



# Group Accident Insurance

## Economy Plan

If you are in an accident, your focus should be on recovery, not how you're going to pay your bills. Colonial Life accident insurance can pay benefits directly to you to use however you like – from medical costs to everyday expenses. Whether you've had a fall or a car accident, these benefits can offer financial support when you need it.

### Our coverage includes:

- Benefits payable directly to you
- No medical questions to qualify for coverage
- Coverage for simple and complex injuries
- Benefits payable regardless of other insurance
- Worldwide coverage
- Works alongside your Health Savings Account (HSA)

### BENEFITS STORY

#### Milo was working in his yard when he tripped and injured his hand.

With Colonial Life accident benefits, Milo was able to pay the annual deductible and co-payments for his health insurance plan without using his savings or taking on debt.

	Milo went to an urgent care facility and received immediate care.	➔
	The doctor ordered an X-ray and discovered Milo had fractured his hand.	➔
	The doctor also found that Milo had a cut on his hand but did not require stitches.	➔
	Milo was discharged with a splint.	➔
	Over the next several weeks, Milo had two follow-up appointments with his doctor.	➔

MILO'S ACCIDENT BENEFITS	
Treatment in a physician's office or urgent care facility	\$50
<ul style="list-style-type: none"> <li>• X-ray</li> <li>• Fracture (hand)</li> </ul>	<ul style="list-style-type: none"> <li>\$30</li> <li>\$750</li> </ul>
Laceration (no repair)	\$25
Durable medical equipment	\$25
Physician follow-up visits (2 visits)	\$50 x 2 = \$100
<b>Total</b>	<b>\$980</b>

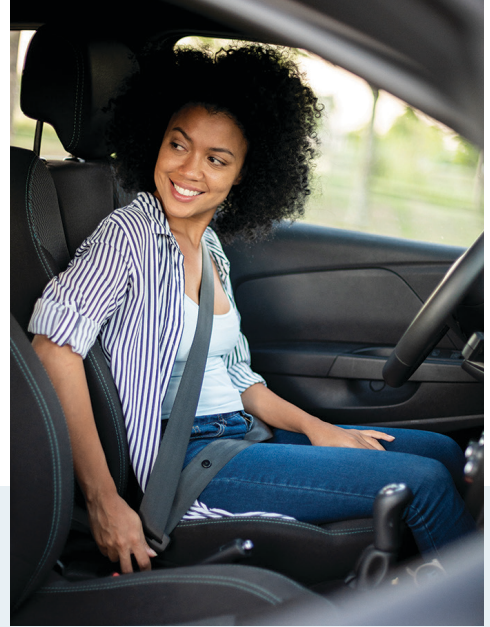
For illustrative purposes only. Benefit amounts may vary and may not cover all expenses.

## Give your benefits a boost

We know that more complicated or severe accidents result in more expensive medical bills and more disruption in your life.

Group Accident includes a Benefit Booster\* to provide additional financial support for serious accidents. If you have more than \$5,000 in payable benefits for a covered accident, we will give you a \$500 boost to your benefits to help you with whatever expenses you have.







\*Payable once per Insured per covered accident



### BENEFITS STORY

## Olivia was driving to the store when she got into a car accident.

Olivia's benefits helped her cover her medical expenses when she was injured in a car accident, helping her to focus on her recovery.

 <p>Olivia arrived by ambulance at the nearest emergency room and received immediate care.</p>	<p><b>OLIVIA'S ACCIDENT BENEFITS</b></p> <ul style="list-style-type: none"> <li>Ambulance \$100</li> <li>Emergency department visit \$100</li> <li>Injury due to auto accident \$250</li> </ul>
 <p>Olivia was treated for multiple lacerations. The doctor ordered an X-ray and discovered Olivia had fractured her thigh (femur) and her hip.</p>	<ul style="list-style-type: none"> <li>Lacerations (at least 2" but less than 6") \$300</li> <li>X-ray \$30</li> <li>Fracture (thigh) \$900</li> <li>Fracture (hip) \$900</li> </ul>
 <p>Olivia required surgery for her leg and hip.</p>	<ul style="list-style-type: none"> <li>Surgical repair (thigh fracture) \$900</li> <li>Surgical repair (hip fracture) \$900</li> <li>General anesthesia \$100</li> </ul>
 <p>Olivia boarded her pet for two nights after her surgery.</p>	<p>Pet boarding (2 days) \$20 x 2 = \$40</p>
 <p>Olivia used a wheelchair during her recovery. She had 15 sessions of physical therapy to help regain the strength in her leg and hip, and two follow-up appointments with her doctor.</p>	<ul style="list-style-type: none"> <li>Therapy services (15 sessions) \$25 x 15 = \$375</li> <li>Physician follow-up visits (2 visits) \$50 x 2 = \$100</li> <li>Durable medical equipment (Tier 3) \$100</li> </ul>
 <p>Olivia's benefits for this accident totaled more than \$5,000.</p>	<p>Benefit Booster \$500</p>
<p><i>For illustrative purposes only. Benefit amounts may vary and may not cover all expenses.</i></p>	<p><b>Total \$5,595</b></p>

