Personal Accident Insurance

Accidents happen — help your family prepare

IMPORTANT NOTICE: The Program provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical, major medical or sickness coverage.
Personal Accident Insurance

Eligibility
The University establishes its own Accidental Death and Dismemberment (AD&D) plan eligibility, enrollment and termination criteria based on the University of California Group Insurance Regulations and any corresponding Administrative Supplements.

The following individuals are eligible to enroll in this Plan.
Information pertaining to your eligibility, enrollment, cancellation or termination of coverage and conversion options can be found in the “Group Insurance Eligibility Fact Sheet for Retirees and Eligible Family Members.” A copy of this fact sheet is available in the HR Forms section of UCnet (ucnet.universityofcalifornia.edu).

Additional resources are also available in the Compensation and Benefits section of UCnet to help you with your health and welfare plan decisions.

A) Spouse
Your legal spouse.

B) Domestic Partner
You may enroll your same-sex domestic partner if your partnership is registered with the State of California or otherwise meets criteria as a domestic partnership as set forth in the University of California Group Insurance Regulations. Same-sex domestic partners from jurisdictions other than California will be covered to the extent required by law. You may enroll your opposite-sex domestic partner only if either you or your domestic partner is age 62 or older and eligible to receive Social Security benefits based on age.

Important Note: The University complies with federal and state law in administering its group insurance programs. Health and welfare benefits and eligibility requirements, including dependent eligibility requirements are subject to change (e.g., for compliance with applicable laws and regulations). The University also complies with federal and state income tax laws which are subject to change. Requirements may include laws mandating that the employer contribution for coverage provided to certain Family Members be treated as imputed income to the Employee or Retiree. See At Your Service online for related information. Contact your tax advisor for additional information.

More Information
For information on who qualifies and how to enroll, contact the person who handles benefits for your location. If you are a Retiree or surviving Family Member, contact the UC Customer Service Center. Enrollment transactions may be completed by paper form or electronically, according to current University practice.

Description of Coverage
24-hour, 365-days-a-year insurance is provided for covered accidents in the course of business or pleasure. Coverage includes accidents (except as limited by Exclusions) whether on or off the job, occurring in the home, traveling by train, airplane, automobile, or other public and private conveyance.

The benefits provided under this Plan are payable in addition to any other insurance which may be in effect at the time of the accident. There are no geographical limits; it is worldwide accident insurance protection.
Schedule of Benefits

Accidental Death and Dismemberment Indemnity including Paralysis
When injury results in any of the following losses within 365 days of the date of the accident the Insurance Company will pay in one sum the indicated amount of Principal Sum for:

<table>
<thead>
<tr>
<th>For Loss Of</th>
<th>Benefit Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of Life</td>
<td>Full Principal Sum</td>
</tr>
<tr>
<td>Loss of two or more members</td>
<td>Full Principal Sum</td>
</tr>
<tr>
<td>Quadriplegia</td>
<td>Full Principal Sum</td>
</tr>
<tr>
<td>Paraplegia</td>
<td>Three Quarters of Principal Sum</td>
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<tr>
<td>Loss of one member</td>
<td>One-Half of Principal Sum</td>
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<tr>
<td>Loss of four fingers on the same hand</td>
<td>One-Half of Principal Sum</td>
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<tr>
<td>Loss of four toes of the same foot</td>
<td>One-Half of Principal Sum</td>
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<tr>
<td>Hemiplegia</td>
<td>One-Half of Principal Sum</td>
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<tr>
<td>Loss of thumb and index finger of the same hand</td>
<td>One-Half of Principal Sum</td>
</tr>
<tr>
<td>Loss of one hand or one foot</td>
<td>One-Half of Principal Sum</td>
</tr>
</tbody>
</table>

“Loss” as used with reference to hand or foot means actual severance through or above the wrist or ankle joint; as used with reference to eye means irrecoverable loss of the entire sight thereof; with reference to loss of digits of the same hand means loss by actual severance through or above the metacarpophalangeal joints; as used with reference to quadriplegia means the complete and irreversible paralysis of both upper and lower limbs; as used with reference to paraplegia means the complete and irreversible paralysis of both lower limbs; as used with reference to hemiplegia means the complete and irreversible paralysis of upper and lower limbs of one side of the body. Indemnity provided hereunder will not be paid, under any circumstances, for more than one of the losses, the greatest, sustained by any one covered person as the result of any one accident.

“Injury” means bodily injury: (1) which is sustained as a direct result of an unintended, unanticipated accident that is external to the body and that occurs while the injured person’s coverage under the Policy is in force and (2) which directly (independent of sickness, disease, mental incapacity, bodily infirmity or any other cause) causes a covered loss.

