

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

Eligibility description	All full-time employees electing the high plan		
Contribution	You pay the cost of your coverage.		
Emergency treatment			
Ambulance	\$425		
Air ambulance	\$1,750		
Emergency care/treatment	\$250		
Initial care visit	\$200		
Major diagnostic	\$200		
X-ray	\$200		
Fractures			
Ankle	\$1,250		
Arm (shoulder to elbow)	\$1,500		
Arm (elbow to wrist)	\$1,050		
Соссух	\$425		
Collarbone	\$1,500		
Elbow	\$375		
Bones of the face	\$1,500		
Fingers	\$400		
Foot (except toes)	\$1,025		
Hand (except fingers)	\$1,025		
Нір	\$4,000		
Jaw upper	\$1,500		
Jaw lower	\$1,500		
Kneecap	\$1,750		
Leg (hip to knee)	\$4,000		
Leg (knee to ankle)	\$2,000		
Nose	\$1,500		

Financial Group®

Accident insurance



Pelvis	\$3,000	
Rib	\$525	
Shoulder blade	\$1,500	
Skull depressed	\$6,000	
Skull non-depressed	\$5,000	
Sternum	\$1,500	
Toes	\$400	
Vertebral body	\$3,000	
Vertebral process	\$1,500	
Wrist	\$1,200	
Surgical treatment surgery	Two times nonsurgical benefit	
Chip fracture	25% of fracture benefit	
Dislocations		
Ankle	\$2,000	
Collarbone (acromion and separation)	\$1,250	
Collarbone (sternoclavicular)	\$1,250	
Elbow	\$1,250	
Fingers	\$400	
Foot (except toes)	\$2,000	
Hand (except fingers)	\$1,000	
Hip	\$4,000	
Lower jaw	\$1,250	
Knee (except kneecap)	\$2,000	
Shoulder	\$2,500	
Toes	\$400	
Wrist	\$1,000	
Surgical treatment	Two times nonsurgical benefit	
Partial dislocation	25% of dislocation benefit	
Specific injuries		
Blood, plasma, platelets, and other non-blood substitute IV solutions	\$250	
2nd degree burns: Based upon surface area burned	\$400 – \$2,000	
3rd degree burns: Based upon surface area burned	\$2,000 – \$20,000	
Skin grafts	50% of burn benefit	
Concussion	\$400	
Dental crown	\$350	







Dental extraction	\$125		
Eye (surgical repair)	\$400		
Eye (removal of foreign object)	\$400		
Laceration: based upon the need for and length of sutures	\$80 - \$1,500		
Severe traumatic brain injury	\$15,000		
Surgical benefits			
Arthroscopic	\$500		
Cranial	\$2,000		
Hernia	\$200		
Other surgery under conscious sedation	\$400		
Other surgery under general anesthesia	\$450		
Repair of knee cartilage	\$1,125		
Repair of ligaments, tendons, rotator cuff	\$1,125		
Repair of ruptured disc	\$1,125		
Open abdominal or thoracic	\$2,000		
Hospitalization and ongoing care			
Accident hospital admission	\$2,000		
Accident hospital daily confinement	\$300		
Accident intensive care admission	\$4,000		
Accident intensive care daily confinement	\$600		
Physical, occupational, and chiropractic therapy (up to 10 sessions)	\$80		
Physician follow-up visits (up to six visits)	\$200		
Alternative care/rehabilitation facility daily confinement/rehabilitative confinement	\$300		
Epidural/cortisone pain management (up to one injection)	\$120		
Medical mobility devices	\$200		
Wheelchair (expected use one year or more)	\$900		
Wheelchair (expected use less than one year)	\$250		
Prosthesis (per limb)	\$1,000		
Recovery assistance			
Family care	\$250		
Companion lodging (100 or more miles from home)	\$200 per day		
Transportation (100 or more miles from home)	\$500 per trip		





Moving vehicle benefits				
Moving vehicle injury	\$200			
Moving vehicle death	\$5,000			
Safe driver injury/death: Seat belt	Additional 25% of motor vehicle injury or death benefit			
Safe driver injury/death: Air bag	Additional 25% of motor vehicle injury or death benefit			
Safe driver injury/death: Motor vehicle helmet	Additional 25% of motor vehicle injury or death benefit			
Safe rider: Other helmet (bicycle, scooter, skateboard)	\$150			
Health assessment/wellness benefit				
Receive a cash benefit every year you and any of your covered family members complete a single covered assessment test.	\$50			
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:
 - o 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	\$8.40
Employee + spouse	\$16.33
Employee + child(ren)	\$18.15
Employee + family	\$21.76

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.

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.

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LCN-6758624-070224 PDF 7/24 **Z01** Order code: GP-ACDT2-FLI001 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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