Benefits are per covered person per covered accident unless stated otherwise

### Injury benefits

• Burns (based on size and degree)	\$250-\$9,000
• Concussion	\$125
• Connective tissue damage	\$100-\$200
• Eye injury	\$100
• Hearing loss injuries	\$120

(Maximum once per lifetime per ear per insured)

• Injury due to auto accident	\$250
• Internal injuries	\$200
• Knee cartilage (meniscus) injury	\$50
• Lacerations	\$25-\$600
• Loss of a digit – partial	\$100-\$200
• Loss of a digit	\$250-\$1,000
• Ruptured or herniated disc	\$100-\$200

## Fracture benefits

- **Injury** ..... \$160–\$1,750  
*Examples:* finger: \$160 | wrist: \$750 | hip: \$900
- **Surgical repair of fracture** ..... 100%  
(Payable as an additional % of the applicable fractures benefit)
- **Chip fracture** ..... 25%  
(Payable as a % of the applicable fractures benefit)

## Dislocation benefits

- **Injury** ..... \$100–\$1,600  
*Examples:* elbow: \$210 | ankle: \$560 | hip: \$1,600
- **Surgical repair of dislocation** ..... 100%  
(Payable as an additional % of the applicable dislocations benefit)
- **Incomplete dislocation** ..... 25%  
(Payable as a % of the applicable dislocations benefit)

## Treatment benefits

- **Air ambulance** ..... \$500
- **Ambulance (ground or water)** ..... \$100
- **Durable medical equipment** ..... \$25–\$100
- **Emergency dental repair** ..... \$25–\$75
- **Emergency department** ..... \$100  
(Maximum 4 per year)
- **Family care** ..... \$25 per day  
(Maximum of one benefit per day for all insureds combined, up to a maximum of three days per covered accident, regardless of the number of children)
- **Injections to prevent or limit infection** ..... \$50
- **Lodging** ..... \$100 per day  
(Maximum 30 days)
- **Medical imaging** ..... \$50
- **Pain management injections** ..... \$25
- **Pet boarding** ..... \$20 per day  
(Maximum of one benefit per day for all insureds combined, up to a maximum of three days per covered accident, regardless of the number of pets that are boarded)

- **Prosthetic device or artificial limb** ..... \$250–\$500
- **Skin grafts (due to burns)** ..... 50%  
(Payable as a % of the applicable burn benefit)
- **Skin grafts (not due to burns)** ..... \$125–\$250
- **Transfusions** ..... \$150
- **Transportation** ..... \$50 per trip  
(Maximum 6 one-way trips)
- **Treatment in a physician's office or urgent care facility** ..... \$50  
(Maximum 4 per year)
- **X-ray or ultrasound** ..... \$30

## Surgery benefits

- **Anesthesia** ..... \$50–\$100
- **Connective tissue surgery** ..... \$50–\$400
- **Eye surgery** ..... \$100
- **General surgery**
  - Abdominal, thoracic, or cranial ..... \$500
  - Exploratory surgery ..... \$100
- **Hernia surgery** ..... \$100
- **Knee cartilage (meniscus) surgery** ..... \$50–\$200
- **Outpatient surgical facility** ..... \$100
- **Ruptured or herniated disc surgery** ..... \$50–\$400

## Recovery care benefits

- **At-home care** ..... \$50 per day  
(Maximum 5 days)
- **Benefit booster** ..... \$500
- **Physician follow-up visits** ..... \$50  
(Maximum 2 days per covered accident and 8 days per calendar year)
- **Rehabilitation or sub-acute rehabilitation unit confinement** ..... \$50 per day  
(Maximum 15 days per covered accident and 30 days per calendar year)
- **Therapy services (speech, physical therapy, occupational therapy)** ..... \$25 per day  
(Maximum 15 days)



Contact your Colonial Life benefits counselor to learn more.

