

Personal Accident Insurance

Developed for the Employees of
ACG Employers Health Trust Fund



Who Needs Personal Accident Insurance?

You do. Accident insurance can help you pay expenses if you or your spouse is seriously injured or killed in a covered accident. This coverage can help ensure that tragedy doesn't take both an emotional and a financial toll on your family.

By purchasing this insurance product through your employer, you benefit from:

- ◆ Affordable group rates
- ◆ Convenient payroll deduction

Who Is Eligible For Coverage?

You — You are eligible for coverage if you are an active full-time employee of the sponsoring employer, working 30 or more hours per week.

Your Family — You may elect to cover your lawful spouse under age 70, and your unmarried dependent children who are under age 19 (or under age 25 if they are full-time students). Children must be dependent upon you for support and maintenance.

No one may be covered more than once under this plan. If covered as an employee, you cannot also be covered as a dependent.

How Much Coverage Can You Buy?

You — Accident coverage is available in the amount \$25,000, \$50,000, \$100,000 or \$150,000.

Your Family — If the Family Plan is selected, your spouse's benefit will be 40% of yours, or 50% if you have no dependent children. Each of your covered children's benefit amount will be 10% of yours, or 15% if you are a single parent.

Each family member's coverage is a percentage of the benefit amount you select. It will depend on who your insured family members are at the time of a covered accidental loss.

Your Monthly Cost

Your cost will depend on the benefit amount and coverage option you select from the chart below.

Benefit Amount	Employee Only Monthly Cost	Monthly Cost Employee and Family
150,000	10.25	13.25
100,000	7.75	9.75
50,000	5.25	6.25
25,000	4.00	4.50

Administrative Fees have been added.

Costs are subject to change. Benefit amounts cannot exceed \$75,000 for your spouse and \$22,500 for each child.

Benefit Reductions

When you reach age 70, your benefits will be reduced to 65% of the benefit amount selected; at age 75, 45%; at age 80, 30%, and at age 85, 15%. If you elect coverage for your family members, Accidental Death & Dismemberment benefits for your insured family members will be based on your selected benefit amount. Other plan benefits based on your selected benefit amount will be determined by this reduction schedule. Coverage for your spouse ends when he or she reaches age 70. These reductions also apply if you elect coverage after age 69.

A Valuable Combination of Benefits

Personal Accident Insurance helps protect you against losses due to accidents. A covered accident is a sudden, unforeseeable, external event, resulting directly and independently of all other causes, in a covered injury or covered loss that occurs while coverage is in force. To help survivors of severe accidents adjust to new living circumstances, we will pay benefits according to the chart below.

If, within 365 days of a covered accident, bodily injuries result in:	We will pay this % of the benefit amount:
Loss of life, or Loss of two hands, two feet, or sight in both eyes, or Loss of one hand and one foot, or Loss of one hand and sight in one eye, or Loss of one foot and sight in one eye, or Loss of speech and hearing in both ears	100%
Loss of hand, foot, or sight in one eye, or Loss of speech, or Loss of hearing in both ears	50%
Loss of thumb and index finger of the same hand	25%

If the same accident causes more than one of these losses, we will pay only one amount, but it will be the largest amount that applies.

Loss of a hand or foot means complete severance through or above the wrist or ankle joint. Loss of sight means the total, permanent loss of sight of the eye. The loss of sight must be irrecoverable by natural, surgical or artificial means. Loss of speech means total, permanent and irrecoverable loss of audible communication. Loss of hearing means total and permanent loss of hearing in both ears which cannot be corrected by any hearing aid or device. Loss of a thumb and index finger means complete severance through or above the metacarpophalangeal joints (the joints between the fingers and the hand). California Residents: Loss of a thumb and index finger means complete severance of at least one whole phalanx (a bone of the finger) of each. South Carolina Residents: Loss of four whole fingers from one hand means the loss of one hand. Severance means complete separation and dismemberment of the limb from the body.

Additional Benefits

For College Education

The education benefit can give employees who sign up for coverage for their family members extra peace of mind if their children are either in college or college-bound.

If you or your insured spouse die in a covered accident, we will pay an extra benefit for each insured child who is enrolled in college or is in the 12th grade and enrolls in college within one year of the accident. To help pay college expenses, we will increase your benefit amount by 2% (up to \$2,500) for each qualifying child. This benefit is payable each year for four consecutive years as long as your children continue their college education.

If there is no qualifying child, we will pay an additional \$1,000 to the insured's beneficiary.

For Wearing a Seatbelt

This benefit is payable if an insured person dies as a result of injuries sustained in a covered accident while driving or riding in a private passenger car* equipped with seatbelts. If that person was wearing a properly fastened seatbelt (or if the insured is a child, a child restraint as defined by state law), that person's death benefit will be increased by 10%, but not less than \$1,000 nor by more than \$10,000.

