

# RSL SmartChoice®

## Accident Insurance

### A Group Accident Insurance Solution for Small Business

#### Plan Benefits and Features

<b>Group Size</b>	▶ 2 to 19 Employees
<b>Coverage available</b>	▶ 24-hour or non-occupational
<b>Benefit Schedule</b>	▶ See Schedule of Benefits on next page
<b>Accidental Death &amp; Dismemberment Benefits</b>	▶ Accidental Death & Dismemberment is included as our standard.
<b>AD&amp;D Reduction Schedule</b>	▶ AD&D benefits for employee and spouse reduce to 50% at age 65, to 25% at age 70 and terminate at retirement
<b>Contributions</b>	▶ Employers can pay all of, part of, or none of the premium
<b>Carve Outs</b>	▶ Permitted for 2 or more eligible employees within a class
<b>Rate Guarantee</b>	▶ Initial rate guaranteed for 24 months

#### Additional Plan information

##### Eligibility

**Employer Eligibility:** Most employers are eligible to participate. A list of ineligible businesses is shown on the opposite side of this page. Firms that have been in business for less than 1 year or have employees residing on employer's premises are also ineligible.

**Employee Eligibility:** Eligible employees are those actively working full time for a minimum of 30 hours per week year round (non-seasonal) who have satisfied the employer's minimum service requirement. Eligibility may be modified to include part-time employees working a minimum of 20 hours per week, provided less than 25% of the eligible employees are working less than 30 hours per week. Employees must be under age 70 to enroll for coverage.

**Dependent Eligibility:** Eligible dependents include an insured employee's spouse and dependent child(ren) from birth to 26 years. Spouse must be under age 70 to enroll for coverage.

##### Participation Requirements

The following minimum participation requirements must be met:

- ▶ 2 eligible employees – both must be insured
- ▶ 3 to 5 eligible employees – all but one must be insured
- ▶ 6 to 9 eligible employees – all but two must be insured
- ▶ 10 to 19 eligible employees – 75% must be insured

##### Contribution Levels

Provided all participation requirements are met, employees may contribute up to 100% of the premium. If the employer pays 100% of the premium, all eligible employees must be insured.

##### Coverage Available

Groups with the following SIC codes are eligible for 24-hour coverage:

0741-0752	2893-2899	7211-7379
1521-1542	3011-3089	7382-7841
1711-1752	3511-3999	8111-8299
2011-2099	4724-4941	8611-8748
2211-2399	4961-5271	9111-9211
2434-2599	6011-6163	9222
2652-2891	6311-6799	9311-9661

All other eligible groups must have non-occupational coverage.

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## Scheduled Benefits

Emergency Care	Plan A	Plan B	Plan C
Ambulance Transportation	\$100	\$150	\$200
Air Ambulance Transportation	\$500	\$750	\$1,000
Emergency Treatment	\$150	\$200	\$250
Diagnostic Exams	\$100	\$200	\$400
Initial Physician Office Visit	\$50	\$75	\$100
General Treatment	Plan A	Plan B	Plan C
Initial Hospital Admission	\$500	\$1,000	\$1,500
Initial Intensive Care Unit (ICU) Hospital Admission	\$1,000	\$1,500	\$2,250
Hospital Confinement per day	\$200	\$250	\$350
Intensive Care Unit (ICU) Confinement per day	\$400	\$500	\$700
Rehabilitation Facility Confinement per day	\$50	\$100	\$150
Follow-Up Physician Office Visit	\$50	\$75	\$100
Transportation	\$300	\$450	\$600
Lodging per day	\$100	\$150	\$200
Specified Covered Injury & Treatment Benefits	Plan A Surgical/Non-Surgical	Plan B Surgical/Non-Surgical	Plan C Surgical/Non-Surgical
Fractures	Up to \$5,000/Up to \$2,500	Up to \$7,500/Up to \$3,750	Up to \$10,000/Up to \$5,000
Chip Fractures	25% benefit of non-surgical full fracture	25% benefit of non-surgical full fracture	25% benefit of non-surgical full fracture
Multiple Fractures	100% of the highest benefit for any one fracture among all fractures sustained	100% of the highest benefit for any one fracture among all fractures sustained	100% of the highest benefit for any one fracture among all fractures sustained
Dislocations	Up to \$3,200/Up to \$1,600	Up to \$4,800/Up to \$2,400	Up to \$6,400/Up to \$3,200
Partial Dislocation	25% benefit of non-surgical full dislocation	25% benefit of non-surgical full dislocation	25% benefit of non-surgical full dislocation
Multiple Dislocations	100% of the highest benefit for any one dislocation among all dislocations sustained	100% of the highest benefit for any one dislocation among all dislocations sustained	100% of the highest benefit for any one dislocation among all dislocations sustained
Blood, Plasma and Platelets	\$200	\$300	\$400
2nd degree burns	Up to \$800	Up to \$1,600	Up to \$3,200
3rd degree burns	Up to \$6,400	Up to \$12,800	Up to \$25,600
Skin grafts due to burns	25% of burn benefit	25% of burn benefit	25% of burn benefit
Coma	\$5,000	\$7,500	\$10,000
Concussion	\$100	\$150	\$200
Dental Injury – Crown	\$150	\$300	\$400
Dental Injury – Extraction	\$50	\$75	\$100
Eye Injury – Removal of foreign object	\$100	\$150	\$200
Eye Injury – surgical repair	\$200	\$300	\$400
Lacerations	Up to \$400	Up to \$600	Up to \$800

