Accident (On and Off Job) - Bridge Insurance Group

IMPORTANT INFORMATION

- Available on groups with 5-499 eligible lives.
- Valid in AL, AK, AZ, AR, CA, CO, DE, DC, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MS, MT, MO, NE, NV, NJ, NC, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WV, WI, WY. Only available in FL for groups with 51+ eligible lives.
- Not available for all industries. Please see limitations & exclusions section.
- Rates shown are valid thru January 1, 2020.

MONTHLY RATES				
	Value Plan	Premier Plan		
Employee	\$15.21	\$27.38		
Employee & Spouse	\$25.27	\$45.56		
Employee & Child	\$26.59	\$47.00		
Family	\$36.65	\$65.18		
Rate Guarantee	2 Years			
Contributory Status	Voluntary			
Minimum Participation	5-24 eligible lives: 2 enrolled employees; 25-499 eligible lives: 5 enrolled employees			
Portability	Included without evidence (Not available in AK, MT, OR)			
Child(ren) Age Limits	Birth to 26 yrs (26 if full-time student), subject to state limitations			

BENEFITS		
	Value Plan	Premier Plan
Accident Coverage	On and Off Job	On and Off Job
Accidental Death and Dismemberment		
Death Benefit	Employee: \$10,000 Spouse: \$5,000 Child: \$5,000	Employee: \$50,000 Spouse: \$25,000 Child: \$5,000
	Quadriplegia: 100% of AD&D Loss of speech and hearing (both ears): 100% of AD&D Loss of cognitive function: 100% of AD&D Hemiplegia: 50% of AD&D Paraplegia: 50% of AD&D	Quadriplegia: 100% of AD&D Loss of speech and hearing (both ears): 100% of AD&D Loss of cognitive function: 100% of AD&D Hemiplegia: 50% of AD&D Paraplegia: 50% of AD&D
Catastrophic Loss	. 0	. 0
Common Carrier	200% of AD&D	200% of AD&D
Common Disaster	200%of Spouse AD&D benefit	200%of Spouse AD&D benefit
Hand, Foot, Sight	Single: 50% of AD&D benefit Multiple: 100% of AD&D benefit	Single: 50% of AD&D benefit Multiple: 100% of AD&D benefit
Thumb/Index Finger Same Hand, Four Fingers Same Hand, All Toes Same Foot	25% of AD&D	25% of AD&D
	Seatbelts: \$10,000	Seatbelts: \$10,000
Seatbelts and Airbags	Airbags: \$15,000	Airbags: \$15,000
Reasonable Accommodation to Home or Vehicle	\$2.500	\$2,500
Wellness Benefit	Provides a \$50 per year benefit for completing	Provides a \$50 per year benefit for completing
Training Bottom	certain routine wellness screenings or procedures (refer to Plan Highlights section for example procedures)	certain routine wellness screenings or procedures (refer to Plan Highlights section for example procedures)

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BENEFITS (continued)			
	Value Plan	Premier Plan	
Accident Emergency Treatment	\$150	\$200	
Accident Follow-Up Visit - Doctor	\$25 up to 6 treatments	\$75 up to 6 treatments	
Air Ambulance	\$500	\$1,500	
Ambulance	\$100	\$200	
Appliance	\$100	\$125	
Blood/Plasma/Platelets	\$300	\$300	
	9 sq inches to 18 sq inches: \$0/\$2,000	9 sq inches to 18 sq inches: \$0/\$2,000	
	18 sq inches to 35 sq inches: \$1,000/\$4,000	18 sq inches to 35 sq inches: \$1,000/\$4,000	
Burns (2 nd Degree/3 rd Degree)	Over 35 sq inches: \$3,000/\$12,000	Over 35 sq inches: \$3,000/\$12,000	
Burn – Skin Graft	50% of burn benefit	50% of burn benefit	
Child Organized Sport	20% increase to child benefits	20% increase to child benefits	
Chiropractic Visits	No Benefit	\$50 per visit up to 6 visits	
Coma	\$7,500	\$12,500	
Concussions	\$50	\$100	
Dislocations	Schedule up to \$3,600	Schedule up to \$4,800	
Diagnostic Exam (Major)	\$100	\$200	
Emergency Dental Work	\$200/Crown \$50/Extraction	\$400/Crown \$100/Extraction	
Epidural pain management	\$100, 2 times per accident	\$100, 2 times per accident	
Eye Injury	\$200	\$300	
Family Care	\$20/day up to 30 days	\$20/day up to 30 days	
Fracture	Schedule up to \$4,500	Schedule up to \$6,000	
Hospital Admission	\$750	\$1,250	
Hospital Confinement	\$175/day, up to 1 yr	\$250/day, up to 1 yr	
Hospital ICU Admission	\$1,500	\$2,500	
Hospital ICU Confinement	\$350/day – up to 15 days	\$500/day – up to 15 days	
Initial Physician's office/Urgent			
Care Facility Treatment	\$50	\$100	
Knee Cartilage	\$500	\$750	
Joint Replacement			
(hip/knee/shoulder)	\$1,500/\$750/\$750	\$3,500/\$1,750/\$1,750	
Laceration	Schedule up to \$300	Schedule up to \$500	
Lodging	\$100/day, up to 30 days for companion hotel stay	\$150/day, up to 30 days for companion hotel stay	
Occupational or Physical Therapy	\$25/day up to 10 days	\$35/day up to 10 days	
	1: \$500	1: \$750	
Prosthetic Device/Artificial Limb	2 or more: \$1,000	2 or more: \$1,500	
Rehabilitation Unit Confinement	\$150/day up to 15 days	\$150/day up to 15 days	
Ruptured Disc with Surgical	\$500	\$750	
Repair			
Surgery (Cranial, Open	\$1,000	\$1,500	
Abdominal, Thoracic)	Hernia: \$125	Hernia: \$200	
Surgery – Exploratory or			
Arthroscopic	\$150	\$350	
	1: \$250	1: \$750	
Tendon/Ligament/Rotator Cuff	2 or more: \$500	2 or more: \$1,500	
Transportation	\$400, 3 times per accident	\$600, 3 times per accident	
X-Ray	\$20	\$40	

