

Unexpected accidents can happen at anytime. Are you protected?



You can't predict when an accident will happen and the last thing you want to worry about are the unexpected costs. Even after your medical insurance pays its portion, you could be facing bills for deductibles, copays and coinsurance. EssentialCare Group Accident Insurance provides fixed payments that can help you manage these costs by providing a cash benefit for covered expenses. Use the money however you wish, so you can focus on your recovery, not your bills.

How does Accident Insurance work?

Accident Insurance can supplement existing coverage and provide cash to help cover medical and living expenses. Below is an example of how benefits might be paid.*



Accident Insurance

Helps pay for unexpected out-of-pocket costs that result from an accident or accidental injury.

A 30-year-old man injures his back at home, resulting in an ER visit, hospital stay and ongoing physical therapy treatments.

Ambulance benefit	\$400
ER visit benefit	\$400
Hospital admission benefit	\$1,500
Hospital confinement benefit (\$300/day for two days)	\$600
Major diagnostic benefit	\$450
Follow-up doctor's office	\$200
Physical therapy benefit (\$50/visit for five visits)	\$250
TOTAL	\$3,800

*Payouts are estimates and not guaranteed. The examples shown may vary from the plan offering. Your individual experience may also vary. Benefits paid are determined based on individual situations. Terms, conditions, and exclusions apply. See full policy for details.

How might you use these benefits?

Payments can be used for major medical copays and deductibles, or even things like transportation, child care, housekeeping help, or whatever else you may need.

How you use the money is up to you!

Why EssentialCare Group Accident Insurance?

- ✓ Easy to enroll through a self-service platform
- ✓ Benefits are paid directly to you to spend as you see fit
- ✓ Fast payment with simplified claims process

BCS EssentialCare insurance is underwritten by BCS Insurance Company, Worthington, OH (Administrative Offices: Oakbrook Terrace, IL). Employees must be actively at work to be eligible for EssentialCare policies. Some states may have minimum coverage requirements. See policy documents for a complete description of benefits, exclusions, limitations, and conditions of coverage. Features and availability vary by location, and are subject to change.

ESSENTIALCARE PRODUCTS ARE LIMITED BENEFIT POLICIES—READ YOUR POLICY CAREFULLY. THESE POLICIES ARE NOT MAJOR MEDICAL INSURANCE AND ARE NOT INTENDED TO BE A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.

Accident Insurance Plan Options

Daily Benefits per Covered Person	Option 1	Option 2	Option 3
Hospital Admission Benefit	\$500	\$1,000	\$1,500
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
ICU Admission Benefit	\$500	\$1,000	\$1,500
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Hospital Confinement Benefit	\$100	\$200	\$300
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	365	365	365
ICU Confinement Benefit	\$100	\$200	\$300
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	30	30	30
Observation Unit Benefit	\$50	\$100	\$150
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1 Day	1 Day	1 Day
Rehabilitation Unit Benefit	\$100	\$150	\$200
Time between Treatment and Hospital Discharge	365 Days	365 Days	365 Days
Number of Days Payable Per Year	30 Days	30 Days	30 Days
Arthroscopic Surgery Benefit	\$200	\$300	\$400
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Cranial Surgery Benefit	\$1,000	\$1,500	\$2,000
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Hernia Surgery Benefit	\$200	\$300	\$400
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Open Abdominal or Thoracic Surgery Benefit	\$1,000	\$1,500	\$2,000
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Tendon, Ligament, Rotator Cuff, or Knee Cartilage Surgery Benefit	\$500	\$750	\$1,000
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	2	2	2
Ruptured Disc Surgery Benefit	\$375	\$750	\$1,500
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Miscellaneous Surgery Benefit	\$200	\$300	\$400
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Emergency Room (ER) Benefit	\$200	\$300	\$400
Time between Accident and Treatment	30 Days	30 Days	30 Days
Number of Days Payable Per Year	2	2	2
Initial Doctor's Office Benefit	\$100	\$150	\$200
Time between Accident and Treatment	336 Hours	336 Hours	336 Hours
Number of Days Payable Per Year	2	2	2
Urgent Care Benefit	\$100	\$150	\$200
Time between Accident and Treatment	30 Days	30 Days	30 Days
Number of Days Payable Per Year	2	2	2
Chiropractic Benefit	\$25	\$35	\$50
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	30	30	30
Follow-Up Physical Therapy Benefit	\$25	\$35	\$50
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	30	30	30
Follow-Up Doctor's Office Benefit	\$100	\$150	\$200
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	5	5	5
Accidental Death Benefit	\$25,000	\$25,000	\$25,000
Days between Accident and Loss	365 Days	365 Days	365 Days
Common Carrier Accidental Death Benefit	\$25,000	\$25,000	\$25,000
Days between Accident and Loss	365 Days	365 Days	365 Days
Accidental Dismemberment Benefit	Up to \$5,000	Up to \$10,000	Up to \$15,000
Days between Accident and Loss	365 Days	365 Days	365 Days
Laceration Benefit	Up to \$200	Up to \$400	Up to \$700
Time between Accident and Treatment	336 Hours	336 Hours	336 Hours
Fracture Benefit (Open/Closed Reduction)	Up to \$5,500	Up to \$8,000	Up to \$8,250
Chip Fracture (% of Fracture Benefit)	25%	25%	25%
Days between Accident and Treatment	365 Days	365 Days	365 Days
Maximum Amount Payable	\$50,000	\$50,000	\$50,000
Dislocation Benefit (Open/Closed Reduction)	Up to \$4,000	Up to \$8,000	Up to \$10,000
Partial Dislocations (% of Dislocation Benefit)	25%	25%	25%
Days between Accident and Treatment	365 Days	365 Days	365 Days
Maximum Amount Payable	\$20,000	\$20,000	\$20,000
Burn Benefit	Up to \$625	Up to \$1,250	Up to \$2,500
Time between Accident and Treatment	365 Days	365 Days	365 Days
Number of Days Payable Per Year	1	1	1
Skin Graft Benefit (% of Burn Benefit)	50%	50%	50%
Paralysis Benefit	Up to \$5,000	Up to \$10,000	Up to \$20,000
Time between Accident and Paralysis	365 Days	365 Days	365 Days
Eye Benefit	Up to \$200	Up to \$300	Up to \$400
Emergency Dental Benefit	Up to \$100	Up to \$200	Up to \$300
Time between Accident and Treatment	365 Days	365 Days	365 Days

