                                        |
| Hand (except fingers)          | \$450                                                                                                                                                                                        |
| Hip                            | \$2,625                                                                                                                                                                                      |
| Jaw upper                      | \$875                                                                                                                                                                                        |
| Jaw lower                      | \$525                                                                                                                                                                                        |
| Kneecap                        | \$450                                                                                                                                                                                        |
| Leg (hip to knee)              | \$2,625                                                                                                                                                                                      |
| Leg (knee to ankle)            | \$1,750                                                                                                                                                                                      |



|                                                                       |                               |
|-----------------------------------------------------------------------|-------------------------------|
| Nose                                                                  | \$875                         |
| Pelvis                                                                | \$1,750                       |
| Rib                                                                   | \$450                         |
| Shoulder blade                                                        | \$450                         |
| Skull depressed                                                       | \$3,500                       |
| Skull non-depressed                                                   | \$1,750                       |
| Sternum                                                               | \$525                         |
| Toes                                                                  | \$100                         |
| Vertebral body                                                        | \$1,750                       |
| Vertebral process                                                     | \$450                         |
| Wrist                                                                 | \$450                         |
| Surgical treatment surgery                                            | Two times nonsurgical benefit |
| Chip fracture                                                         | 25% of fracture benefit       |
| <b>Dislocations</b>                                                   |                               |
| Ankle                                                                 | \$875                         |
| Collarbone (acromion and separation)                                  | \$450                         |
| Collarbone (sternoclavicular)                                         | \$875                         |
| Elbow                                                                 | \$450                         |
| Fingers                                                               | \$100                         |
| Foot (except toes)                                                    | \$875                         |
| Hand (except fingers)                                                 | \$450                         |
| Hip                                                                   | \$2,625                       |
| Lower jaw                                                             | \$450                         |
| Knee (except kneecap)                                                 | \$1,750                       |
| Shoulder                                                              | \$450                         |
| Toes                                                                  | \$100                         |
| Wrist                                                                 | \$450                         |
| Surgical treatment                                                    | Two times nonsurgical benefit |
| Partial dislocation                                                   | 25% of dislocation benefit    |
| <b>Specific injuries</b>                                              |                               |
| Blood, plasma, platelets, and other non-blood substitute IV solutions | \$375                         |
| 2nd degree burns: Based upon surface area burned                      | \$100 – \$1,000               |
| 3rd degree burns: Based upon surface area burned                      | \$375 – \$10,000              |
| Skin grafts                                                           | 25% of burn benefit           |
| Concussion                                                            | \$150                         |



|                                                                                       |                |
|---------------------------------------------------------------------------------------|----------------|
| Dental crown                                                                          | \$150          |
| Dental extraction                                                                     | \$75           |
| Eye (surgical repair)                                                                 | \$300          |
| Eye (removal of foreign object)                                                       | \$150          |
| Laceration: based upon the need for and length of sutures                             | \$35 – \$400   |
| Severe traumatic brain injury                                                         | \$5,000        |
| <b>Surgical benefits</b>                                                              |                |
| Arthroscopic                                                                          | \$150          |
| Cranial                                                                               | \$1,125        |
| Hernia                                                                                | \$150          |
| Other surgery under conscious sedation                                                | \$125          |
| Other surgery under general anesthesia                                                | \$225          |
| Repair of knee cartilage                                                              | \$750          |
| Repair of ligaments, tendons, rotator cuff                                            | \$750          |
| Repair of ruptured disc                                                               | \$750          |
| Open abdominal or thoracic                                                            | \$1,500        |
| <b>Hospitalization and ongoing care</b>                                               |                |
| Accident hospital admission                                                           | \$1,250        |
| Accident hospital daily confinement                                                   | \$300          |
| Accident intensive care admission                                                     | \$2,000        |
| Accident intensive care daily confinement                                             | \$600          |
| Physical, occupational, and chiropractic therapy (up to 10 sessions)                  | \$50           |
| Physician follow-up visits (up to six visits)                                         | \$100          |
| Alternative care/rehabilitation facility daily confinement/rehabilitative confinement | \$200          |
| Epidural/cortisone pain management (up to one injection)                              | \$100          |
| Medical mobility devices                                                              | \$100          |
| Wheelchair (expected use one year or more)                                            | \$400          |
| Wheelchair (expected use less than one year)                                          | \$200          |
| Prosthesis (per limb)                                                                 | \$1,000        |
| <b>Recovery assistance</b>                                                            |                |
| Family care                                                                           | \$75           |
| Companion lodging (100 or more miles from home)                                       | \$150 per day  |
| Transportation (100 or more miles from home)                                          | \$300 per trip |



| Additional plan benefits    |          |
|-----------------------------|----------|
| Portability                 | Included |
| Child sports injury benefit | Included |

## Benefit exclusions

Like any insurance, this accident policy does have exclusions. The list below provides common exclusions but isn't meant to be exhaustive of all exclusions or limitations that may be part of your policy. See your policy for full details. The policy may not cover:

- Disease, physical or mental infirmity, sickness, or medical or surgical treatment of these
- Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane
- Voluntary intake or use by any means of any drugs, poison, gas, or fumes, voluntary use of controlled substance, voluntary intake or use by any means of any drug, except when:
  - Prescribed or administered by a physician
  - Taken in accordance with the physician's instructions
- Committing or attempting to commit a felony, participation in a felony, voluntary participation in a felony, voluntary committing or attempting to commit a felony
- War or any act of war, declared or undeclared, war or any act of war other than terrorism, declared or undeclared, war or any act of war, declared or undeclared while serving in the military or an auxiliary unit attached to the military or working in an area of war, whether voluntarily or as required by an employer
- Participation in a riot, insurrection, or rebellion of any kind
- Military duty, including the reserves or national guard
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight, or as a passenger, pilot, or crew member in the group policyholder's aircraft while flying for the group policyholder's business, provided:
  - The aircraft has a valid U.S. airworthiness certificate or foreign equivalent
  - The pilot has a valid pilot's certificate with a nonstudent rating authorizing them to fly the aircraft
- Driving a vehicle while intoxicated, as defined by the jurisdiction where the accident occurred. For accidental death and dismemberment only, benefits aren't payable for any loss sustained or contracted in consequence of your or your insured dependent being intoxicated or under the influence of any narcotic, operating a motor vehicle while intoxicated, as defined by the law of the state in which the accident occurred, if it is a felony
- Being incarcerated in any type of penal or detention facility, injury sustained while confined to jail, workhouse, or other corrections facility when it is due to an act of the facility and law enforcement is liable
- Under the influence of narcotics, unless prescribed and taken in accordance with the prescription by a physician
- Participating in, practicing for, or officiating any semi-professional or professional sport
- Riding in or driving in any motor driven vehicle for race, stunt show, or speed test
- An injury sustained while residing outside the U.S., U.S. territories, Canada, or Mexico for more than 12 months
- Bungee cord jumping, mountaineering, or base jumping
- Skydiving, parachuting, or jumping from any aircraft for recreational purposes



## Accident rate information

| Coverage                           | Monthly premium rate |
|------------------------------------|----------------------|
| Employee only                      | \$8.97               |
| Employee + spouse/domestic partner | \$14.83              |
| Employee + child(ren)              | \$15.91              |
| Employee + family                  | \$21.69              |

Note: The premiums for this coverage won't change due to your age. The premium for employee and child(ren) employee and family coverage includes all children.

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This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

Some benefits have limits on the number of services provided or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information. This insurance product does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

THIS IS A LIMITED POLICY. Policy is conditionally renewable.

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