



Compass Accident Insurance

A limited benefit policy

Enrollment at a Glance

Affordable insurance that can help you pay for the out-of-pocket costs you may experience after an accident.

For the employees of: City and County of
San Francisco Health Service System

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

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What is Accident Insurance?

Accident Insurance pays you benefits for specific injuries and events resulting from a covered accident while off-job. The amount paid 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.

You may qualify to receive benefits for items listed below, as long as they are the result of a covered accident. See the certificate of insurance and any riders for specific details.

- Accident hospital care
- Follow-up care
- Common Injuries
- Emergency care benefits

Other features of Accident Insurance include:

- **Guaranteed Issue:** No medical questions or tests required for coverage.
- **Flexible:** You can use the benefit money for any purpose you like.
- **Payroll deductions:** Premiums are paid through convenient payroll deductions.
- **Portable:** Should 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 20+ hours per week.
- **Your spouse***— under age 70. Coverage is available only if employee coverage is elected.
- **Your child(ren)**— to age 26. Coverage is available only if employee coverage is elected.

*The use of "spouse" in this document means a person insured as a spouse as described in the certificate of insurance or rider. Please contact your employer for more information.

What accident benefits are available?

The following list includes the benefits provided by Accident Insurance. The benefit amounts paid depend on the type of injury and care received. You may be required to seek care for your injury within a set amount of time. Note that there may be some variation 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, along with applicable provisions, 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	\$120
Blood, plasma, platelets	\$360
Hospital admission	\$1,000
Hospital confinement per day up to 365	\$250
Coma duration of 14 or more days	\$6,000

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Transportation per trip, up to 3 per accident	\$360
Lodging per day, up to 30 days	\$120
Follow-up care	
Medical equipment	\$120
Physical therapy per treatment, up to 6	\$30
Prosthetic device (one)	\$600
Prosthetic device (two or more)	\$1,200
Common injuries	
Burns second degree, at least 36% of the body	\$900
Burns 3rd degree, at least 9 but less than 35 square inches of the body	\$1,800
Burns 3rd degree, 35 or more square inches of the body	\$12,000
Skin Grafts	25% of the burn benefit
Emergency dental work while hospital confined	\$180 crown, \$60 extraction
Eye Injury removal of foreign object	\$60
Eye Injury surgery	\$240
Torn Knee Cartilage surgery with no repair or if cartilage is shaved	\$120
Torn Knee Cartilage surgical repair	\$600
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	\$480
Tendon/Ligament/Rotator Cuff One, surgical repair	\$480
Tendon/Ligament/Rotator Cuff Two or more, surgical repair	\$720
Tendon/Ligament/Rotator Cuff Exploratory Arthroscopic Surgery with no repair	\$120
Concussion	\$120
Paralysis quadriplegia	\$12,000
Paralysis paraplegia	\$6,000

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Dislocations	Closed/open reduction ²
Hip joint	\$2,400/\$4,800
Knee	\$1,200/\$2,400
Ankle or foot bone(s) Other than toes	\$960/\$1,920
Shoulder	\$360/\$720
Elbow	\$360/\$720
Wrist	\$360/\$720
Finger/toe	\$120/\$240
Hand bone(s) Other than fingers	\$360/\$720
Lower jaw	\$360/\$720
Collarbone	\$360/\$720
Partial dislocations	25% of the closed reduction amount
Fractures	Closed/open reduction ³
Hip	\$1,800/\$3,600
Leg	\$960/\$1,920
Ankle	\$360/\$720
Kneecap	\$360/\$720
Foot Excluding toes, heel	\$360/\$720
Upper arm	\$420/\$840
Forearm, Hand, Wrist Except fingers	\$360/\$720
Finger, Toe	\$60/\$120
Vertebral body	\$960/\$1,920
Vertebral processes	\$360/\$720
Pelvis Except coccyx	\$960/\$1,920
Coccyx	\$240/\$480
Bones of face Except nose	\$420/\$840
Nose	\$120/\$240
Upper jaw	\$420/\$840
Lower jaw	\$360/\$720
Collarbone	\$360/\$720
Rib or ribs	\$300/\$600
Skull – simple Except bones of face	\$1,200/\$2,400
Skull – depressed Except bones of face	\$3,000/\$6,000
Sternum	\$360/\$720
Shoulder blade	\$360/\$720
Chip fractures	25% of the closed reduction amount

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Emergency care benefits	
Ground ambulance	\$120
Air ambulance	\$600
Emergency room treatment	\$180
Initial doctor visit	\$60
Follow-up doctor visit	\$60

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.