**CT:** We will pay the air ambulance or ambulance benefits directly to the licensed professional ambulance company. CT includes a benefit for "outpatient emergency medical care for accidental ingestion of a controlled substance." The at-home care benefit maximum is 80 days.

**KS:** Chiropractic therapy is not available.

**NH:** NH includes a burn benefit for 2nd degree burns under 5% of skin surface. The minimum benefit for the loss or partial loss of a digit is \$1,000.

**MD:** The prescription drug benefit is not available.

**PA:** The pet boarding benefit is not available.

**TN:** The therapy services benefit includes chiropractic.

**TX:** The concussion benefit is replaced by the "concussion and acquired brain injuries" benefit. The therapy services benefit includes the following services: cognitive communication therapy; cognitive rehabilitation therapy; community reintegration services; neurobehavioral; neurocognitive therapy and rehabilitation; neurofeedback therapy; neurophysiological; neuropsychological; post-acute transition services; psychophysiological testing or treatment; and remediation.

#### **HEALTH SAVINGS ACCOUNT (HSA) COMPATIBLE**

This plan is compatible with HSA guidelines and any other HSA plan in which a covered family member may participate.

It may also be offered to employees who do not have HSAs.

#### **THIS INSURANCE PROVIDES LIMITED BENEFITS.**

This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this insurance.

#### **EXCLUSIONS**

We will not pay benefits for claims that are caused by, contributed to by, or resulting from elective procedures, felonies or illegal occupations, hazardous avocations, impaired driving, incarceration, racing, semi-professional or professional sports, sickness, suicide or self-inflicted injuries, war, or armed conflict.

**ID:** "Semi-professional sports or professional sports" exclusion is replaced by "professional sports" exclusion.

**IL:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**MD:** Includes an exclusion for "Prohibited referrals." The "felonies or illegal occupations" and "impaired driving" exclusions apply only to Accidental Death and Dismemberment benefits.

**MI:** "Impaired driving" and "suicide or self-inflicted injuries" exclusions do not apply.

**MN:** "Suicide or self-inflicted injuries" exclusion does not apply.

**NH:** "Incarceration" and "racing" exclusions do not apply.

**UT:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**VT:** "Impaired driving" exclusion does not apply.

This information is not intended to be a complete description of the insurance coverage available. The insurance or its provisions may vary or be unavailable in some states. The insurance has exclusions and limitations which may affect any benefits payable. Applicable to policy form GAC4100-P and certificate form GAC4100-C (including state abbreviations where used, for example: GAC4100-P-TX and GAC4100-C-TX). For cost and complete details of coverage, call or write your Colonial Life benefits counselor or the company.

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# Group Accident Insurance

## Accidental Death & Dismemberment Benefits

These benefits can help pay for expenses related to an accidental death. They can also help pay costs related to recovery and rehabilitation from an accidental dismemberment, including costs that your medical plan doesn't cover, like co-pays and deductibles.

### Accidental death & dismemberment (AD&D) benefits

Accidental death and dismemberment benefits are available to you with group accident coverage, as well as all your covered family members. Talk with your benefits counselor about the level of AD&D benefits available to you.

Benefits are per covered person per covered accident unless stated otherwise.

	Economy
	■
<b>Accidental death</b>	
• Named insured	\$25,000
• Spouse <sup>1</sup>	\$25,000
• Children	\$5,000
<b>Accidental death – Common carrier</b>	
• Named insured	\$100,000
• Spouse <sup>1</sup>	\$100,000
• Children	\$20,000
<b>Accidental dismemberment</b>	
• Both feet	\$25,000
• Both hands	\$25,000
• One foot	\$6,000
• One hand	\$6,000
• Thumb and index finger of the same hand	\$3,000
Coma (7 or more consecutive days)	\$5,000
Home alterations and automobile modifications	\$500

## Accidental death & dismemberment benefits (continued)

	Economy
<b>Loss of use</b>	
• Hearing (one ear)	\$6,000
• Hearing (both ears)	\$25,000
• Sight of one eye	\$6,000
• Sight of both eyes	\$25,000
• Speech	\$25,000
<b>Paralysis</b>	
• Uniplegia	\$6,000
• Hemiplegia	\$25,000
• Paraplegia	\$25,000
• Triplegia	\$25,000
• Quadriplegia	\$25,000



To learn more, talk with your Colonial Life benefits counselor.