Concussion Benefit	\$125	\$250	\$500
<i>Time between Accident and Diagnosis</i>	168 hours	168 hours	168 hours
Coma Benefit	\$5,000	\$7,500	\$10,000
<i>Time between Accident and Diagnosis</i>	365 Days	365 Days	365 Days
Ambulance (Air) Benefit	\$750	\$1,000	\$1,250
<i>Time between Accident and Transportation</i>	96 Hours	96 Hours	96 Hours
<i>Number of Days Payable Per Year</i>	1	1	1
Ambulance (Ground or Water) Benefit	\$200	\$300	\$400
<i>Time between Accident and Transportation</i>	365 Days	365 Days	365 Days
<i>Number of Days Payable Per Year</i>	1	1	1
Family Lodging Benefit	\$100	\$150	\$200
<i>Maximum Number of Days Payable</i>	30 Days	30 Days	30 Days
Transportation Benefit	\$200	\$300	\$400
<i>Maximum Number of Trips</i>	3	3	3
Dependent Adult Care Benefit	\$50	\$75	\$100
<i>Maximum Number of Covered Days Per Year</i>	30	30	30
Dependent Child Benefit	\$50	\$75	\$100
<i>Maximum Number of Covered Days Per Year</i>	30	30	30
Pet Care Benefit	\$50	\$75	\$100
<i>Maximum Number of Covered Days Per Year</i>	30	30	30
Minor Diagnostic Benefit	\$50	\$100	\$150
<i>Time between Accident and Treatment</i>	365 Days	365 Days	365 Days
<i>Maximum Number of Benefits Payable per Year</i>	3	3	3
Major Diagnostic Benefit	\$150	\$300	\$450
<i>Time between Accident and Treatment</i>	365 Days	365 Days	365 Days
<i>Maximum Number of Benefits Payable per Year</i>	5	5	5
Blood, Plasma, Platelets Benefit	\$300	\$400	\$500
Pain Management Benefit	\$50	\$75	\$100
Prescription Drug Benefit	\$5	\$10	\$15
<i>Time between Accident and Treatment</i>	365 Days	365 Days	365 Days
<i>Maximum Number of Benefits Payable per Year</i>	12	12	12
Second Opinion Benefit	\$50	\$75	\$100
<i>Maximum Number of Benefits Payable per Year</i>	1	1	1
Residence / Vehicle Modification Benefit	\$500	\$1,000	\$1,500
Prosthesis Benefit	Up to \$500	Up to \$750	Up to \$1,000
<i>Time between Accident and Treatment</i>	365 Days	365 Days	365 Days
Appliances Benefit	Up to \$500	Up to \$750	Up to \$1,000
<i>Time between Accident and Treatment</i>	365 Days	365 Days	365 Days
<i>Number of Benefits Payable per Accident</i>	3	3	3
Organized Sports Benefit	25%	25%	25%
<i>Maximum Amount Payable</i>	\$2,000	\$2,000	\$2,000

Plan Features

	Option 1	Option 2	Option 3
Waiver of Premium	Excluded	Excluded	Excluded
Portability	Included	Included	Included
Rate Guarantee	36 Months	36 Months	36 Months
24 Hour/Off-the Job Coverage	24 Hour	24 Hour	24 Hour

Four-Tier Bi-Weekly Premium Rates

Employee/Member Only	\$2.45	\$4.04	\$5.61
Employee/Member + Spouse	\$3.89	\$6.43	\$8.93
Employee/Member + Child(ren)	\$5.21	\$8.47	\$11.72
Family	\$8.03	\$13.08	\$18.11

Limitations and Exclusions

These are the standard limitations and exclusions and may vary by plan design selected and state requirements.

