



## > Voluntary Accident Insurance



If you broke a leg, would it break your bank account too?

Don't let an accident catch you off guard. Protect your family's finances with Accident Insurance from United of Omaha Life Insurance Company.

An accident insurance policy supplements your medical coverage and provides a cash benefit for injuries you or an insured family member sustain from an accident. This benefit can be used to pay out-of-pocket medical expenses, help supplement your daily living expenses and cover unpaid time off work.

As an active employee of Missoula County, you may purchase this coverage for yourself and your family members, and premiums can be deducted from your paycheck. It's a simple and affordable way for your family to receive added financial protection.

Coverage guidelines and benefits are outlined below.



This insurance offers financial protection by paying a cash benefit if you or an insured dependent are injured as a result of a covered accident. Unless otherwise stated, the benefit amount payable is the same for you and your insured dependent(s).

### ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

<b>Eligibility Requirement</b>	You must be actively working a minimum of 20 hours per week to be eligible for coverage.
<b>Dependent Eligibility Requirement</b>	To be eligible for coverage, your dependents must be able to perform normal activities, and not be confined (at home, in a hospital, or in any other care facility), and any child(ren) must be under age 26. In order for your spouse and/or children to be eligible for coverage, you must elect coverage for yourself.
<b>Premium Payment</b>	The premiums for this insurance are paid in full by you.
<b>PLAN INFORMATION</b>	<b>INFORMATION / AMOUNT(S)</b>
<b>Coverage Type</b>	24-hour (On and off-job)
<b>Express Benefit</b>	\$75
<b>Annual Benefit Maximum (ABM)</b>	Not Included
<b>Portability</b>	Included

BENEFITS		AMOUNTS
<b>Initial Care &amp; Emergency<sup>1</sup></b> – Most treatment / service required within 72 hours of accident; Once per accident per insured person		
Emergency Room		\$150
Urgent Care Center		\$100
Initial Physician Office Visit		\$75
Ambulance		Up to \$1,000
<b>Specified Injuries<sup>1,2</sup></b>		
Fractures (Surgical / Non-surgical)		Up to \$5,000/Up to \$2,500
Dislocations (Surgical / Non-surgical)		Up to \$6,000/Up to \$3,000
Lacerations		Up to \$600
Burns		Up to \$10,000
Dental		Up to \$200
<b>Hospital, Surgical &amp; Diagnostic<sup>1,3</sup></b>		
Admission		\$1,000
Daily Confinement (Up to 365 days per accident)		\$200 per day
ICU Confinement (Up to 15 days per accident)		\$400 per day
Rehab. Facility Confinement (Up to 30 days per accident)		\$100 per day
Surgical		Up to \$1,500
Diagnostic		Up to \$200
<b>Follow-Up Care<sup>1</sup></b> – Treatment / service required within 365 days of accident; Medical device is once per accident per insured person		
Physician Follow-Up Office Visit		\$75; Up to 2 per accident
Therapy Services		\$25; Up to 6 per accident
Medical Device		\$100
Prosthetic Device(s)		\$750; Up to 2 per accident
<b>Additional Benefits<sup>1</sup></b> – Benefits are payable within 365 days of accident		
Transportation (Up to 3 trips per accident)		\$300 Per trip
Lodging (Up to 30 nights per accident)		\$125 Per night
Childcare (Up to 30 days per accident)		\$20 Per day
<b>Catastrophic Benefits<sup>1,4</sup></b> – Benefits are payable within 365 days of accident; Once per accident per insured person		
Principal Sum (PS)		You: \$25,000 Spouse: \$10,000 Child(ren): \$5,000
Common Carrier Accidental Death		300% of PS
Transportation of Remains		Up to \$5,000
Dismemberment & Paralysis		Up to 100% of PS
Reasonable Modifications		Up to 10% of PS
Coma		50% of PS
<b>SERVICES</b>		
<b>Hearing Discount Program</b>	The Hearing Discount program provides you and your family discounted hearing products, including hearing aids and batteries. Call 1-888-534-1747 or visit <a href="http://www.amplifonusa.com/mutualofomaha">www.amplifonusa.com/mutualofomaha</a> to learn more.	

<sup>1</sup>Additional limitations apply as described in the certificate.

<sup>2</sup>Fractures and dislocations require treatment within 90 days of accident, burns and lacerations within 72 hours of an accident, and dental care within 30 days. If an insured person sustains both a fracture and dislocation as the result of the same accident, the maximum amount payable is up to 200% of the amount payable for the injury with the highest applicable benefit amount.

<sup>3</sup>Daily confinement must begin within 90 days of accident and ICU confinement within 30 days. Surgical treatment timeframes vary. If applicable, diagnostic services must be received within 90 days of accident. Except for confinement benefits, most benefits are payable once per accident per insured person. If any surgery occurs concurrently with an open reduction for a fracture or dislocation of the same bone or joint as a result of the same accident, only the highest applicable benefit is payable.

<sup>4</sup>The principal sum for you and your spouse reduces by 50% when you reach the age of 70.

Missoula County

# Health Screening Benefit

Critical Illness Insurance



This coverage also includes a **health screening benefit**, paying a specified lump sum for certain preventative health screenings to help keep you in good health. This benefit is paid to each eligible insured in the amount of \$75.00 per calendar year.

## Advantages of Health Screenings

- Find diseases and conditions at an early stage to prevent a critical illness
- Improve outcomes, such as faster treatment, longer life and less suffering
- Determine and influence risk factors

## Available Health Screenings Include

- Abdominal aortic aneurysm ultrasound
- Blood test for triglycerides
- Bone marrow testing
- Bone density screening
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- Carotid ultrasound
- CEA (blood test for colon cancer)
- Chest X-ray
- Colonoscopy
- CT angiography (detects plaque buildup in heart vessels)
- EKG
- Double contrast barium enema (X-ray of the large intestines, colon and rectum)
- Fasting blood glucose test

- Flexible sigmoidoscopy (examines the rectum and the lower (sigmoid) colon)
- Hemocult stool analysis
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum cholesterol test (for HDL and LDL levels)
- SPEP (blood test for myeloma and MS)
- Stress test (on a bicycle or treadmill)
- Thermography (study of heat distribution, for example in detecting tumors)

Benefits are paid once per calendar year per insured person for one of the listed screenings. A complete list of the benefit amount payable can be found in the contract.

## Here's How to Submit a Claim

1. Complete preventative health screening test
2. Obtain a copy of the test result
3. Submit claim form and test result to [submitgrpacc@mutualofomaha.com](mailto:submitgrpacc@mutualofomaha.com) or fax to (402) 977-1898



**Mutual of Omaha**

Underwritten by  
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