



DESCRIPTION OF COVERAGE FOR THE DIOCESE OF FORT WAYNE - SOUTH BEND, INC. 24-HOUR ACCIDENT INSURANCE

ELIGIBILITY

All employees (working at least 30 hours per week) of the Policyholder in active employment in the United States.

EFFECTIVE DATE

Your insurance is effective on the later of: (a) the policy effective date or (b) the first day of the month coincident with or following full-time employment.

BENEFIT AMOUNT

The amount of insurance you are eligible for is called the Principal Sum. Your Principal Sum amount is one (1) times your Basic Annual Earnings\*, starting at a minimum amount of \$10,000.00.

\*Basic Annual Earnings means your gross annual income from the Policyholder in effect just prior to the date of loss. It includes your total income before taxes and any deductions made for pre-tax contributions to a qualified deferred compensation plan, section 125 plan or flexible spending account. It does not include income received from commissions, bonuses, overtime pay or any extra compensation or income received from sources other than the Policyholder.

COVERAGE

This plan offers protection on a worldwide basis, 24 hours a day, 365 days a year against any covered accident in the course of business or pleasure, including accidents on or off the job, in or away from the home, commuting, traveling by train, airplane, automobile or other private and public conveyances. It also covers accidents while riding as a passenger in any licensed civilian aircraft or in any aircraft operated by the Military Airlift Command. The benefits provided are payable in addition to any other insurance which may be in effect at the time of the accident.

BENEFITS

Accidental Death and Specific Loss Benefits

Benefits are payable when covered Injuries result in loss within 365 days after the date of the accident. Certain losses are payable at 100% of the Principal Sum and other losses are payable at a lesser percentage, as follows:

Loss of:

- Life ..... Principal Sum
Two Members ..... Principal Sum
One Member ..... 1/2 Principal Sum
Thumb and Index Finger of the Same Hand ..... 1/4 Principal Sum

If you suffer multiple losses due to the same accident, only the largest benefit amount to which you are entitled - is payable. The benefit for loss of: (a) two limbs; (b) both eyes; (c) one limb and one eye; (d) speech and hearing; or (e) thumb and index finger of the same hand is payable only when such double loss is the result of the same accident.

Loss is defined as the severance of the hand or foot at or above the wrist or ankle joint; total and irrecoverable loss of entire sight, speech or hearing; and severance of two or more entire phalanges of both the thumb and index finger. To receive benefits, loss must be independent of sickness and all other causes.

Paralysis Benefits

When you suffer Injuries that result in hemiplegia, paraplegia, quadriplegia, triplegia or uniplegia commencing within 60 days after the accident and continuing for one year, we will pay benefits as follows:

- For Hemiplegia or Uniplegia..... 1/2 Principal Sum
For Paraplegia or Triplegia..... 1/4 Principal Sum
For Quadriplegia ..... Principal Sum

Accident Only Comatose Benefit

If you lapse into an irreversible coma due to covered Injuries received in an accident, benefits will be paid as follows. Beginning on the 32nd day of the coma, 5% of your Principal Sum will be paid per month over 20 months or until death, whichever comes first. Upon death, any remaining Principal Sum will be paid as provided in the policy. If any other benefits for this condition are payable under the policy only one of the amounts, the largest applicable, will be paid.

Seat Belt Benefit

If Injuries result in the Insured's death and at the time of the accident the Insured was: (a) the operator of or a passenger in a Private Passenger Automobile; and (b) utilizing a Seat Belt; a benefit equal to 10% of your Principal Sum will be paid. Seat Belt usage must be verified by a doctor, a coroner, a traffic officer or other person of competent authority.

Exposure and Disappearance Benefit

Benefits for exposure to the elements or the Insured's disappearance as incurred in a covered accident which results in the disappearance, sinking or damaging of a conveyance on which an Insured was riding, will be paid as follows:

- 1. If, (a) the Insured is unavoidably exposed to the elements; and (b) as a result of such exposure suffers Injuries for which benefits are otherwise payable, such Injuries will be covered under this policy.