Meet Patty

Patty wasn't sure she'd be able to cover her medical expenses after she broke her leg in a car accident while out of town with friends. Thanks to her Accident Insurance coverage with emergency care benefits, Patty was able to use the benefits to help pay for her medical bills, as well as to offset her time away from work while going to various doctor appointments.

Benefits paid by Patty's Accident Insurance

	Out-of-Pocket Costs	Accident Insurance Benefit
Ground ambulance	\$500	\$120
Emergency room treatment	\$1,700	\$180
Leg fracture	--	\$960
Transportation (one trip)	\$85	\$360
Lodging (one night)	\$130	\$120
Medical equipment	\$150	\$120
Follow-up doctor visit	\$125	\$60
Lost time from work	\$300	--
Total	\$2,990	\$1,920

This is an example of how coverage could work. The amounts shown are an example only. Actual costs/results may vary.

What does my Accident Insurance include?

The benefits listed below are included with your accident 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, along with applicable provisions, exclusions and limitations, see your certificate of insurance and any riders.

- **Catastrophic Accident Benefit:** You may be eligible for an extra benefit if the effects from certain covered losses persist for at least 365 days. This is called the Catastrophic Accident Elimination Period.
 - Loss includes, but is not limited to permanent loss or loss of function of any of the following: both hands or both feet, the use of both arms or both legs, one hand and one foot, one arm and one leg, the sight of both eyes, hearing in both ears and the ability to speak.
 - If your spouse and children are covered for Accident Insurance, they are covered for this additional benefit if severely injured in a covered accident.
 - Coverage amounts:
 - Employee: \$120,000
 - Spouse: \$60,000
 - Children: \$30,000
 - Two additional benefits are also available:
 - \$5,000 when a covered person requires a home modification as prescribed by a doctor.
 - \$5,000 when a covered person requires a vehicle modification as prescribed by a doctor.

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What optional benefits are available?

You may choose to include the optional benefits below with your accident 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, along with applicable provisions, exclusions and limitations, see your certificate of insurance and any riders.

- **Spouse* Accident Insurance:** If you have coverage for yourself, you may enroll your spouse, as long as your spouse is under age 70 and is not covered under the Policy as an Employee.
 - Your spouse will receive the same base coverage as you.
 - Guaranteed Issue: No medical questions or tests required for coverage

*The use of "spouse" in this form means a person insured as a spouse as described in the certificate of insurance or benefit. Please contact your employer for more information.

- **Children's Accident Insurance:** As long as you have accident coverage on yourself, your natural child(ren), stepchild(ren), adopted child(ren) or child(ren) for whom you are a legal guardian are eligible to be covered under your employer's plan, up to the age of 26.
 - Your child(ren) will receive the same base coverage as you.
 - Guaranteed Issue: No medical questions or tests required for coverage.
 - One premium amount covers all of your eligible children.
 - If both you and your spouse are covered under the policy as an employee, then only one, but not both, may cover the same child(ren) under this benefit. If the parent who is covering the child(ren) stops being insured as an employee then the other parent may apply for children's coverage.

How much does Accident Insurance cost?

All employees pay the same rate, no matter their age. See the chart below for the premium amounts. Rates shown are guaranteed until January 1, 2020.

Monthly Rates			
Employee	Employee and Spouse	Employee and Children	Family
\$7.31	\$12.26	\$15.26	\$20.21

Exclusions and Limitations

Exclusions in the Certificate, Spouse Accident Insurance, and Children's Accident Insurance Benefit 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 that occurs while on full-time 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.

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- Practicing for, or participating in, any semiprofessional or professional competitive athletic contests for which any type of compensation or remuneration is received.
- Any sickness or declining process caused by a sickness.
- Work for pay, profit or gain, if the employer elects to exclude work-related sicknesses or accidents under the policy.

*See the certificate of insurance and riders for a complete list of available benefits, along with applicable provisions, exclusions and limitations.

Exclusions and limitations in the Catastrophic Accident Benefit are the same as the Certificate. The catastrophic accident benefit reduces to 50% at age 65 and to 25% of the initial benefit amount at age 70.

How do I enroll?

You can enroll for benefits October 1, 2016 - October 31, 2016 by visiting www.workterra.net.

Who do I contact with questions?

For more information, please call your Customer Service Team at 888-392-7597.

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, a member of the Voya® family of companies. Policy Form #RL-ACC2-POL-12; Certificate Form #RL-ACC2-CERT-12; and Rider Forms: Spouse Accident Rider Form #RL-ACC2-SPR-12, Children's Accident Rider Form #RL-ACC2-CHR-12, and Catastrophic Accident Rider Form #RL-ACC2-CAR-12. Form numbers, provisions and availability may vary by state.

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