Seat Belt/Air Bag Provision
An additional 10% of the applicable Principal Sum amount will be paid if you or your covered spouse/domestic partner suffers loss of life despite restraint by a seat belt or air bag in an automobile accident.

Natural Disaster Benefit
An additional 10% of the applicable Principal Sum amount will be paid if you or your covered spouse/domestic partner suffers loss of life or sustains a covered loss as a result of a Natural Disaster.

“Natural Disaster” means a storm (wind, rain, snow, sleet, hail, lightning, dust or sand), earthquake, flood, volcanic eruption, wildfire or other similar event that is due to natural causes and results in such severe and widespread damage that the area of damage is officially declared a disaster area by a state or federal government if the event occurs in the United States of America, or by a corresponding authority if the event occurs outside the United States of America.

Rehabilitation Benefit
Pays up to $10,000 for all covered Rehabilitation Expenses (as defined in the Policy) within 2 years of a covered accident that results in an Accidental Dismemberment or Paralysis of an Insured Person.
Excludes work-related injuries payable under Workers’ Compensation or other similar law.

Coma Benefit
When a covered accident renders the Insured Person Comatose within 30 days of the covered accident and Coma continues for a period of 30 days, the plan pays a monthly benefit of 1% of the Insured Person’s Principal Sum as long as the Insured Person remains Comatose to a maximum of 100% of the Principal Sum. If an Insured Person suffers one or more losses from the accident for which amounts are payable under more than one Benefit provided, the maximum amount payable will be for one of those losses, the largest.
Benefits and Cost of Benefits

Retiring employees of the University of California enrolled in the Active Employee Accidental Death and Dismemberment Plan may select the amount of Principal Sum for which they are enrolled under the Active Employee Plan with a maximum Principal Sum of $250,000, or may select one of the amounts shown.

Those eligible, retiring University of California employees not previously enrolled in the University of California Active Employee Plan may enroll in this plan for any amounts of Principal Sum up to: $100,000. A Retiree can have a maximum of $250,000 in Retiree AD&D coverage, but must have had coverage of more than $250,000 ($300,000; $400,000; $500,000) at the time of retirement.

Individual Plan
Covers the enrolling individual only.

Individual & Spouse/Domestic Partner Plan
Under this plan, you are insured for the Principal Sum chosen and your spouse/domestic partner is automatically insured for a Principal Sum equal to 60% of your Principal Sum. Figure out your needs then select the amount of insurance (Principal Sum as indicated above) that you feel offers the best protection.

<table>
<thead>
<tr>
<th>Maximum Principal Sum</th>
<th>Individual Plan Annual Cost</th>
<th>Individual &amp; Spouse/Domestic Partner Plan Annual Cost</th>
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</thead>
<tbody>
<tr>
<td>$10,000</td>
<td>$15.00</td>
<td>$20.00</td>
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<tr>
<td>$20,000</td>
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<tr>
<td>$250,000</td>
<td>$375.00</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

Beneficiary

Benefits for loss of your life will be payable in accordance with the beneficiary designation on your enrollment form. If no such designation is in effect, benefits will be paid to your estate.

Effective Date of Coverage

The effective date shall be the date the completed enrollment form is received by the Insurance Company.

For retiring eligible persons already enrolled under the University of California Active Employee Accidental Death & Dismemberment Plan, coverage under this plan shall not be in effect until after that person’s coverage under the Active Employee Plan has expired.

Non-Duplication of Coverage

Eligible individuals may be covered under only one of the following categories: as an Employee, a Retiree, a Disabled Member, a Survivor or a Family Member. An eligible Retiree who is also a spouse/domestic partner of an active Employee may enroll under the Individual Retiree Plan or may be covered as a family member under the Active Employee Family Plan. Such person may not be covered both as an individual and as a family member under any combination of the Active Employee and Retiree Plans.
**Termination of Coverage**

The termination of coverage provisions that are established by the University of California in accordance with its Regulations are described below. Additional Plan provisions apply and are described elsewhere in the document.

**Deenrollment Due to Loss of Eligible Status**
If you are a Retiree or Survivor and your monthly retirement payments terminate, your coverage and that of any enrolled Family Member stops at the end of the last month in which you are eligible for the retirement income.

