

# **Accident Only Insurance**

# For Associated General Contractors

Accident Only Coverage doesn't replace your medical plan. It gives it a boost! The policy pays a one-time benefit for covered accidental injuries so you can focus on healing.

# **How the Plan Works**

### Eligibility Requirement

If you meet the insurance benefit eligibility criteria as established by your employer, you may purchase coverage for yourself and any eligible dependents.

Premium Contribution Structure

Accident Only Insurance premium is paid by the employee.

• Major and Minor Injuries Covered

You'll receive a benefit payment for minor injuries that require a quick trip to the doctor and major injuries that lead to hospitalization, surgery and physical rehabilitation. That means cash in your pocket if you need stitches, break your arm, dislocate your knee, get splashed by scalding hot coffee...you get the idea.

Monthly Rates	
Individual	\$13.18 per month
Employee plus Spouse	\$26.37 per month
Employee plus Child(ren)	\$23.42 per month
Family	\$36.59 per month

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#### **Plan Benefits** \$50,000 for member and spouse Accidental Death \$10,000 for child(ren) Severity of loss determines benefit Accidental Dismemberment \$2,000 to \$50,000 **Emergency Medical Treatment** \$100 Hospital Admission \$500 \$100 Hospital Confinement Up to \$150 per night Family Lodging Ambulance \$600 Severity of burn determines Burns benefit \$1,000 to \$12,000 Concussion \$75 Area of break determines benefit Broken Bones (Fracture) \$125 to \$6,000 Area of dislocation determines Dislocations (Separated Joint) benefit \$125 to \$4,800 Length of laceration determines Cuts benefit \$50 to \$500

Type of surgery determines benefit

\$150 to \$1,500

\$200

\$50

**Benefits Summary** 

Plan Features	
Coverage Waiting Period	None
Continuation of Coverage	Direct Bill is available if you lose eligibility under the Policy (except for non-payment of premium). You may elect to continue coverage under the Direct Bill Plan by making a written request and submitting the first months direct bill premium to LifeMap Assurance Company. Request and payment must be received within 31 days of the date of termination of group coverage.

# **Limitations & Exclusions**

The policy does not cover any loss including, but not limited to:

- Any injury sustained prior to the effective date
- Illness

Surgery

X-ray

Imaging Study

- Participation in parachuting, bungee jumping or hang gliding sports, or an organized race or speed contest involving motor vehicles of any type
- Service in the armed forces of any country
- Participation of in a felony, riot, or commission of a crime
- Intentionally self-inflicted injuries
- Work-related accidents

This summary is provided for your convenience only and is not intended to be inclusive of all policy provisions. Please see your certificate for complete details. If there is any discrepancy between this summary and the master policy, master policy provisions will prevail.