

University of Kentucky

Basic and Voluntary Accidental Death & Dismemberment Insurance

Basic Policy GPA 5466939 / Voluntary Policy GPA 4279058

This Fact Sheet describes the Group Basic and Voluntary Accident Plan available to all regular full-time employees of the policyholder. All provisions in this summary are effective July 1, 2019.

All eligible employees will receive the Basic Accident Insurance Coverage. Group Basic Coverage is an employee-only plan. This coverage is paid for by your employer.

You also have the option to select voluntary coverage. You may select coverage for yourself and your spouse/domestic partner and/or dependent child(ren). If you choose this coverage the premium(s) will be paid by you.

WHY PURCHASE VOLUNTARY INSURANCE? SEE THE LAST PAGE FOR AN EXPLANATION AND COSTS

If you have an accident that results in a loss of life, loss of a limb(s), sight, speech, hearing, loss of use of certain limbs within 365 days of the accident, or permanent and total disability within 365 days of the date of the accident, Zurich American Insurance Company, may pay certain benefit amounts to you or your designated beneficiary. If the accident results in more than one of these losses, only the loss with the largest benefit will be payable.

The benefits described are subject to certain exclusions and limitations as described in the Policy and the Certificate of Insurance. Please see your Benefits Administrator for a copy.

Group Basic Insurance

Paid by the Your Employer:

24 Hour Accident Protection, Business & Pleasure

Protection on a worldwide basis, 24 hours a day, 365 days a year. Coverage for air travel is provided while the Covered Person while riding in or on, boarding or alighting from any Air Travel Carrier against certain injuries sustained by a Covered Person resulting in a Covered Loss anywhere in the world. Subject to certain limitations (see exclusions/limitations).

Benefit Amount

One (1) times your **Base Annual Earnings*** to a maximum of \$1,000,000.

* **Base Annual Salary** means your base annual pay excluding overtime, bonuses, commission and special compensation.

Travel Assistance Benefit

A comprehensive travel assistance program offering you benefits and services when traveling 100 miles or more from your principal residence. Coverage includes the following benefits:

	Maximum Benefit Amount		Maximum Benefit Amount
Medical Evacuation:	Unlimited	Visit to Hospital:	Unlimited
Medical Repatriation:	Unlimited	Return of Child (per child):	Unlimited
Non-Medical Repatriation:	Unlimited	(per attendant):	Unlimited
Return of Remains:	Unlimited	Return of Companion:	Unlimited

You can access Zurich Travel Assist® services by calling, toll-free, 1-800-263-0261 and referencing policy number GPA 5466939 or logging on to their web site at www.zurichtravelassist.com.

Coverages and Benefits Provided

Accidental Death and Accidental Dismemberment and Plegia Benefit

Any of the following losses within 365 days of the date of the covered accident, we may pay certain benefit amounts shown:

Loss of:	Benefit Amount	Loss of:	Benefit Amount
Life.....	100% of benefit amount	Speech and Hearing	100% of benefit amount
Both hands or both feet	100% of benefit amount	Speech or Hearing	50% of benefit amount
One hand and one foot.....	100% of benefit amount	One hand, one foot,	
One hand or one foot		or sight of one eye	50% of benefit amount
plus the sight of one eye.....	100% of benefit amount	Thumb and index finger	
Sight of both eyes	100% of benefit amount	of the same hand.....	25% of benefit amount
Plegia:	Benefit Amount	Plegia:	Benefit Amount
Quadruplegia	100% of benefit amount	Hemiplegia	50% of benefit amount
Paraplegia	75% of benefit amount	Uniplegia	25% of benefit amount



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Group Basic Insurance Benefit or Coverage

	Percentage of Principal Sum	Maximum Benefit Amount:
Coma Benefit	10%	Payable up to 100 months
Carjacking Benefit	10%	\$50,000
Day Care Benefit*	5%	\$5,000
Or the actual cost of the day care.		
Exposure and Disappearance Benefit	100%	
Hearing Aid or Prosthetic Appliance Benefit	10%	\$25,000
Or the actual cost of the hearing aid or prosthetic appliance.		
Higher Education Benefit	10%	\$50,000
Or the actual cost of the higher education. Non-Qualified Dependent Children Benefit: \$2,000.		
Home Alteration and Vehicle Modification Benefit	10%	\$50,000
Or the actual cost of the home alteration and vehicle modification.		
Rehabilitation Benefit	10%	\$50,000
Or the actual expenses incurred within two (2) years of the date of the accident.		
Safety Device Benefit	10%	\$25,000
Spouse/Domestic Partner Retraining Benefit*	3%	\$25,000
Or the actual cost of professional or trade training.		

Voluntary Insurance Coverages and Benefits Provided

Paid by You:

24 Hour Accident Protection, Business & Pleasure

Protection on a worldwide basis, 24 hours a day, 365 days a year. Coverage for air travel is provided while the Covered Person while riding in or on, boarding or alighting from any Air Travel Carrier against certain injuries sustained by a Covered Person resulting in a Covered Loss anywhere in the world. Subject to certain limitations (see exclusions/limitations).

