# Compass Accident Insurance

Enrollment at a glance

# For the employees of: Maritz Holdings Inc. Group Number 70269-2



#### What is Accident Insurance?

Accident Insurance pays you benefits for specific injuries and events resulting from a covered accident that occurs while you are not at work, on or after your coverage effective date. The benefit amount depends on the type of injury and care received. You also have the option to elect additional coverage. 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 40 hours per week.
- Your spouse\*—If you have coverage on yourself, you may enroll your spouse. 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?

#### Annual enrollment

Your coverage becomes effective on the January 1<sup>st</sup> following the election of coverage. Coverage for your spouse and/or children becomes effective on the same date as your coverage.

<sup>\*</sup>The use of "spouse" in this document means a person insured as a spouse as described in the applicable rider. Please contact your employer for more information

<sup>\*\*</sup>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.

limitations, see your certificate of insurance	ce and any riders.
Event	Benefit
Accident hospital care	
Surgery open abdominal, thoracic	\$600
Surgery exploratory or without repair	\$85
Blood, plasma, platelets	\$300
Hospital admission	\$750
Hospital confinement per day, up to 365 days	\$225
Critical care unit confinement per day, up to 15 days	\$350
Rehabilitation facility confinement per day, up to 90 days	\$100
Coma duration of 14 or more days	\$8,500
Transportation per trip, up to three per accident	\$375
<b>Lodging</b> per day, up to 30 days	\$90
Family care per child per day, up to 45 days	\$10
Accident care	
Initial doctor visit	\$60
Urgent care facility treatment	\$150
Emergency room treatment	\$150
Ground ambulance	\$240
Air ambulance	\$1,000
Follow-up doctor treatment	\$60
Medical equipment	\$30
Physical or occupational therapy up to six per accident	\$25
Speech therapy up to 6 per accident	\$25
Prosthetic device (one)	\$375
Prosthetic device (two or more)	\$600
Major diagnostic exam	\$60
Outpatient surgery (one per accident)	\$150
X-ray	\$25
Common injuries	
<b>Burns</b> second degree, at least 36% of the body	\$750
<b>Burns</b> third degree, at least nine but less than 35 square inches of the body	\$3,500
<b>Burns</b> third degree, 35 or more square inches of the body	\$7,500
Skin grafts	25% of the burn benefit
Emergency dental work	\$175 crown, \$45 extraction

•	
Eye injury removal of foreign object	\$50
Eye injury surgery	\$175
<b>Torn knee cartilage</b> surgery with no repair or if cartilage is shaved	\$125
Torn knee cartilage surgical repair	\$400
Laceration <sup>1</sup> treated no sutures	\$15
Laceration <sup>1</sup> sutures up to 2"	\$30
Laceration <sup>1</sup> sutures 2" – 6"	\$120
Laceration <sup>1</sup> sutures over 6"	\$240
Ruptured disk surgical repair	\$400
Tendon/ligament/rotator cuff exploratory arthroscopic surgery with no repair	\$200
Tendon/ligament/rotator cuff one, surgical repair	\$400
Tendon/ligament/rotator cuff two or more, surgical repair	\$600
Concussion	\$100
Paralysis - paraplegia	\$8,000
Paralysis - quadriplegia	\$12,000
Dislocations	Closed/open
	reduction <sup>2</sup>
Hip joint	\$1,950/\$3,900
Knee	\$1,200/\$2,400
Ankle or foot bone(s) other than toes	\$750/\$1,500
Shoulder	\$800/\$1,600
Elbow	\$550/\$1,100
Wrist	\$550/\$1,100
Finger/toe	\$150/\$300
Hand bone(s) other than fingers	\$550/\$1,100
Lower jaw	\$550/\$1,100
Collarbone	\$550/\$1,100
Partial dislocations	25% of the closed reduction amount
Fractures	Closed/open reduction <sup>3</sup>
Hip	\$1,500/\$3,000
Leg	\$1,200/\$2,400
Ankle	\$900/\$1,800
Kneecap	\$900/\$1,800
Foot excluding toes, heel	\$900/\$1,800
Upper arm	\$1,050/\$2,100

ReliaStar Life Insurance Company, a member of the Voya® family of companies



Forearm, hand, wrist except fingers	\$900/\$1,800
Finger, toe	\$120/\$240
Vertebral body	\$1,680/\$3,360
Vertebral processes	\$720/\$1,440
Pelvis except coccyx	\$1,600/\$3,200
Соссух	\$100/\$200
Bones of face except nose	\$600/\$1,200
Nose	\$300/\$600
Upper jaw	\$750/\$1,500
Lower jaw	\$720/\$1,440

Collarbone	\$720/\$1,440
Rib or ribs	\$200/\$400
Skull – simple except bones of face	\$700/\$1,400
Skull – depressed except bones of face	\$1,500/\$3,000
Sternum	\$180/\$360
Shoulder blade	\$900/\$1,800
Chip fractures	25% of the closed reduction amount

### 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.

- Wellness Benefit: This provides an annual benefit payment if you complete a health screening test.
  - o 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.

# Are there additional non-insurance services available?

Voya Travel Assistance: When traveling more than 100 miles from home, Voya Travel Assistance offers enhanced security for your leisure and business trips. You and your dependents can take advantage of four types of services: pre-trip information, emergency personal services, medical assistance services and emergency transportation services.

Voya Travel Assistance services are provided by Europ Assistance USA, Bethesda, MD.

#### How much does Accident Insurance cost?

All employees pay the same rate, no matter their age. See the chart below for the premium amounts. The cost provided below includes Accident Insurance premium and a fee for Voya Travel Assistance.





<sup>&</sup>lt;sup>1</sup> Laceration benefits are a total of all lacerations per accident.

<sup>&</sup>lt;sup>2</sup> Closed reduction of dislocation = Non-surgical reduction of a completely separated joint. Open reduction of dislocation = Surgical reduction of a completely separated joint.

<sup>&</sup>lt;sup>3</sup> Closed reduction of fracture = Non-surgical. Open reduction of fracture = Surgical.

#### 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. Performing these acts as part of your employment with the employer 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.



For more information, please contact:

Voya Employee Benefits Customer Service at (877) 236-7564

To learn more, go to <a href="https://presents.voya.com/EBRC/maritzholdingsinc">https://presents.voya.com/EBRC/maritzholdingsinc</a>

This offer is contingent upon participation requirements being met.

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, Form numbers, provisions and availability may vary by state.

CN1030-38176-1018

Maritz Holdings Inc. Group #70269-2, Date Prepared: 7/13/2021

177546-11/01/2017