## Additional Plan Information

### Schedule of Benefits

Surgery Benefits	Plan A	Plan B	Plan C
Exploratory Surgery (no repair)	\$100	\$150	\$200
Knee Cartilage	\$300	\$450	\$800
Abdominal or Thoracic Surgery	\$1,000	\$1,500	\$2,000
Ruptured Disc	\$500	\$750	\$1,000
Tendon, Ligament or Rotator Cuff	up to \$600	up to \$900	up to \$1,500
Transitional & Paralysis Benefits	Plan A	Plan B	Plan C
Medical Appliance	\$100	\$150	\$200
Prosthesis (One)	\$500	\$750	\$1,000
Prosthesis (Two or More)	\$1,000	\$1,500	\$2,000
Physical Therapy (per session)	\$25	\$35	\$50
Paralysis – Paraplegia or Hemiplegia	\$5,000	\$7,500	\$10,000
Paralysis – Quadriplegia	\$10,000	\$15,000	\$20,000

AD&D	Plan A	Plan B	Plan C
Employee Loss of Life	\$25,000	\$50,000	\$100,000
Spouse Loss of Life	\$12,500	\$25,000	\$50,000
Child(ren) Loss of Life	\$5,000 per child	\$10,000 per child	\$20,000 per child
Loss of Life on a Common Carrier	100% Loss of Life	100% Loss of Life	100% Loss of Life
Loss of a Hand, Foot, Arm, Leg, Sight in One Eye, Hearing in One Ear	50% Loss of Life	50% Loss of Life	50% Loss of Life
Loss of Finger, Thumb or Toe	\$250	\$500	\$500
Combination Loss of Two or More – Finger, Thumb or Toe	\$750	\$1,500	\$1,500
Catastrophic Loss – of Speech	100% Loss of Life	100% Loss of Life	100% Loss of Life
Catastrophis Loss – Two or More Losses Except Fingers, Thumbs or Toes	100% Loss of Life	100% Loss of Life	100% Loss of Life

### Ineligible Businesses

The following groups are ineligible for the Accident Plan:

SIC Code(s)	Industry Classification
0111-0724	► Agricultural Services
0761-1499	► Farm Labor/Miscellaneous Nonmetallic Minerals
1611-1629	► Highway, Street & Heavy Construction
1761-1799	► Roofing & Siding/Special Trade Contractors
2111-2141	► Tobacco Products
2411-2431	► Logging/Millwork
2611-2631	► Pulp & Paperboard Mills
2892	► Explosives
3292	► Asbestos
3482-3489	► Ordnance & Accessories
4311	► U.S. Postal Service
4493	► Marinas
4612-4619	► Pipelines
4952-4959	► Sewerage Systems/Sanitary Services
5541	► Gasoline Service Stations
5921	► Liquor Stores
5983-5989	► Fuel Dealers
7011-7041	► Hotels, Motels, Organization Hotels & Lodging Houses
7381	► Detective, Guard or Armored Services
7911-7999	► Dance Studios & Schools/Amusement & Recreation Services
8811	► Private Households
9221	► Police Protection
9223-9229	► Public Order & Safety
9711-9721	► National Security/International Affairs



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