



EQUITABLE

Group name: Furmano Foods, Inc.

Policy number: 019375

Form created: 03/06/2024

Protection for when the unexpected happens

Accident insurance benefit summary



Accidents can happen at any time

Many would have a hard time paying for costs related to those injuries. With accident insurance, you can manage the costs and stress of falls, sports injuries, and other accidents. Our plan covers many types of accidents and pays a cash benefit if you or your dependents are injured as part of a covered accident. Benefits are paid directly to you, so you can use the money however you need to.

Watch this quick video to learn more



Did you know?

Americans visit the emergency room for injury-related visits

35 million times each year.¹

Two-thirds of Americans would struggle to pay

\$1,000
in an emergency.²

Benefit plan and Features

Class definition: Class 1 – All Active Full Time Employees

Coverage Effective Date April 01, 2024	Coverage Basis 24-Hour	Portability To age 70
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Life and dismemberment losses	Employee	Spouse	Child
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Accidental Death	\$50,000	\$50,000	\$25,000
Accidental Death Common Carrier	\$100,000	\$100,000	\$50,000
Catastrophic loss: loss of arm or loss of hand — both arms or both hands, loss of leg or loss of foot — both legs or both feet, loss of hand and loss of foot or loss of arm and loss of leg — one hand and one foot or one arm and one leg, loss of an ear — both ears, irrecoverable loss of hearing — both ears, loss of an eye — both eyes, irrecoverable loss of sight — both eyes, irrecoverable loss of speech or ability to speak, or any combination equaling two or more losses from: loss of arm, loss of hand, loss of leg, loss of foot, loss of an ear or loss of an eye	\$15,000	\$15,000	\$7,500

Accidental dismemberment	Employee	Spouse	Child
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Loss of hand — one hand, Loss of foot — one foot, Loss of leg — one leg or loss of arm — one arm	\$7,500	\$7,500	\$3,750
Loss of a finger or loss of a toe — two or more fingers or toes	\$1,500	\$1,500	\$750
Loss of a finger or loss of a toe — one finger or one toe	\$750	\$750	\$375
Loss of hearing or loss of an ear — one ear	\$7,500	\$7,500	\$3,750
Loss of sight or loss of an eye — one eye	\$7,500	\$7,500	\$3,750

Dislocations (Open reduction/Closed reduction)	Employee	Spouse	Child
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Hip	\$6,000/\$3,000	\$6,000/\$3,000	\$6,000/\$3,000
Knee, ankle or bones of the foot	\$2,000/\$1,000	\$2,000/\$1,000	\$2,000/\$1,000
Elbow or wrist	\$800/\$400	\$800/\$400	\$800/\$400
Shoulder	\$1,000/\$500	\$1,000/\$500	\$1,000/\$500
Collarbone or bones of the hand	\$1,600/\$800	\$1,600/\$800	\$1,600/\$800
Finger(s) or toe(s)	\$200/\$100	\$200/\$100	\$200/\$100
Lower jaw	\$800/\$400	\$800/\$400	\$800/\$400
Incomplete dislocation	25% of the applicable closed reduction		

Benefit plan and Features

Fractures (Open reduction/Closed reduction)	Employee	Spouse	Child
Hip or thigh	\$4,000/\$2,000	\$4,000/\$2,000	\$4,000/\$2,000
Skull — depressed	\$8,000/\$4,000	\$8,000/\$4,000	\$8,000/\$4,000
Skull — simple	\$3,000/\$1,500	\$3,000/\$1,500	\$3,000/\$1,500
Vertebral processes	\$700/\$350	\$700/\$350	\$700/\$350
Bones of face or nose	\$700/\$350	\$700/\$350	\$700/\$350
Leg (tibia or fibula)	\$2,000/\$1,000	\$2,000/\$1,000	\$2,000/\$1,000
Vertebrae (body of) or sternum	\$1,600/\$800	\$1,600/\$800	\$1,600/\$800
Pelvis (excluding coccyx)	\$1,600/\$800	\$1,600/\$800	\$1,600/\$800
Upper jaw or upper arm	\$750/\$375	\$750/\$375	\$750/\$375
Lower jaw	\$650/\$325	\$650/\$325	\$650/\$325
Knee cap	\$650/\$325	\$650/\$325	\$650/\$325
Ankle	\$650/\$325	\$650/\$325	\$650/\$325
Foot	\$650/\$325	\$650/\$325	\$650/\$325
Collarbone	\$650/\$325	\$650/\$325	\$650/\$325
Shoulder	\$650/\$325	\$650/\$325	\$650/\$325
Forearm	\$650/\$325	\$650/\$325	\$650/\$325
Hand	\$650/\$325	\$650/\$325	\$650/\$325
Wrist	\$650/\$325	\$650/\$325	\$650/\$325
Elbow	\$650/\$325	\$650/\$325	\$650/\$325
Heel	\$650/\$325	\$650/\$325	\$650/\$325
Rib, finger, toe or coccyx	\$350/\$175	\$350/\$175	\$350/\$175
Multiple ribs	\$1,000/\$500	\$1,000/\$500	\$1,000/\$500
Chip fractures and other fractures not reduced	25% of the applicable closed reduction by open or closed reduction		