Benefit Amount

You may purchase an amount of Principal Sum of \$10,000 to a maximum of \$500,000 in increments of \$5,000.

Benefit Amounts for Your Dependents

The benefit amount for your covered dependents will be a percentage of your benefit amount, as follows:

Plan Selected	% Spouse/Domestic Partner	% Child(ren)
Spouse/Domestic Partner only:	50%	0%
Dependent Child(ren) only:	0%	25%
Spouse/Domestic Partner	50%	10%
and Dependent Child(ren)		

Maximum benefit amount of \$50,000 for covered dependent child(ren).

Travel Assistance Benefit

A comprehensive travel assistance program offering you benefits and services when traveling 100 miles or more from your principal residence. Coverage includes the following benefits:

	Maximum Benefit Amount		Maximum Benefit Amount
Medical Evacuation:	Unlimited	Visit to Hospital:	Unlimited
Medical Repatriation:	Unlimited	Return of Child (per child):	Unlimited
Non-Medical Repatriation:	Unlimited	(per attendant):	Unlimited
Return of Remains:	Unlimited	Return of Companion:	Unlimited

You can access Zurich Travel Assist[®] services by calling, toll-free, 1-800-263-0261 and referencing policy number GPA 4279058 or logging on to their web site at www.zurichtravelassist.com.



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Coverages and Benefits Provided

Accidental Death and Accidental Dismemberment and Covered Loss of Use Benefit

Any of the following losses within 365 days of the date of the covered accident, we may pay certain benefit amounts shown:

Loss of:	Benefit Amount	Loss of:	Benefit Amount
Life.....	100% of benefit amount	Speech and Hearing	100% of benefit amount
Both hands or both feet	100% of benefit amount	Speech or Hearing	50% of benefit amount
One hand and one foot.....	100% of benefit amount	One hand, one foot, or sight of one eye.....	50% of benefit amount
One hand or one foot		Thumb and index finger of the same hand.....	25% of benefit amount
plus the sight of one eye.....	100% of benefit amount		
Sight of both eyes	100% of benefit amount		
Plegia:	Benefit Amount	Plegia:	Benefit Amount
Quadriplegia	100% of benefit amount	Hemiplegia	50% of benefit amount
Paraplegia	75% of benefit amount	Uniplegia	25% of benefit amount

Benefit or Coverage..... Percentage of Principal Sum.....Maximum Benefit Amount:

Coma Benefit	10%	Payable up to 100 months
Carjacking Benefit	10%	\$50,000
Day Care Benefit*	5%	\$5,000
Or the actual cost of the day care.		
Exposure and Disappearance Benefit	100%	
Hearing Aid or Prosthetic Appliance Benefit.....	10%	\$25,000
Or the actual cost of the hearing aid or prosthetic appliance.		
Higher Education Benefit	10%	\$50,000
Or the actual cost of the higher education. Non-Qualified Dependent Children Benefit: \$2,000.		
Home Alteration and Vehicle Modification Benefit	10%	\$50,000
Or the actual cost of the home alteration and vehicle modification.		
Rehabilitation Benefit.....	10%	\$50,000
Or the actual expenses incurred within two (2) years of the date of the accident.		
Safety Device Benefit	10%	\$25,000
Spouse/Domestic Partner Retraining Benefit*	3%	\$25,000
Or the actual cost of professional or trade training.		

General Exclusions & Limitations

General exclusions and limitations apply to all Hazards, Coverages and Benefits unless otherwise stated by Zurich American Insurance Company. The policy is the only contract between the Policyholder and us. It contains the actual terms, conditions and limits of the coverage to be provided. If there is any conflict between the information outlined and the policy, the policy will govern in all cases.

A loss will not be a covered loss if it is caused by, contributed to, or results from:

1. Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury including,;
2. War or any act of war, whether declared or undeclared;
3. Involvement in any type of active military service;
4. Illness or disease, regardless of how contracted; medical or surgical treatment of illness or disease; or complications following the surgical treatment of illness or disease; except for Accidental ingestion of contaminated foods;
5. Participation in the commission or attempted commission of any felony;
6. Being intoxicated while operating a motor vehicle.
 - a.) a covered person will be conclusively presumed to be legally intoxicated if the level of alcohol in his or her blood exceeds the amount at which a person is presumed, under the law of the locale in which the accident occurred, to be intoxicated, if operating a motorized vehicle.
 - b.) an autopsy report from a licensed medical examiner, law enforcement officer reports, or similar items will be considered proof of the covered person's intoxication;

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7. Being under the influence of any prescription drug, controlled substance, or hallucinogen, unless such prescription drug, controlled substance, or hallucinogen was prescribed by a physician and taken in accordance with the prescribed dosage and in accordance with drug interaction warnings;
8. Travel or flight in any aircraft except as stated in the policy;

General Limitations:

- **Limitation on Multiple Covered Losses.** If a covered person suffers more than one covered loss as a result of the same accident, we will pay only one benefit, the largest benefit.
- **Limitation on Multiple Coverages and Benefits.** If a covered person suffers a covered loss which is payable under more than one benefit as a result of the same accident, the most We will pay for these benefits in total is the covered person's principal sum.
- **Limitation on Multiple Hazards.** If a covered person suffers a covered loss under more than one hazard, we will pay only one benefit, the largest benefit.