1. No benefits for treatment or other services are payable under the certificate for any injury, accident, or death that is contributed to, caused by, or resulting from:
 - intoxication (as defined by the law of the jurisdiction in which the injury occurred) or while under the influence of any narcotic, drug or controlled substance, unless administered by or taken according to the instructions of a doctor or medical professional;
 - commission of or attempt to commit a felony, or voluntary participation in a riot or insurrection, to which a contributing cause was the Insured being engaged in an illegal occupation;
 - incarceration or imprisonment following conviction for a crime;
 - flying as a pilot or crew member of any aircraft or travel or flight, including boarding or alighting, in any vehicle or device while being used for any test or experimental purposes or while being operated by, for or under the direction of any military authority other than the military airlift command (mac) of the United States or similar air transport service of any other country;
 - riding in or on any motor vehicle or aircraft engaged in acrobatic tricks/stunts (for motor vehicles), acrobatic/stunt flying (for aircraft), endurance tests, or off-road activities (for motor vehicles);
 - participation in any organized sport in a professional or semi-professional capacity;
 - driving in an organized or scheduled race or speed test or while testing an automobile or any vehicle on any racetrack or speedway;
 - participation in base jumping, bungee jumping, cliff jumping, kite surfing, kiteboarding, luge, mountain boarding, mountain climbing, mountaineering, parachuting, paragliding, parakiting, parasailing, parkour, rock climbing, scuba diving, ski jumping, skydiving, spelunking, tricking wingsuit flying, or other similar extreme sports or high risk activities;
 - travel or activity outside the United States or Canada, unless the insured receives treatment for the injury in the United States or Canada after the accident occurs;
 - active duty service or training in the military (naval force, air force or national guard/reserves or equivalent) for service/training, country or international organization, unless specifically allowed by a provision of this certificate;
 - any bacterial infection (except bacterial infections which result from an accidental injury or infections which result from an accidental, involuntary, or unintentional ingestion of a contaminated substance) ;
 - inguinal, ventral, femoral, umbilical, epigastric, hiatal, and congenital hernias, including complications due to such hernias;
 - cosmetic surgery or other elective procedure that is not medically necessary;
 - any disease or bodily/mental illness or degenerative process, or any medical or surgical treatment for such illness;
 - an injury sustained while driving a taxi or other vehicle for wage, compensation, or profit;
 - involvement in any declared or undeclared war or act of war (not including acts of terrorism), while serving in the military or an auxiliary unit attached to the military, or working in an area of war whether voluntarily or as required by an employer.
2. If you notify us of active duty military service or training, we will refund any premiums paid for any period for which no coverage is provided as attached to the military, or working in an area of war whether voluntarily or as required by an employer.

Accident Insurance FAQs

What is Accident Insurance?

Accident Insurance is a supplemental health insurance product that helps you pay for out-of-pocket medical and non-medical costs from an accident or injury. This insurance product is separate from your primary health plan and will provide lump-sum cash benefits that are paid directly to you, not doctors or hospitals.

How is this coverage different from major medical insurance?

Major medical insurance pays for doctors and hospitals. Our coverage is designed to provide you with cash benefits, unless otherwise assigned, that you can use to help with daily expenses when you're injured—cash to be used as you wish to help you and your family with unexpected expenses.

Can I enroll without having to take a medical exam?

Yes. EssentialCare Group Accident Insurance is guaranteed issue, which means your acceptance is guaranteed, regardless of your health. You just need to be actively at work for your coverage to be effective. There are no medical exams to take and no health questions to answer.

Is there a waiting period before my coverage begins?

No. This coverage will be effective at the beginning of your benefit period as long as you are actively at work.

Can I increase my coverage at any time if I continue my coverage on an individual basis?

No. The option to change your coverage is only available during open enrollment.

What if I want to cancel my coverage?

You can cancel at any time. Call our Customer Service Center at 877-563-2367 or contact your human resources representative for cancellation procedures.

Will my benefit checks be payable to me?

Benefits will be paid directly to you, the insured, unless otherwise required by law or assigned.

Are my benefits taxable?

If you pay premiums under a flexible benefits plan with pre-tax dollars, or if your employer pays part or all of your premiums, some of the benefits you receive may be taxable. Therefore, you may receive a W2 form from your employer that will include the taxable benefit amounts you received. In addition, a 1099 form will be sent to the insured if a benefit of more than \$10,000 is provided. If you have questions about taxability of benefits, discuss them with your employer or tax advisor.

How long do I have to file a claim?

There is a one-year timely filing provision in your certificate. Please review the provision and call us with any questions.

How do I submit my claim form for processing?

Electronic (Preferred submission method):

Log into the BCS Gateway portal at

<https://bcsgateway.com/>

Submit your documentation through the **Message Center**

Email:

Emails must be sent securely according to your domain

BCSservice@bcsf.com

Mail:

BCS Insurance Company

2 Mid America Plaza Suite 200

Oakbrook Terrace, IL 60181

Fax:

630-869-0655

Whom do I call with questions about my coverage?

Call our Customer Service Center at 877-563-2367. Each of our representatives is prepared to address questions about your insurance.

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