For the Members of Midwest Coalition of Labor, FOP LODGE 106

What is Accident Insurance?

Accident Insurance pays you benefits for specific injuries and events resulting from a covered accident that occurs on or after your coverage effective date. The benefit amount depends on the type of injury and care received. You have the option to elect Accident Insurance to meet your needs. 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.

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— Active members that are available to work.
- Your spouse*—If you have coverage on yourself, you may enroll your spouse, as long as your spouse is not covered under your employer's plan as a member. 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 a member; 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 a member, then the other parent may apply for children's coverage.

*The use of "spouse" in this document means a person insured as a spouse as described in the applicable rider. This may include domestic partners or civil union partners as defined by the employer's plan. Please contact your employer for more information. **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.

Event	Benefit	
Accident hospital care		
Surgery open abdominal, thoracic	\$1,200	
Surgery exploratory or without repair	\$175	
Blood, plasma, platelets	\$600	
Hospital admission	\$1,250	
Hospital confinement per day, up to 365 days	\$375	
Critical care unit confinement per day, up to 15 days	\$600	
Rehabilitation facility confinement per day, up to 90 days	\$200	
Coma duration of 14 or more days	\$17,000	
Transportation per trip, up to three per accident	\$750	
Lodging per day, up to 30 days	\$180	
Family care per child per day, up to 45 days	\$25	
Accident care		
Initial doctor visit	\$90	
Urgent care facility treatment	\$225	
Emergency room treatment	\$225	
Ground ambulance	\$360	
Air ambulance	\$1,500	
Follow-up doctor treatment	\$90	
Chiropractic treatment up to six per accident	\$45	

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Accident Insurance Enrollment at a glance

Medical equipment	\$120	
Physical or occupational therapy up to six per accident	\$45	
Speech therapy up to 6 per accident	\$45	
Prosthetic device (one)	\$750	
Accident care		
Prosthetic device (two or more)	\$1,200	
Major diagnostic exam	\$240	
Outpatient surgery (one per accident)	\$225	
X-ray	\$45	
Common injuries		
Burns second degree, at least 36% of the body	\$1,250	
Burns third degree, at least nine but less than 35 square inches of the body	\$7,500	
Burns third degree, 35 or more square inches of the body	\$15,000	
Skin grafts	25% of the burn benefit	
Emergency dental work	\$350 crown, \$90 extraction	
Eye injury removal of foreign object	\$100	
Eye injury surgery	\$350	
Torn knee cartilage surgery with no repair or if cartilage is shaved	\$225	
Torn knee cartilage surgical repair	\$800	
Laceration ¹ treated no sutures	\$30	
Laceration ¹ sutures up to 2"	\$60	
Laceration ¹ sutures 2" – 6"	\$240	
Laceration ¹ sutures over 6"	\$480	
Ruptured disk surgical repair	\$800	

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Accident Insurance Enrollment at a glance

Tendon/ligament/rotator cuff exploratory arthroscopic surgery with no repair	\$425	
Tendon/ligament/rotator cuff one, surgical repair	\$825	
Tendon/ligament/rotator cuff two or more, surgical repair	\$1,225	
Concussion	\$225	
Common injuries		
Paralysis - paraplegia	\$16,000	
Paralysis - quadriplegia	\$24,000	
Dislocations	Closed/open reduction ²	
Hip joint	\$3,850/\$7,700	
Knee	\$2,400/\$4,800	
Ankle or foot bone(s) other than toes	\$1,500/\$3,000	
Shoulder	\$1,600/\$3,200	
Elbow	\$1,100/\$2,200	
Wrist	\$1,100/\$2,200	
Finger/toe	\$275/\$550	
Hand bone(s) other than fingers	\$1,100/\$2,200	
Lower jaw	\$1,100/\$2,200	
Collarbone	\$1,100/\$2,200	
Partial dislocations	25% of the closed reduction amount	
Fractures	Closed/open reduction ³	
Нір	\$3,000/\$6,000	
Leg	\$2,500/\$5,000	
Ankle	\$1,800/\$3,600	
Kneecap	\$1,800/\$3,600	

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Accident Insurance Enrollment at a glance

Foot excluding toes, heel	\$1,800/\$3,600	
Upper arm	\$2,100/\$4,200	
Forearm, hand, wrist except fingers	\$1,800/\$3,600	
Finger, toe	\$240/\$480	
Vertebral body	\$3,360/\$6,720	
Fractures	Closed/open reduction ³	
Vertebral processes	\$1,440/\$2,880	
Pelvis except coccyx	\$3,200/\$6,400	
Соссух	\$400/\$800	
Bones of face except nose	\$1,200/\$2,400	
Nose	\$600/\$1,200	
Upper jaw	\$1,500/\$3,000	
Lower jaw	\$1,440/\$2,880	
Collarbone	\$1,440/\$2,880	
Rib or ribs	\$400/\$800	
Skull – simple except bones of face	\$1,400/\$2,800	
Skull – depressed except bones of face	\$3,000/\$6,000	
Sternum	\$360/\$720	
Shoulder blade	\$1,800/\$3,600	
Chip fractures	25% of the closed reduction amount	

¹ Laceration benefits are a total of all lacerations per accident. ² Closed reduction of dislocation = Non-surgical reduction of a completely separated joint. Open reduction of dislocation = Surgical reduction of a completely separated joint. ³ Closed reduction of fracture = Non-surgical. Open reduction of fracture = Surgical.



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.

- Sports Accident Benefit: If your accident occurs while participating in an organized sporting activity as defined in the certificate; the accident hospital care, accident care or common injuries benefit will be increased by 25%, to a maximum additional benefit of \$1,000.
- Wellness Benefit: This provides an annual benefit payment if you complete a health screening test.
 - The annual benefit amount is \$50
 - Your spouse's annual benefit amount is \$50
 - The annual 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: Being in an unfamiliar place can cause stress, especially if something goes wrong. Voya Travel Assistance offers you and your dependents services when traveling 100 miles or more from home, including: medical assistance services, emergency medical transport services, travel assistance services such as pre-trip and cultural information, security services and accessible technology.

Voya Travel Assistance services are provided by International Medical Group, Inc., Indianapolis, IN.

How much does Accident Insurance cost?

All members within the same class 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.

Monthly Rates					
Member	Member and Spouse	Member and Children	Family		
\$8.13	\$15.00	\$17.69	\$24.56		



Exclusions and Limitations

Exclusions for the Certificate, Spouse Accident Insurance, and Children's Accident Insurance 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.
- 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.



To enroll and learn more about these benefits please go to https://go.voya.com/mcl2023

For any questions, please contact Kocher Insurance Group at 888-212-7822

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.

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