Conversion Privilege

If your insurance ceases for reasons other than the termination of the Group policy or non-payment of premium, you may be entitled to apply for an Individual Accidental Death & Dismemberment policy. Proof of good health is not required. Maximum benefit of \$250,000.

Customer Management Services

If you have questions, please contact our customer intake center, cms@zurichna.com and e-fax 866.590.0948

To File a Claim

Contact Zurich American Insurance Company at 1-866-841-4771 for a claim form. Complete the form and send it to the Claims Department, Zurich American Insurance Company, P.O. Box 968041, Schaumburg, IL 60196-8041 within 90 days of the loss. Refer to Plan Number GPA 5466939 (Basic) or GPA 4279058 (Voluntary).

Beneficiary Designation

Benefits for your loss of life will be payable to the beneficiary or beneficiaries designated in writing by you and on file with the policyholder; otherwise the beneficiary or beneficiaries designated under the Group Life insurance policy issued to the policyholder, otherwise, we will pay the benefit to your survivors in the following order: 1) your spouse/domestic partner; 2) your children; 3) your parents; 4) your brothers or sisters; 5) your estate.

Loss of Life of a Covered Person other than You:

Covered losses for the death of a covered person other than you will be paid to you. If you pre-decease or die at the same time as the covered person other than you, the benefit will be paid to your beneficiary unless your beneficiary designation has not been made or your beneficiary is no longer living at the time of death. In such case, the benefits will be paid to your estate.

All other indemnities shall be payable to you.

Payment for a Foreign National Employee

If you are a citizen of a country or other jurisdiction other than the United States of America and are entitled to benefits for a covered loss and we are unable to make payment directly to you because of legal restrictions in the country or jurisdiction where you are located, we will either: (1) pay the benefits to a bank account owned by you in the United States of America; or (2) if no such bank account is established or maintained, we will pay the benefits to the policyholder on your behalf. It will then be the responsibility of the policyholder to remit the benefit to you.

This document provides a general description of the primary features and characteristics of this insurance program solely for informational purposes and does not revise or amend the underlying policy underwritten by Zurich American Insurance Company (NAIC #16535 domiciled in New York), 1299 Zurich Way, Schaumburg, IL 60196-1056. Please refer to your individual policy for a detailed description of the insurance coverage, including the exclusions, limitations, restrictions, and termination, Policy Form GPA 0214266. In the event of a discrepancy between this document and your policy, the terms of your policy shall apply. All benefits are subject to the terms and conditions of your policy.

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Why buy Group Voluntary Accident insurance?¹



Unintentional injuries are the fifth leading cause of death over-all and first among people in the age groups from 1 to 44.



On average, 15 unintentional injury related deaths and about 4,520 medically consulted injuries occur every hour during the year.



41% of existing health insurance plan members feel they do not have enough coverage for serious injury or illness.

Individual lifestyles and family dynamics pose different financial consequences when unexpected accidents disrupt lives. Having the right accident insurance protection in the event of a severe accidental injury or even death can be critical. Voluntary Accident (“VAD&D”) can help cover expenses associated with major on- and off-the-job accidental injuries and protect your savings should the unforeseen happen.

- Pays high limit benefits for accidental death and covered injuries — regardless of any other insurance.
- Provides high limit coverage for catastrophic injuries — for increased financial security.
- Offers premier travel assistance when on- or off-the-job — travel protection when a hundred (100) miles from home or on the other side of the world.

During open enrollment, employees have the opportunity to increase their overall insurance protection with low-cost, high-limit accidental death and dismemberment coverage that covers you 24 hours a day, on or off the job.

(A general description of the benefits is provided on the preceding pages.)

Voluntary AD&D Monthly Costs

Plan 1 -Zurich AD&D	Benefit	Cost
Employee Only	Employees may select \$10,000 to \$500,000	\$.018/\$1,000
Employee & Spouse/Domestic Partner	Percentage of Employee Benefit	\$.026/\$1,000
Employee & Dependent Children	Percentage of Employee Benefit	\$.020/\$1,000
Employee & Dependents	Percentage of Employee Benefit	\$.028/\$1,000

Sources

1 National Safety Council Injury Facts 2015 Edition; Health Care Cost Institute, Health Care Cost and Utilization Report: 2011 (2012); “2014 Member Health Plan Study;”

J.D. Power, March 10, 2014; www.commonwealthfund.org/~media/files/publications/fund-report/20 ;

13/apr/1681_collins_insuring_future_biennial_survey_2012_final.pdf ; www.ebri.org/pdf/surveys/rcs/2012/ebri_ib_03-2012_no369_rcs.pdf;

www.pnhp.org/new_bankruptcy_study/Bankruptcy-2009.pdf ; Health Care Cost Institute, Health Care Cost and Utilization Report: 2011 (2012)