Additional injuries	Employee	Spouse	Child
Eye injury	\$250	\$250	\$250
Gunshot wound	\$500	\$500	\$500
Brain injury	\$150	\$150	\$150
Paralysis — monoplegia	\$1,000	\$1,000	\$1,000
Paralysis — diplegia	\$5,000	\$5,000	\$5,000
Paralysis — hemiplegia	\$5,000	\$5,000	\$5,000
Paralysis — paraplegia	\$25,000	\$25,000	\$25,000
Paralysis — quadriplegia	\$50,000	\$50,000	\$50,000
Coma	\$10,000	\$10,000	\$10,000
Concussion	\$200	\$200	\$200
Concussion lifetime maximum benefit	\$2,000	\$2,000	\$2,000

Benefit plan and Features

Lacerations	Employee	Spouse	Child
Laceration(s) with no sutures and treated by a physician	\$35	\$35	\$35
Single laceration under 5 cm with sutures	\$65	\$65	\$65
Lacerations 5–15 cm with sutures (total of all lacerations)	\$250	\$250	\$250
Lacerations greater than 15 cm with sutures (total of all lacerations)	\$500	\$500	\$500

Surgery	Employee	Spouse	Child
Miscellaneous surgery requiring general anesthesia not otherwise listed (once per 24-hour period, even though multiple surgical procedures may be performed)	\$300	\$300	\$300
Open surgery	\$1,250	\$1,250	\$1,250
Exploratory surgery or debridement	\$250	\$250	\$250
Laparoscopic surgery or hernia repair	\$300	\$300	\$300
Tendon/Ligament/Rotator cuff tear	\$750	\$750	\$750
Torn knee cartilage	\$750	\$750	\$750
Ruptured/herniated disc	\$750	\$750	\$750

Burns	Employee	Spouse	Child
21–40 sq. cm second degree	\$400	\$400	\$400
21–40 sq. cm third degree	\$1,000	\$1,000	\$1,000
41–65 sq. cm second degree	\$800	\$800	\$800
41–65 sq. cm third degree	\$2,000	\$2,000	\$2,000
66–160 sq. cm second degree	\$1,200	\$1,200	\$1,200
66–160 sq. cm third degree	\$6,000	\$6,000	\$6,000
161–225 sq. cm second degree	\$1,600	\$1,600	\$1,600
161–225 sq. cm third degree	\$14,000	\$14,000	\$14,000
More than 225 sq. cm second degree	\$2,000	\$2,000	\$2,000
More than 225 sq. cm third degree	\$20,000	\$20,000	\$20,000
Skin graft	50% of the applicable burn benefit		

Medical services	Employee	Spouse	Child
Diagnostic exam (one-time per benefit year):	\$200	\$200	\$200
• Arteriogram, angiogram, CT, CAT, EKG, EEG or MRI X-ray	\$30	\$30	\$30
Accident emergency treatment (non-ER or non-urgent care facility) (one time per covered accident)	\$100	\$100	\$100
Physician's follow-up treatment office visit	\$50	\$50	\$50

Benefit plan and Features

Medical services	Employee	Spouse	Child
(per visit, up to 10 times per covered accident)			
Physical and occupational therapy (per visit, up to 10 times per covered accident)	\$35	\$35	\$35
Medical devices	\$125	\$125	\$125
Epidural pain management (up to 2 times per covered accident)	\$50	\$50	\$50
Prescription drug	\$25	\$25	\$25
Prosthesis (one)	\$750	\$750	\$750
Prosthesis (two)	\$1,500	\$1,500	\$1,500
Anesthesia	\$50	\$50	\$50
Blood, plasma or platelet transfusion	\$200	\$200	\$200
Hospital	Employee	Spouse	Child
Hospital admission (once per benefit year)	\$1,500	\$1,500	\$1,500
Hospital confinement (per day up to 30 days per covered accident)	\$300	\$300	\$300
Intensive care unit admission (once per benefit year; payable instead of hospital admission benefit if confined immediately to ICU)	\$1,500	\$1,500	\$1,500
Intensive care unit confinement (per day up to 15 days; payable in addition to any hospital confinement benefit)	\$600	\$600	\$600
Ambulance (Ground)	\$300	\$300	\$300
Ambulance (Air)	\$1,500	\$1,500	\$1,500
ER admission or urgent care facility	\$200	\$200	\$200
Family Lodging			
Maximum Lodging night stays: one benefit per day, 30 days per benefit year	\$100	\$100	\$100
Transportation (100 or more miles up to three times per covered accident)	\$500	\$500	\$500
Rehabilitation unit (per day, up to 30 days per covered accident)	\$100	\$100	\$100
Emergency dental	Employee	Spouse	Child
Emergency dental extraction	\$65	\$65	\$65
Emergency dental crown	\$200	\$200	\$200

Understanding your benefits

Commonly Used Terms

Accident	An event that an average person would consider sudden and unforeseeable and which causes injury to an insured. Illnesses of any kind are not considered an accident.
Common carrier	A phrase referring to commercial airplanes, trains, buses, subways, ferries, etc.
Open reduction	Surgical treatment or repair of an injury.
Closed reduction	Non-surgical treatment or repair of an injury.