If it is unclear whether the insured had been wearing the required protection, the plan will pay a benefit of \$1,000. No benefit is payable if the official accident report is either not provided to us or it indicates that no seatbelt was worn.

** A validly registered four-wheel private passenger (or policyholder-owned) car, station wagon, jeep, pickup truck, or van-type car that is not licensed commercially or being used for commercial purposes.*

What Is Not Covered

Plan benefits are not payable if a loss results, directly or indirectly, from or is caused by, self-inflicted injuries or suicide; any felony committed by the insured; any act of war, declared or undeclared; sickness, disease, physical or mental impairment or medical or surgical treatment thereof, or bacterial or viral infection, regardless of how contracted. (This does not include bacterial infection that is the natural and foreseeable result of an accidental external cut or wound, or accidental food poisoning.)

Benefits are also not payable if the loss occurs while the covered person is engaged in the activities of active duty service in the military, navy or air force of any country or international organization (this does not include Reserve or National Guard training, unless it extends beyond 31 days); traveling in an aircraft that is owned, leased or controlled by the sponsoring organization; traveling in an experimental aircraft or one designed to be used in outer space; traveling in an aircraft that is being operated by or for a military authority other than U.S. Military Airlift Command, or similar foreign service; hang gliding; parachuting, except for self-preservation; piloting or serving as a crew member in any aircraft; and taking a flying lesson in any aircraft.

POLICYHOLDER
AGC Employers Health Trust Fund

Life Insurance Company of North America
Personal Accident Insurance

POLICY NO.
OK-811052

Complete the following to enroll:

Full Name _____ Date of Birth _____ Social Security # _____

Address _____
STREET CITY STATE ZIP

Select Coverage Option: <input type="checkbox"/> Employee and Family <input type="checkbox"/> Employee Only	My Benefit Amount \$ _____
If you select coverage for your family, benefits for family members will be a percentage of yours.	Total Cost \$ _____ / per month

My Beneficiary _____ Relationship _____
PRINT FULL NAME(S)

You will be your family members' beneficiary unless you tell us otherwise in writing.

I enroll and authorize my employer to deduct the premiums from my earnings. I understand that the insurance selected will begin on the effective date as described in the brochure. If I am not actively at work, or my family members are not actively at work, or they are unable to engage in all the usual duties of a person of like age and sex, the effective date of coverage will be delayed until the individual returns to work, or the family member resumes usual duties.

Signature _____ Date _____

DECLINATION — Check here and sign above if you do not want this coverage.



When Your Coverage Begins and Ends

Current employees can sign up during this enrollment period. New employees have 31 days from the date they become eligible to enroll. Coverage becomes effective on the first of the month after receipt of your application. Provided the application has been received and the appropriate premium paid, dependent coverage will start when your coverage begins.

If you are not actively at work, the effective date of your insurance will be deferred until you are actively at work. If your spouse is not regularly performing the duties of his/her occupation, or if your spouse or children are unable to engage in all the usual duties of a person of like age and sex, the effective date of their insurance will be deferred until they return to work or resume their usual duties.

Your coverage will continue as long as you remain an eligible employee, pay your premium when due, do not serve more than 30 days' full-time active duty in any Armed Forces, and we agree with your employer to continue this group policy. For your spouse and dependent children, coverage ends when your coverage terminates, when their premiums are not paid, or when he or she is no longer eligible, whichever occurs first.

Changing from the Group Plan to Individual Coverage

If this group coverage is reduced or ends for any reason except non-payment of premium or age, you can convert to an individual policy. No medical certification is needed. To continue coverage, you must apply for the conversion policy and pay the first premium in effect for your age and occupation within 31 days after your group coverage ends. Family members may convert their coverage as long as they have not reached the maximum age limitation. Converted policies are subject to certain benefits and limits as outlined in your certificate, should you become insured under the plan.

Signing Up Is Easy

No medical examination is required to apply!

Just follow these steps.

1. Choose the benefit amount and coverage option that are right for you.
2. Fill out the enrollment form and return it to the Personnel Department.

Don't forget to...

Use the full name of your beneficiary. For example, use "Mary Jones Smith" not "Mrs. John A. Smith."

If you have any questions about the plan, please contact the Personnel Department.

This plan provides ACCIDENT insurance only. It pays benefits for bodily injury. It does not provide coverage for sickness. This information is a brief description of important features of the plan. It is not a contract. Terms and conditions of coverage are set forth in Policy OK-811052 on Policy Form No. LM-2L60, issued in California. The group policy is subject to the laws of the state in which it is issued. The availability of this offer may change. Please keep this material as a reference.

*Coverage is underwritten by
Life Insurance Company of North America
1601 Chestnut Street
Philadelphia, PA 19192*



CIGNA Group Insurance
Life • Accident • Disability

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