2. If, (a) the Insured disappears; and (b) if the body of the Insured has not been found within 52 weeks after the date of such accident; it will be presumed, subject to no evidence to the contrary, that the Insured suffered loss of life as a result of Injuries covered by the policy.

**AGE REDUCTIONS**

Principal Sum Benefits for covered individuals age 70 and over shall be payable according to the following schedule:

<u>Ages</u>	<u>% of original Principal Sum</u>
70 and over.....	50%

**CONVERTED POLICY OPTION**

A converted policy will be offered to the insured if the accidental death and dismemberment insurance under the policy terminates by ending your employment, ending your eligibility or if the policy ends for reasons other than non-payment of premium.

To obtain a converted policy, you must apply within 31 days after the policy ends and pay the first premium. If you have assigned ownership of coverage, the owner must apply for you. The converted policy will provide accidental death and dismemberment benefits. The premium will be based on the class of risk to which you belong, your age and the amount of coverage issued. The converted policy will take effect on the date you apply. The insured must be under the age of 70 to obtain a converted policy.

**PAYMENT OF CLAIMS**

Indemnity for loss of life will be payable in accord with the beneficiary designation made in writing by the Insured and on file with the Company. In the absence of such beneficiary designation loss of life benefits will be paid to the beneficiary or beneficiaries the Insured has chosen for the group life policy or policies indicated in the Policyholder's records. If the Insured has not chosen a beneficiary for this policy or the Policyholder's group life policy or in the event the designated beneficiary predeceases the Insured, indemnity for loss of life will be paid to the first of the following surviving beneficiaries: the Insured's: (a) spouse; (b) child or children, jointly; (c) parent or parents; (d) brothers or sisters; or (e) the Estate of the Insured. Any other accrued indemnities unpaid at the Insured's death may, at Our option, be paid either to the Insured's beneficiary or to his or her estate.

**DEFINITIONS**

"Hospital" means a place licensed (if licensing is required) as a hospital and operated for the care and treatment of resident inpatients with a registered graduate nurse always on duty and with a laboratory and operating room (both on the premises) where major surgical operations are performed by persons legally qualified to do so. In no event shall the term "hospital" mean a United States Government hospital or an institution or that part of an institution which is used principally as a clinic, convalescent home, rest home, nursing home or home for the aged, drug addicts or alcoholics.

"Injuries" means accidental bodily Injuries: (a) received while insured under this policy and (b) resulting independently of sickness and all other causes.

"Irreversible Coma" means: (a) a state of unconsciousness in which there is a cessation of activity in the central nervous system as demonstrated by an electroencephalogram (using criteria established by the American Electroencephalography Society); and (b) a diagnosis of brain death by the attending physician.

**Paralysis:**

"Hemiplegia" means complete loss of function of one side of the body with involvement of the arm and leg.

"Paraplegia" means complete loss of function of the lower extremities of the body with involvement of both legs.

"Quadriplegia" means complete loss of function of both the upper and lower extremities of the body with involvement of both arms and legs.

"Triplegia" means complete loss of function of three limbs.

"Uniplegia" means complete loss of function of one limb.

"Seat Belt" means any factory-installed passive restraint device or child passive restraint device which meets published federal safety standards.

**EXCEPTIONS**

This plan does not cover: suicide, attempted suicide or intentionally self-inflicted injury while sane or insane (in Missouri, while sane only); Injuries caused by an act of declared or undeclared war; Injuries received while in the armed service (upon notice to us of entry into an armed service, the pro rata premium will be refunded); Injuries received while acting as a pilot or crew member; Injuries received while traveling as a passenger by air except as defined in the policy; or Injuries resulting from the Insured's engagement in or attempt to commit a felony or being engaged in an illegal occupation.

**This brochure summarizes the provisions of the policy issued to The Diocese of Fort Wayne - South Bend, Inc. Should there be any discrepancy between the policy and this description, policy provisions will prevail.**

Underwritten By  
Mutual of Omaha Insurance Company  
Home Office: Omaha, Nebraska