**Other Deenrollments**
Coverage for you and/or your Family Members may be suspended for up to 12 months if you and/or a Family Member misuse the Plan, as described in the Group Insurance Regulations. Misuse includes, but is not limited to, actions such as falsifying enrollment or claims information, allowing others to use the plan identification card, intentionally enrolling, or failing to deenroll, individuals who are not/no longer eligible Family Members, threats or abusive behavior toward Plan providers or representatives. You may also be deenrolled for up to 12 months if you fail to provide upon request documentation specified by the University of the Plan verifying that the individual(s) you have enrolled are eligible Family Members. Individuals whose eligibility has not been verified will be deenrolled until verification is provided. Individuals who are not eligible Family Members will be permanently deenrolled.

**Contract Termination**
Coverage under the Plan is terminated when the group contract between the University the Plan Vendor is terminated. Benefits will cease to be provided as specified in the contract and you may have to pay for the cost of those benefits incurred after the contract terminates.

The Master Policy may be renewed on any anniversary date, and the Company may refuse to renew only upon the failure of the University of California to furnish information reasonably requested by the Company or to perform any of its obligations pertaining to the Master Policy, or if the University of California carries another plan of insurance that provides similar coverage.

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**How to Enroll**

Information pertaining to enrollment can be found in the “Group Insurance Eligibility Factsheet for Retirees and Eligible Family Members” A copy of this factsheet is available in the Health and Welfare section of the At Your Service website (ucnet.universityofcalifornia.edu).

1) Select the benefit which best fits your needs.

2) You may select one of two plans. One plan provides coverage for an eligible Retiree only, and the other plan provides coverage for an eligible Retiree and spouse/domestic partner.

3) Return the enrollment form with your check or money order for the appropriate premium made payable to “National Union Fire Insurance Company of Pittsburgh, Pa.” to the following address:
   - University of CA - Retirees
   - PO BOX 100408
   - Pasadena, CA 91189-0408

This booklet provides you with an easy-to-understand summary of the benefits provided under the Personal Accident Insurance Plan offered by National Union Fire Insurance Company of Pittsburgh, Pa.

If any conflict should arise between the contents of this summary and the Master Policy, or if any point is not covered herein, the terms of the Master Policy will govern in all cases.

**UNIVERSITY OF CALIFORNIA**
**GROUP ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE**
Plan Sponsorship and Plan and Claims Administration

Plan Sponsor and Plan Administrator
The University of California is the Plan sponsor and the President of the University (or his/her delegates) is the Plan Administrator for the Plan eligibility and enrollment provisions described in this insert to the Plan Evidence of Coverage booklet. If you have a question about eligibility or enrollment, you may direct it to:

University of California
Human Resources
300 Lakeside Drive
Oakland, CA 94612
800-888-8267

Any appeals regarding coverage denials that relate to eligibility or enrollment requirements are subject to the University of California Group Insurance Regulations. To obtain a copy of the Eligibility Claims Appeal Process, please contact the person who handles benefits for your location (or the UC customer Service Center if you are a Retiree or Survivor.

Claims Administrator
Claims and appeals for benefits under the Plan are processed by National Union Fire Insurance Company of Pittsburgh, Pa. and National Union Fire Insurance Company of Pittsburgh, Pa. has full and final discretion and authority to determine whether and to what extent enrollees are entitled to benefits under the Plan. If you have a question about benefits under the Plan or about a specific claim, please refer to the appeal section found later in this document and/or contact:

AIG Personal Accident Claims Deptment
P.O. Box 25987
Shawnee Mission, KS 66225-5987
800-551-0824
Fax: 866-893-8574

This Plan is administered in accordance with the University of California Group Insurance Regulations, applicable contracts/service agreements, evidence of coverage booklets, and applicable state and federal laws. No person is authorized to provide benefits information not contained in these source documents, and information not contained in these source documents cannot be relied upon as having been authorized by the Plan Administrator or Claims administrator, as applicable. The terms of those documents apply if information in this document is not the same. The University of California Group Insurance Regulations will take precedence if there is a difference between its provisions and those of this document and/or the group insurance contracts. What is written in this document does not constitute a guarantee of plan coverage of benefits—particular rules and eligibility requirements must be met before benefits can be received.

Employer Identification Number
The employer identification number assigned to the Regents of the University of California by the Internal Revenue Service is 94-2557406.

Group Contract Number
The group contract number for this Plan is PAI0009124922

Type of Plan
This Plan provides group health and welfare care benefits. This Plan is one of the benefit plans offered under the University of California Health and Welfare Programs for eligible Retired Faculty and Staff.

Plan Year
The Plan year is January 1 through December 31.

