Accident Insurance

Your Preferred Plan

This is a limited benefit policy.
There is no coverage for hospital, medical-surgical or major medical expenses.

EMPLOYEE BENEFITS

ING

Your future. Made easier.®

Issued by ReliaStar Life Insurance Company, a member of ING.

Because you never know what the future will bring.

You cannot anticipate what one accident could mean to your financial stability. Our accident insurance benefits:

- Paid directly to you
- Money used how you wish
- Paid in addition to other medical coverage

Features of Accident Insurance

Our Accident Insurance can help cover the unexpected costs related to accident expenses. This policy pays a specified benefit amount for:

- initial care such as ambulance, emergency room and initial doctor visit
- follow-up care such as outpatient doctor's treatment and medical appliances
- injuries, including burns, dislocations and fractures
- catastrophic accident
- accidental death.

Who Can Be Covered

You are eligible to apply for this coverage as long as you are 18 years or older, you are a permanent, benefits-eligible employee who meets the hours-worked-per-week requirement and you are actively at work on the enrollment date. You may also apply for this coverage for your spouse and dependent children.

Spouse & Dependent Child Coverage

Spouse and Dependent Child Coverage are issued as riders:

- **Spouse Accident Rider**
  Coverage is available to your spouse, as long as you are covered and your spouse is 18 through 74 years of age.
- **Child(ren's) Accident Rider**
  Coverage is available to your unmarried, natural children, adopted children, or stepchildren from birth through the age of 24* as long as you are covered. Age restrictions are waived for handicapped dependent children.

* May vary by state

Guaranteed Acceptance

This coverage is available to you without answering health questions.

Portability

Should you retire or leave the company for any reason, this coverage can be taken with you. As long as you continue coverage, spouse and dependent coverage can also be continued with no change in premium amount. A direct bill payment option must be elected.

Convenient Coverage

The availability of payroll deduction makes it convenient for you to pay for your plan.

Benefit Payments

Accident Insurance pays you a specified amount, defined in the schedule of benefits, services and conditions resulting from a covered accident.

An example of how accident coverage can help you with your expenses*

35-YEAR-OLD CLAIMANT

Accident: Falling off bicycle
Injuries: Fractured wrist
Torn ACL (knee ligament injury)

Out-of-pocket expenses incurred:

- $100 emergency room co-pay
- $250 deductible
- $750 co-pay for knee surgery ($3,750 x 20%)
- $150 co-pay for 8 physical therapy visits

Total out-of-pocket expenses: $1,250

Benefits paid:

- $150 emergency room copay
- $50 appliance (knee brace)
- $300 fractured wrist
- $400 surgical ligament tear repair
- $50 follow-up appointment
- $150 for six physical therapy sessions

Total benefit paid under policy: $1,100

*Cost of treatment and benefit amounts may vary.

This is an brief outline of available benefits. Please refer to your certificate for exact terms and conditions. Benefits are for each covered person for each covered accident unless otherwise indicated.

