



Employees at Winn Management Company Inc

Benefits At-A-Glance

Accident Insurance

Lincoln Accident Insurance Plan:

- Provides cash benefits if you or a covered family member is accidentally injured
- Features group rates for employees
- Benefits are focused on the family, safety, and accident prevention

Emergency treatment	Your cash benefit
Ambulance	\$400
Air ambulance	\$1,500
Emergency care/treatment	\$100
Initial care visit	\$100
Major diagnostic exam	\$150
X-ray	\$75

Fractures*	Your cash benefit
Ankle	\$575
Arm (shoulder to elbow)	\$575
Arm (elbow to wrist)	\$575
Coccyx	\$425
Collarbone	\$750
Elbow	\$375
Bones of the face	\$1,125
Fingers	\$200
Foot (except toes)	\$500
Hand (except fingers)	\$500
Hip	\$2,750
Jaw upper	\$575
Jaw lower	\$575
Kneecap	\$1,750
Leg (hip to knee)	\$2,625
Leg (knee to ankle)	\$1,500
Nose	\$575
Pelvis	\$1,500
Rib	\$525
Shoulder blade	\$750
Skull depressed	\$3,500
Skull non-depressed	\$1,750
Sternum	\$500
Toes	\$200

Fractures*	Your cash benefit
Vertebral Body	\$1,500
Vertebral process	\$500
Wrist	\$500
Surgical treatment surgery	Two times nonsurgical benefit
Chip fracture	25% of fracture benefit

*Fracture benefits listed are nonsurgical. Treatment for the fracture must occur within 90 days of the accident. The combined maximum of all fractures is two times the highest fracture payable.

No money is due at enrollment. Your premium simply comes out of your paycheck.

Dislocations *	Your cash benefit
Ankle	\$1,300
Collarbone (acromio and separation)	\$500
Collarbone (sternoclavicular)	\$750
Elbow	\$500
Fingers	\$200
Foot (except toes)	\$1,300
Hand (except fingers)	\$500
Hip	\$2,750
Lower jaw	\$500
Knee (except kneecap)	\$1,500
Shoulder	\$750
Toes	\$200
Wrist	\$500
Surgical treatment	Two times nonsurgical benefit
Partial dislocation	25% of dislocation benefit

*Dislocation benefits listed are nonsurgical. Treatment for the dislocation must occur within 90 days of the accident. The combined maximum of all dislocations is two times the highest dislocation payable.

Specific Injuries	Your Cash Benefit
Blood, plasma, platelets, and other non-blood substitute IV solutions	\$300
2 nd degree burns: Based upon surface area burned	\$100-\$950
3 rd degree burns: Based upon surface area burned	\$875-\$10,000
Skin grafts	25% of burn benefit
Concussion	\$200
Dental crown	\$300
Dental extraction	\$100
Eye (surgical repair)	\$300
Eye (removal of foreign object)	\$200
Laceration: Based upon the need for and length of sutures	\$75-\$750
Severe traumatic brain injury	\$5,000
Surgical benefits:*	
Arthroscopic	\$150
Cranial	\$1,500
Hernia	\$150
Other surgery under conscious sedation	\$200
Other surgery under general anesthesia	\$300
Repair of knee cartilage	\$750
Repair of ligaments, tendons, rotator cuff	\$750
Repair of ruptured disc	\$750
Open abdominal or thoracic	\$1,500

*Benefits will be paid up to two times the highest surgical benefit payable for all surgeries.

Hospitalization and ongoing care	Your cash benefit
Accident hospital admission	\$1,000
Accident hospital daily confinement	\$250
Accident intensive care admission	\$2,000
Accident intensive care daily confinement	\$500
Physical, occupational, and chiropractic therapy (up to 10 sessions)	\$25
Physician follow-up visits (up to six visits)	\$75
Alternative care/rehab facility daily confinement/rehabilitative confinement	\$100
Epidural/cortisone pain management (up to one injection)	\$85
Medical mobility devices	\$150
Wheelchair (expected use one year or more)	\$600
Wheelchair (expected use less than one year)	\$175
Prosthesis (per limb)	\$750

Recovery assistance	Your cash benefit
Family care	\$200
Companion lodging (100+ miles from home)	\$150 per day
Transportation (100+ miles from home)	\$300 per trip

Additional plan benefits	
Portability	Included
Child Sports Injury Benefit	Included

Benefit exclusions

Accident insurance covers many injuries that result from a covered event. The policy exclusions are:

1. Disease, physical or mental infirmity, sickness, or medical or surgical treatment of these
2. Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane
3. Voluntary intake or use by any means of any drugs, poison, gas, or fumes, voluntary use of controlled substance, voluntary intake or use by any means of any drug, except when:
 - a. Prescribed or administered by a physician, and
 - b. Taken in accordance with the physician's instructions
4. Committing or attempting to commit a felony, participation in a felony, voluntary participation in a felony, voluntary committing or attempting to commit a felony
5. War or any act of war, declared or undeclared, war or any act of war other than terrorism, declared or undeclared, war or any act of war, declared or undeclared 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
6. Participation in a riot, insurrection, or rebellion of any kind
7. Military duty, including the Reserves or National Guard
8. Travel or flight in or on any aircraft, except:
 - a. As a fare-paying passenger on a regularly scheduled commercial flight; or
 - b. As a passenger, pilot, or crew member in the group policyholder's aircraft while flying for the group policyholder's business, provided:
 - i. The aircraft has a valid U.S. airworthiness certificate or foreign equivalent; and
 - ii. The pilot has a valid pilot's certificate with a nonstudent rating authorizing him to fly the aircraft
9. Driving a vehicle while intoxicated, as defined by the jurisdiction where the accident occurred. For accidental death and dismemberment only, benefits are not payable for any loss sustained or contracted in consequence of your or your insured dependent being intoxicated or under the influence of any narcotic; operating a motor vehicle while intoxicated, as defined by the law of the state in which the accident occurred, if it is a felony
10. Cosmetic or elective surgery, physician determination of cosmetic or elective surgery, cosmetic surgery, surgery to improve appearance, cosmetic or elective surgery when it is to improve appearance rather than restore function or correct a deformity resulting from an injury
11. Being incarcerated in any type of penal or detention facility, injury sustained while confined to jail, workhouse, or other corrections facility when it is due to an act of the facility and law enforcement is liable
12. Under the influence of narcotics, unless prescribed and taken in accordance with the prescription by a physician
13. Participating in, practicing for, or officiating any semi-professional or professional sport
14. Riding in or driving in any motor driven vehicle for race, stunt show, or speed test
15. An injury sustained while residing outside the U.S., U.S. territories, Canada, or Mexico for more than 12 months
16. Bungee cord jumping, mountaineering, or base jumping
17. Skydiving, parachuting, or jumping from any aircraft for recreational purposes

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

Questions? Call 800-423-2765 and mention ID 1133571.

Accident insurance premium

Here's how little you pay with group rates

As an employee, you can take advantage of this accident insurance plan. Plus, you can add loved ones to the plan for just a little more.

Coverage	Monthly premium
Employee only	\$6.15
Employee & spouse	\$10.77
Employee & child/children	\$15.22
Employee & family	\$19.85

Note: The premiums for this coverage will not change due to your age. The premium for employee & child/children and employee & family coverage includes all children.

The Lincoln National Life Insurance Company
Please see prior page for product information.