



Accident Insurance Helps Cover Expenses

- Issue ages:
 - Adults 18-99, Dependent children newborn to 26
- Youth Organized Sports Benefit pays an additional 25 percent of total benefit, no cap
 - Limited to ages 18 or younger; requires registration form at time of claim
- 24 Hour Coverage Covers on- and off-job accidents
- \$75 Health Maintenance Screening Benefit
- CCU confinement and admission benefits pay in addition to daily hospital confinement benefits
- Multiple fractures or dislocations payable without cap
- Portable Employees can take Accident coverage with them, no change in coverage or rates.

141.4
million people
visit emergency
departments in the
U.S each year*

Organized Sport Event means a physical activity which is governed by an organization and requires formal registration to participate. This may include school, church and other recreational leagues.



Benefits for Health Screenings

Annual Health Maintenance Screening Benefit

If employees enroll in Accident Insurance, they, plus any enrolled dependents, can receive a \$75 benefit under for receiving one covered screening:

- Submit one claim and get paid for all plans
- No receipts required
- Available to employees and covered family members <u>every</u> year
- No waiting period

22 Covered Health Screenings

- Abdominal aortic aneurysm ultrasound
- Ankle brachial index (ABI) screening for peripheral vascular disease
- Biopsies for cancer
- · Bone density screening
- · Breast ultrasound
- Cancer antigen 125 (CA 125) blood test for ovarian cancer
- Cancer antigen 1503 (CA 15-3) for breast cancer
- Carcinoembryonic antigen (CEA) blood test for colon cancer
- Colonoscopy
- Complete blood count (CBC)
- Comprehensive metabolic panel (CMP)
- Electrocardiogram (EKG)

- Hemoccult stool analysis
- Hemoglobin A1C
- Human papillomavirus (HPV) vaccination
- Lipid panel
- Mammography
- Pap smears or ThinPrep Pap test
- Prostate-specific antigen (PSA) test
- Stress test on a bicycle or treadmill
- Generally, medically accepted cancer screening test
- Mental health assessment
- Novel infectious disease testing, like COVID-19



Schedule of Benefits

Emergency Care	Select
Air Ambulance	\$600
Blood, Plasma, Platelets	\$150
Emergency Dental (Crown)	\$150
Emergency Dental (Extraction)	\$50
Emergency Room Benefit	\$400
Ground Ambulance	\$200
Initial Physician's Office	\$400
Major Diagnostic Exam	\$200
Urgent Care	\$400
X-Ray	\$200
Specific Injury	Select
Burns, 2nd degree, <15%	\$100
Burns, 2nd degree, >15%	\$500
Burns, 3rd degree, <15%	\$1,500
Burns, 3rd degree, >15%	\$7,500
Coma	\$5,000
Concussion	\$400
Eye Injury	\$150
Lacerations, < 2"	\$50
Lacerations, 2" - 6"	\$100
Lacerations, > 6"	\$400
Skin Graft	25% of Burn Benefit



Schedule of Benefits, continued

Fractures Non-Surgical/Surgical	Select
Ankle, Arm, Collarbone, Elbow,Foot, Hand, Kneecap, Lower Jaw, Shoulder blade, Sternum, Wrist	\$350/\$700
Bones of Face, Coccyx, Nose, Vertebrae	\$300/\$600
Finger, Toe	\$75/\$150
Hip	\$1,500/\$3,000
Leg (hip to knee)	\$800/\$1,600
Leg (knee to ankle), Pelvis, Vertebral Column	\$800/\$1,600
Rib	\$300/\$600
Skull (depressed)	\$2,750/\$5,500
Skull (non-depressed)	\$800/\$1,600
Chip Fracture	25% of Non-Surgical Fracture Amount
Dislocations	Select
Ankle, Collarbone (Sternoclavicular), Elbow, Foot, Hand, Lower Jaw, Shoulder, Wrist	\$450/\$900
Collar Bone (Acromioclavicular)	\$200/\$400
Finger, Rib, Toe	\$100/\$200
Hip	\$1,500/\$3,000
Knee	\$450/\$900
Spine	\$200/\$400
Partial Dislocation	25% of Non-Surgical Dislocation Amount



Schedule of Benefits, continued

Surgical Benefits	Select
Knee Cartilage Repair	\$400
Knee Cartilage Exploratory Surgery	\$150
Tendon, Ligament, Rotator Cuff Repair of One	\$400
Tendon, Ligament, Rotator Cuff Repair of Two or More	\$600
Tendon, Ligament, Rotator Cuff Exploratory Surgery	\$150
Ruptured Disk, Repair	\$400
Exploratory Abdominal/Thoracic Surgery	\$150
Laparoscopic Repair Abdominal/Thoracic Surgery	\$500
Open Repair Abdominal/Thoracic Surgery	\$1,000
Surgical Facility (Outpatient)	\$50
Hospital	Select
Critical Care Unit Admission	\$1000
Daily Rehabilitation Facility (up to 90 days per accident)	\$50/day
Daily Critical Care Unit Confinement (up to 31 days)	\$250/day
Daily Hospital Confinement (up to 365 days)	\$250/day
Hospital Admission	\$1000