1. Or domestic partner where permitted by law.

### HEALTH SAVINGS ACCOUNT (HSA) COMPATIBLE

This plan is compatible with HSA guidelines and any other HSA plan in which a covered family member may participate. It may also be offered to employees who do not have HSAs.

### THIS INSURANCE PROVIDES LIMITED BENEFITS.

This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this insurance.

### EXCLUSIONS AND LIMITATIONS

We will not pay benefits for claims that are caused by, contributed to by, or resulting from elective procedures, felonies or illegal occupations, hazardous avocations, impaired driving, incarceration, racing, semi-professional or professional sports, sickness, suicide or self-inflicted injuries, war, or armed conflict.

### STATE VARIATIONS FOR EXCLUSIONS AND LIMITATIONS

**ID:** "Semi-professional sports or professional sports" exclusion is replaced by "professional sports" exclusion.

**IL:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**MD:** Includes an exclusion for "Prohibited referrals." The "felonies or illegal occupations" and "impaired driving" exclusions apply only to Accidental Death and Dismemberment benefits.

**MI:** "Impaired driving" and "suicide or self-inflicted injuries" exclusions do not apply.

**MN:** "Suicide or self-inflicted injuries" exclusion does not apply.

**NH:** "Incarceration" and "racing" exclusions do not apply.

**UT:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**VT:** "Impaired driving" exclusion does not apply.

This information is not intended to be a complete description of the insurance coverage available. The insurance or its provisions may vary or be unavailable in some states. The insurance has exclusions and limitations which may affect any benefits payable. Applicable to policy form GAC4100-P and certificate form GAC4100-C (including state abbreviations where used, for example, GAC4100-P-TX). For cost and complete details of coverage, call or write your Colonial Life benefits counselor or the company.



# Group Accident Insurance

## Wellbeing Assistance Benefit – Standard

This benefit can help reduce the risk of serious illness through early detection of disease or other risk factors, giving you more protection from the unexpected.

The wellbeing assistance benefit is available to you with group accident coverage, as well as all your covered family members.

**Wellbeing assistance benefit . . . . . \$50**

Payable once per covered person per calendar year; subject to a 30-day waiting period.

- Blood test for triglycerides
- Bone marrow testing
- BRCA1 or BRCA2 testing
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- Carotid Doppler
- CEA (blood test for colon cancer)
- Chest X-ray
- Colonoscopy
- Echocardiogram (ECHO)
- Electrocardiogram (EKG, ECG)
- Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemocult stool analysis
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum cholesterol test for HDL and LDL levels
- Serum protein electrophoresis (blood test for myeloma)
- Skin cancer biopsy
- Stress test on a bicycle or treadmill
- Thermography
- ThinPrep pap test
- Virtual colonoscopy



**To learn more, talk with your Colonial Life benefits counselor.**

#### **STATE VARIATIONS FOR BENEFITS**

**MD:** Waiting period does not apply

**WV:** Includes human papillomavirus screening test

#### **HEALTH SAVINGS ACCOUNT (HSA) COMPATIBLE**

This plan is compatible with HSA guidelines and any other HSA plan in which a covered family member may participate. It may also be offered to employees who do not have HSAs.

#### **THIS INSURANCE PROVIDES LIMITED BENEFITS.**

This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this insurance.

#### **EXCLUSIONS AND LIMITATIONS**

We will not pay benefits for claims that are caused by, contributed to by, or resulting from elective procedures, felonies or illegal occupations, hazardous avocations, impaired driving, incarceration, racing, semi-professional or professional sports, sickness, suicide or self-inflicted injuries, war, or armed conflict.

#### **STATE VARIATIONS FOR EXCLUSIONS AND LIMITATIONS**

**IL:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**MD:** Includes an exclusion for "Prohibited referrals." The "felonies or illegal occupations" and "impaired driving" exclusions apply only to Accidental Death and Dismemberment benefits.

**MN:** "Suicide or self-inflicted injuries" exclusion does not apply.

**UT:** We will not pay benefits for claims that are caused by or resulting from Exclusions.

**VT:** "Impaired driving" exclusion does not apply.

This information is not intended to be a complete description of the insurance coverage available. The insurance or its provisions may vary or be unavailable in some states. The insurance has exclusions and limitations which may affect any benefits payable. Applicable to policy form GAC4100-P and certificate form GAC4100-C (including state abbreviations where used, for example, GAC4100-P-TX). For cost and complete details of coverage, call or write your Colonial Life benefits counselor or the company.

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