Frequently Asked Questions

When can I enroll?	You can enroll when you are initially eligible for benefits and any subsequent annual enrollment or life status change.
Are my dependent children eligible for coverage?	Yes, dependent children are eligible up to the end of the month they reach age 26. If any dependent children are developmentally disabled, you are able to continue coverage beyond age 26.
Do benefits have to be used for medical expenses?	<p>You decide how to use your benefit payment:</p> <ul style="list-style-type: none"> • Out-of-pocket • Rehab costs • Utility or credit card bills medical costs, including • Rent or mortgage payments • Childcare deductibles and co-pays • Groceries • Other financial support
What is accident insurance?	Group accident insurance provides cash benefits for unexpected injuries resulting from a covered accident. Our plan covers many types of injuries, treatments and services.
Why should I buy accident insurance?	Accident insurance helps cover unexpected expenses related to an accidental injury, which can be costly. Accident insurance can help protect against unexpected costs not typically covered under a medical plan, such as deductibles, copays or out-of-network costs.
How do I learn more about my benefits?	Visit www.equitable.com/employeebenefits and log on to EB360® to view your account details.
If I have additional questions, who can I talk to?	Please don't hesitate to contact us at phone number (866) 274-9887.

Weekly Cost Summary

Cost Summary for Accident Insurance	Weekly Premium
Employee Only	\$3.82
Employee & Spouse	\$5.46
Employee & Child(ren)	\$6.76
Employee & Family	\$8.79



**Contact us at
(866) 274-9887
with any questions
you may have.**

**This includes questions
on how we can provide
language translation
services at no cost to you
and how we can assist
the visually impaired with
form completion and
other information.**

**Email: Customer Service at
EBCustomerService@equitable.com.**



**Members requiring
assistance with
hearing impairment
can contact our
TDD line directly
at (800) 877-8973.**

**Visit equitable.com/employeebenefits
and log on to EB360® to view your account details.**

¹ National Hospital Ambulatory Medical Care Survey: 2016
Emergency Department Summary Tables, # 1, 4, 11, 14, 24, 25. [cdc.
gov/nchs/data/nhamcs/web_tables/2016_ed_web_tables.pdf](https://cdc.gov/nchs/data/nhamcs/web_tables/2016_ed_web_tables.pdf).

² The Associated Press - NORC Center for Public Affairs Research.
investedwallet.com/personal-financestatistics/.

Important Information

Limitations and exclusions: The following is a summary. A complete list of applicable exclusions and limitations are included in the policy and certificate. State variations may apply. Accident benefits may not be payable for injuries caused or contributed to by or incurred: physical or mental illness or disease or related medical treatment, infection not occurring as a direct result of accidental bodily injury, suicide or intentionally self-inflicted injury, war or act of war, while incarcerated, participating in a felony or illegal activity, intoxication, voluntary drug use unless administered by and used as instructed by a physician or for over-the-counter drugs in accordance with manufacturer's instructions, participation in certain activities involving an increased risk of injury as listed in the policy and certificate (e.g., mountain climbing, sky diving).

If you start working for your employer after the effective date - the waiting period is determined by your Employer's personnel policy.

An employee who is employed on the effective date of the policy will receive credit toward satisfying the waiting period for time employed with the employer provided he or she was employed on the day prior to the effective date of the policy.

This policy provides limited benefits: This coverage does not constitute comprehensive health insurance coverage (often referred

to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act. THIS POLICY IS NOT A MEDICARE SUPPLEMENT PLAN. The policy has limitations and exclusions. Optional riders and/or features may incur additional costs. For costs and complete details of the coverage, please see the actual policy or contact your insurance broker. Plan documents are the final arbiter of coverage. Policy form [provide policy form nos.] and state variations. Availability is subject to state approvals.

Equitable policy strictly prohibits doing business with any person or entity involved with marijuana production, distribution or other ancillary operations. Marijuana-related businesses also include the marketing of marijuana-related products and services, persons and businesses that service and receive income from the marijuana industry, and business involving hemp and hemp-related ingredients.

Legal disclosures: Equitable is the brand name of the retirement and protection subsidiaries of Equitable Holdings, Inc., including Equitable Financial Life Insurance Company (Equitable Financial) (NY, NY); Equitable Financial Life Insurance Company of America (Equitable America), an AZ stock company; and Equitable Distributors, LLC. Equitable Advisors is the brand name of Equitable Advisors, LLC (member FINRA, SIPC) (Equitable Financial Advisors in MI & TN). The obligations of Equitable Financial and Equitable America are backed solely by their claims-paying abilities.

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