Follow-Up Care	Select
Medical Appliance	\$400
Chiropractic	\$75 up to 3 days
Accident Follow-Up Treatment	\$250 up to 3 days
Hearing Device	\$400
Prosthesis, One	\$250
Prostheses, Two or more	\$500
Therapy Services	\$250 up to 6 days
Additional Benefits	Select
Lodging (up to 30 days per accident)	\$150/per day
Transportation (up to 30 days per accident	\$750/per day



Exclusions

Benefits are not payable if the accident was caused or contributed by the following:

- War or act of war.
- Suicide or other intentionally self-inflicted Injury, while sane or insane.
- Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or riot.
- The voluntary use or consumption of any poison, chemical compound, drug, or alcohol in excess of the legal limit in the state in which the accident occurred, unless used or consumed according to the directions of a health care provider.
- Sickness existing at the time of the accident, including any medical or surgical treatment or diagnostic procedure for a sickness.
- Travel or flight in or on any aircraft (certain exceptions apply, including as a fare paying passenger on a regularly scheduled commercial flight).
- Engaging in mountain climbing, caving, heli-skiing, boxing, full contact martial arts, bungee jumping, parachuting, base jumping, skydiving, hang gliding, sail gliding, parasailing, kitesurfing, kiteboarding or scuba diving.
- Practicing for, or participating in, any semi-professional or professional competitive athletic contests.
- Routine eye exams and dental procedures other than a crown or extraction for a tooth or teeth as a result of a covered accident.
- Riding in or driving any automobile in a race, stunt show, or speed test.
- Cosmetic surgery, unless such surgery or procedure is necessary to correct a deformity or restore bodily function resulting from covered accident.
- Any accident which arises out of or in the course of the insured's incarceration in a jail, penal, or correctional The Standard institution.



Critical Illness Insurance

Eligibility:

- Employee & Spouse: ages 18 99
- Children: newborn to age 26

Plan Design:

- Lump sum benefit payable directly to the insured
- Employee: \$5,000 \$30,000 in \$5,000 increments
- Spouse: \$5,000 \$30,000 in \$5,000 increments (up to 100% of EE amount)
- Automatically covers children at 50% of EE benefit
- Guarantee Issue
- No benefit reduction as you age
- Attained age rates
- Portable Employees can take coverage with them, no change in coverage or rates.

Diagnosis must occur after effective date

Additional Occurrence Benefit – 100%

 No separation period between different critical illnesses

Reoccurrence Benefit – 100%

6-month treatment free period

Health Maintenance Screening Benefit

 \$50 benefit to enrolled employees, spouses, and children per calendar year. If enrolled in AI & CI, receive a benefit for each plan.

Health Advocacy Service

 Help with finding and scheduling appointments, alternate resources and cost information, research treatment options

The **Standard**

Covered Conditions*

Receive 100% of Coverage Amount

- Cancer
- End-Stage Renal (Kidney) Failure
- Major Organ Transplant
- Myocardial Infarction (Heart Attack)
- Stroke
- Coma
- Paralysis
- Loss of Sight, Hearing or Speech
- Advanced Multiple Sclerosis

- Advanced Parkinson's Disease
- Advanced Alzheimer's Disease
- Amyotrophic Lateral Sclerosis
- Benign Brain Tumor
- Bone Marrow Transplant
- Occupational Hepatitis
- Occupational HIV

Additional Covered Conditions for Children*

- Cystic Fibrosis
- · Down Syndrome
- Muscular Dystrophy
- Spina Bifida
- Cerebral Palsy
- Cleft Palate
- Plus 15 more see your plan description for complete list

Receive 25% of Coverage Amount

Carcinoma in Situ

 Severe coronary artery disease with recommendation for bypass surgery Diagnosis and treatment recommendation must occur after your coverage becomes effective.



^{*} See policy for exclusions and preexisting condition provisions.