May vary by state

SCHEDULE OF COVERAGE

A. Initial Care:	
Ambulance - ground	120
Ambulance - air	600
Emergency room	180
Initial doctor visit	60
B. Accident Hospital Care	
Surgery - open abdominal, thoracic	1,200
Surgery - exploratory or without repair	120
Blood/plasma/platelets	360
Hospital admission	900
Hospital confinement (per day up to 365 days)	240
ICU confinement (per day up to 14 days)	480
Coma (duration of 14 or more consecutive days)	6,000
Transportation (per trip up to 3 trips per accident)	360
Family lodging (per day up to 30 days)	120
C. Follow-up Care	
Follow-up doctor treatment	60
Medical appliances	60
Physical therapy (per treatment up to 6 treatments)	30
Prosthetic device - one	600
Prosthetic device - 2 or more	1,200
D. Common Injuries	
Burns	
2nd degree - at least 36%	900
3rd degree - at least 9, less than 35 sq in	1,800
3rd degree - 35 or more sq in	12,000
Skin grafts	25% of burn benefit
Emergency dental work - crown	180
Emergency dental work - extraction	60
Eye injury - surgery	240
Eye injury - removal of foreign object	240
Torn knee cartilage - surgical repair	600
Torn knee cartilage - surgery with no repair or if cartilage is shaved	120
Laceration (total of all lacerations)	
Treated, no sutures	30
Sutures, up to 2"	60
Sutures, 2-6"	240
Sutures, over 6"	480
Ruptured disk - surgical repair	480
Tendon/ligament/rotator cuff - one, surgical repair	480
Tendon/ligament/rotator cuff - 2 or more, surgical repair	720
Tendon/ligament/rotator cuff - exploratory arthroscopic surgery with no repair	120
Concussion (diagnosed with x-ray, CAT scan and/or MRI)	120
Paralysis - quadriplegia	12,000
Paralysis - paraplegia	6,000
Dislocations (closed & open reduction)	
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 - 480
Lower jaw	360 - 480
Collarbone	360 - 480
Partial dislocations	25% of Closed Reduction Amount
Fractures (closed & open reduction)	
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	240 - 480
Pelvis (except coccyx)	960 - 1,920
Coccyx	240 - 320
Bones of face, excluding nose	420 - 840
Nose	120 - 240
Upper jaw	420 - 840
Lower jaw	360 - 720
Collar bone	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 Closed Reduction Amount
E. AD&D	
Accidental Death	
Insured	30,000
Spouse	12,000
Children	6,000
Common Carrier	
Insured	60,000
Spouse	24,000
Children	12,000
Dismemberment	
Loss of both hands, both feet or the sight of both eyes	18,000
Loss of one hand or one foot and sight of one eye	18,000
Loss of one hand and one foot	18,000
Loss of one hand or one foot	9,000
Loss of two or more fingers or toes	1,800
Loss of one finger or toe	900
Catastrophic Accident*	
Insured	120,000
Spouse	60,000
Children	60,000

*catastrophic benefit reduced by 50% at age 65 & 75% at age 70

Accident Insurance Exclusions*

The Policy does not cover any losses that are caused by or occur as the result of:

1. war or act of war, whether declared or undeclared;
2. riding in or driving any motor-driven vehicle in a race, stunt show or speed test;
3. operating, learning to operate, serving as a crew member of or jumping, parachuting or falling from any aircraft or hot air balloon, including those which are not motor-driven (Accident Insurance will cover flying as a fare paying passenger);
4. engaging in hang-gliding, bungee jumping, parachuting, sail gliding, parasailing, parakiting or any similar activities;
5. participating or attempting to participate in an illegal activity;
6. committing or trying to commit suicide or injuring oneself, whether sane or not;
7. any sickness or declining process caused by a sickness;
8. practicing for or participating in any semi-professional or professional competitive athletic contest for which any type of compensation or remuneration is received;
9. having a work related injury, unless an On Job 24-hour accident coverage type is shown on the plan summary for policyholder;
10. an accident occurring while the covered person for whom a claim is being made was operating a motorized vehicle while intoxicated.
    By intoxication, we mean the blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the Accident occurred;
11. injury that occurs while the insurance is not in force.

* May vary by state.

About Us

ING Employee Benefits offers a broad array of products and services to meet the financial needs of employers and their employees. Most products and services are provided by ReliaStar Life Insurance Company, a wholly-owned indirect subsidiary of ING Groep N.V. ING Groep N.V. is an Amsterdam based global leader in integrated financial services with banking, insurance and asset management businesses in more than 60 countries. Each insurer is solely responsible for the financial obligations under the policies or conracts it issues. Some products are not available in all states.

This brochure is a brief description of coverage. The policy, and certificate, and any riders should be read carefully for exact terms and conditions, exclusions and limitations.

http://ing.us www.ingemployeebenefits-us.com/payroll

Issued by ReliaStar Life Insurance Company, a member of ING. Home and Administrative Office: 20 Washington Avenue South, Minneapolis, MN 55401
Product and services offered through the ING family of companies. Policy form numbers, product availability, and specific provisions may vary by state.
Policy Form Number: RL-ACC2005-POL, RL-ACC2005-SAR, RL-ACC2005-RCHILD