Continuation of the Plan
The University of California intends to continue the plan of benefits described in this booklet indefinitely but reserves the right to terminate or amend the benefits provided at any time. Plan benefits are not accrued or vested benefit entitlements. Any such amendments or termination shall be carried out by the President or his or her delegates. The portion of the premium that the University pays is determined by UC and may change or stop altogether, and may be affected by the state of California’s annual budget appropriation.

Financial Arrangements
The benefits under the Plan are paid by the National Union Fire Insurance Company of Pittsburgh, Pa. under a Group Service Agreement.

The cost of the premiums is paid entirely by the plan participants.

Agent for Service or Legal Process
Legal Process may be served on National Union Fire Insurance Company of Pittsburgh, Pa. at 175 Water Street, New York, NY 10038.

Certificate
A certificate of insurance will be provided (by National Union Fire Insurance Company of Pittsburgh, Pa.), following enrollment in the plan, describing in detail the coverage summarized in this brochure.

Your Rights Under The Plan
As a participant in the University of California Plan, you are entitled to certain rights and protections. All plan participants shall be entitled to:

1) Examine, without charge, at the Plan Administrator’s office and other specified sites, all Plan documents, including the Group Service Agreement, at a time and location mutually convenient to the participant and the Plan Administrator.

2) Obtain copies of all Plan documents and other information for a reasonable charge upon written request to the Plan Administrator.
How to File a Claim

You or your beneficiaries should protect your rights by filing a written notice of claim with National Union Fire Insurance Company of Pittsburgh, Pa. within 20 days of the loss. See Uniform Provisions Section of your certificate, paragraphs “Notice of Claim,” “Claim Forms,” “Proofs of Loss” “Time off Payment of Claims.”

If a claim is denied, your beneficiary will receive a notice from National Union Fire Insurance Company of Pittsburgh, Pa. that states the reasons for the denial and describes any additional information needed. Your beneficiary may, within 60 days after receiving notice of the denial, formally appeal the denial in writing. The appeal should state the specific reasons with reference to the Policy provisions, why the claim should not be denied.

National Union Fire Insurance Company of Pittsburgh, Pa. will reply to your beneficiary in writing. If more than 60 days from the date the formal appeal is received are needed for an evaluation, your beneficiary will be notified in writing of the reason for the extension of time. National Union Fire Insurance Company’s decision is final.

Nondiscrimination Statement
In conformance with applicable law and University policy, the University of California is an affirmative action/equal opportunity employer.

Please send inquiries regarding the University’s affirmative action and equal opportunity policies for staff to:
Systemwide AA/EEO Policy Coordinator
University of California
Office of the President
1111 Franklin Street, 5th Floor
Oakland CA 94607

For faculty to:
Office of Academic Personnel
University of California
Office of the President
1111 Franklin Street
Oakland, CA 94607

You may direct inquiries about this program to
AIG Benefit Solutions
121 Spear Street
San Francisco, CA 94105-1588
800-772-7863

(Please be sure to leave a detailed voice mail so you may be assisted promptly.)

This program is underwritten by
Executive Offices:
175 Water Street
New York, NY 10038

Exclusions
No coverage shall be provided under the Policy and no payment shall be made for any losses resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks even if the proximate or precipitating cause of the loss is an accidental bodily injury:

1. suicide or any attempt at suicide or intentionally self-inflicted injury or any attempt at intentionally self-inflicted injury;
2. sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly form any of these;
3. travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is (a) riding as a passenger in any aircraft not intended or licensed for the transportation or passengers (b) performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft; or (c) riding as a passenger in an aircraft owned, leased or operated by the University of California;
4. declared or undeclared war, or any act of declared or undeclared war;
5. infections of any kind regardless of how contracted, except bacterial infections that are directly by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;
6. full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured Person is not covered due to his or her active duty status will be refunded.) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded.)
www.aig.com/us/benefits

The underwriting risks, financial and contractual obligations, and support functions associated with products issued by National Union Fire Insurance Company of Pittsburgh, Pa., are its responsibility. National Union Fire Insurance Company of Pittsburgh, Pa., maintains its principal place of business at 175 Water Street, 15th Floor, New York, NY 10038, and is authorized to conduct insurance business in all states and the District of Columbia. NAIC No. 19445.

This is a summary only of products and services offered. Actual offerings may vary by group size and are subject to state insurance law, and the benefits/provisions as described may vary due to such law. All products are subject to the policy terms, conditions, limitations, reductions, exclusions and termination provisions. Please see policy and certificate for details.

Policy series C11656(REV 3-99)DBG-CA.

If applicable, any rates shown are based on the information provided at the time of quoting and are subject to adjustment.

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University of California is a separate and unrelated entity.