PLAN HIGHLIGHTS

- No underwriting required.
- Wellness Benefit includes coverage for screenings & procedures such as a well visits, mammography, colonoscopy, pap smear, PSA, Serum cholesterol test, completion of smoking cessation and weight reduction programs and many more.
- College Tuition Benefit: Annual enrollment in this plan earns you 2,000 Tuition Rewards (1 Reward = \$1 in tuition reduction at a network of Private Colleges and Universities.) These rewards are yours for your lifetime and can be given to Children, Grandchildren, Nieces, Nephews and Godchildren. Visit www.Guardian.CollegeTuitionBenefit.com to learn more!
- **Portability** Portability allows the employee to take the coverage with them if employment has ended. Portability terms at age 70. An insured must port Accident coverage prior to age 70. In the state of VT portability is continuity of coverage and will end when the group plan ends with no additional options to port coverage.

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IMPORTANT NOTES

The benefits listed are payable if the service, treatment or procedure is due to injuries incurred in a covered accident.

 In force Major Medical coverage is required for employee, spouse and child in order to elect Accident coverage in the state of CA, MA & NJ.

In the state of CA: This coverage is not available to any person who is 1) 65 years of age or older and is covered by Medicare Part A and Part B and a Medicare Supplement insurance policy, certificate, or contract for coverage of excess charges under Medicare Part B, or 2) 65 years of age or older, if purchasing the coverage would result in coverage for medical benefits for more than 100% of actual medical expenses.

Appliance – Benefit is paid if a wheelchair, leg or back brace, crutches, walker, walking boot that extends above the ankle or brace for the neck is prescribed by a physician as necessary due to an injury sustained as the result of a covered accident.

Child Organized Sport – Benefit is paid if the covered accident occurred while your covered child is participating in an organized sport that is governed by an organization and requires formal registration to participate. This benefit is only payable if child coverage is included on the plan.

Family Care – Benefit is payable for each child attending a Child Care center while the insured is confined to the hospital, ICU or Alternate Care or Rehabilitative facility due to injuries sustained in a covered accident.

Lodging – Benefit is paid for a companion's hotel stay while the insured is confined to the hospital as the result of a covered accident. The hospital must be more than 50 miles from the insured's residence.

Transportation – Benefit is paid if you have to travel more than 50 miles one way to receive special treatment at a hospital or facility due to a covered accident.

SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS

- In order to be eligible for coverage: Employees must be legally working: (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. Subject to state specific variations.
- This proposal summarizes the major features of the Guardian Accident benefit plan. It is not intended to be a complete representation of the proposed plan. For full plan features, including exclusions and limitations, please refer to your Policy.
- This proposal is hedged subject to satisfactory financial evaluation.
- State variations may apply.
- Not available for the following SICs: 0800-1499, 1760-1799, 2400-2431, 2880-2892, 3300-3489, 8610-8699, 8999-9299, or 9999.

This plan will not pay benefits for any injury caused by or related to:

- Declared or undeclared war, act of war, or armed aggression; taking part in a riot or civil disorder; or commission of, or attempt
 to commit a felony; intentionally self inflicted injury, while sane or insane; suicide or attempted suicide, while sane or insane.
- The covered person being legally intoxicated.
- Treatment rendered or hospital confinement outside the United States or Canada.
- Travel or flight in any kind of aircraft, including any aircraft owned by or for the employer except as a fare-paying passenger on a common carrier.
- Participation in any kind of sporting activity for compensation or profit, including coaching or officiating.
- Riding in or driving any motor-driven vehicle in a race, stunt show or speed test.
- Participation in hang gliding, bungee jumping, sail gliding, parasailing, parakiting, ballooning, parachuting, and/or skydiving.
- Injuries to a dependent child received during the birth.
- An accident that occurred before the covered person is covered by this plan.
- Sickness, disease, mental infirmity or medical or surgical treatment.

Policy #: GP-1-AC-IC-12

Guardian's Accident Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage.