Exclusions

Benefits are not payable if a critical illness is caused or contributed to by any of the following:

- War or act of war.
- Attempted suicide or other intentionally self-inflicted Injury, while sane or insane.
- Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or riot.
- The voluntary use or consumption of any poison, chemical compound, drug, or alcohol in excess of the legal limit in the state in which the critical illness occurred, unless used or consumed according to the directions of a Physician.
- Elective surgery or other procedure which:
 - Does not promote the proper function of the body or prevent or treat sickness or injury.
 - Is directed at improving the insured's appearance, unless such cosmetic surgery or procedure is necessary to correct a deformity resulting from a congenital abnormality or disfigurement.
 - This exclusion will not apply to a critical illness caused or contributed to by donation of an organ or tissue.





Hospital Indemnity Insurance

- Issue ages:
 - Adults 18-99
 - Dependent children, newborn to age 26

Here's what it covers

Hospital Confinement Benefit	\$200/Day
Number of Covered Days per Hospital	31 Days
Hospital Admission	\$1000 2 Times Per Calendar Year
Critical Care Unit (CCU) Confinement - Pays in addition to Hospital Confinement	\$400/Day
Number of Covered Days per CCU	31 Days
Health Maintenance Screening	\$50



Hospital Indemnity Insurance

- Hospital Admission Criteria
 – 20 hours including time in the ER, no inpatient room requirement
- No Pre-Existing Condition Exclusion & No maternity waiting period
- Newborn coverage If admitted due to illness or injury, newborns are eligible for admission & confinement benefits
- \$50 Health Maintenance Screening Benefit Available to covered employees, spouses & children. If you enroll in all three plans (AI, CI, HI) you are eligible for an HMS benefit under each plan
- Portable Employees can take their Hospital Indemnity coverage with them at no change in coverage or rates.



Exclusions

Benefits are not payable if the injury or sickness was caused or contributed to by any of the following:

- War or act of war.
- Attempted suicide or other intentionally self-inflicted Injury, while sane or insane.
- Committing or attempting to commit an assault, felony, act of terrorism, or actively participating in a violent disorder or riot.
- Alcoholism, drug abuse, misuse of alcohol or any other substance, the voluntary use or consumption of any drug or alcohol in excess of the legal limit in the state in which an injury occurred, or taking of drugs unless used or consumed according to the directions of a health care provider.
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight OR as a passenger or pilot in the policyholder's or employer's aircraft while flying on the policyholder's or employer's business provided:
 - The aircraft has a valid U.S. airworthiness certificate (or foreign equivalent) AND the pilot has a valid pilot's certificate with a non-student rating authorizing him or her to fly the aircraft.

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- Dental care or dental procedures, unless treatment is the result of an Injury.
- Routine newborn nursing or well-baby care.
- Hospital confinement of a newborn child following the child's birth unless the confinement is a result of an injury or sickness.
- Riding in or driving any automobile in a race, stunt show, or speed test.
- Surgery or other procedure which is directed at improving the insured's appearance, unless such surgery
 or procedure is necessary to correct a deformity or to restore bodily function resulting from an injury or
 sickness
- Any injury or sickness which arises out of or in the course of an insured's incarceration in a jail, penal or correctional institution.



Supplemental Claim Intake

Online

https://www.standard.com/individual/file-claim

Paper

Mail

Standard Insurance Company PO Box 85508 Lincoln, NE 68501-5508

• Fax 402.328.4029

Claim Forms

Accident Insurance claim form

Critical Illness claim form

Hospital Indemnity claim form

Health Maintenance claim form





Filing a Supplemental Insurance Claim

Frequently Asked Questions

Using your Supplemental insurance means you may have hit one of life's rough spots. We're sorry about any difficulties you're going through — and we're here to help.

What is Supplemental insurance and how does it work?

Accident, Critical Illness/Specified Disease, and Hospital Indemnity insurance are types of Supplemental insurance provided by The Standard.

These plans can help you pay bills that medical insurance doesn't cover. They pay a cash benefit directly to you for covered treatments or conditions.

How can I access Supplemental Benefits?

To receive the cash benefits from your plan, you need to file a claim that we approve. We make the process easy, so you can focus on what matters most — your health.

You decide how to spend the money.



You can use the money for medical costs like:

- Copays
- Deductibles



You can also put it toward everyday living expenses such as:

- · Child care
- Groceries
- Rent or mortgage payments

How can I file a claim online?

- 1 Log in at standard.com.
- After logging in, go to the Accident, Critical Illness/Specified Disease, or Hospital Indemnity Benefits section and click **Get Started.**
- This will take you to the Claims page. Under **Start a New Claim**, choose the insurance that applies to your claim and follow the instructions.
- Don't have an account? You'll need to create an account to file your claim and log in.

What if I have more questions?

Check out the Frequently Asked Questions page for filing a claim:

- Accident Insurance FAQ
- Critical Illness Insurance FAQ
- Hospital Indemnity Insurance FAQ

Supplemental FAQ





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