Accident Insurance

SUMMARY OF BENEFITS



Leidos Inc.

Why is Accident Insurance important?

Life doesn't always go according to plan. When an accident happens, the last thing you want to worry about is the unexpected costs that can come with it. Accident Insurance helps provide added financial protection, so you can stay focused on recovery.

What does Accident Insurance cover?

Accident Insurance pays benefits directly to you when an accident occurs on or after the effective date of coverage. Examples of covered Accidents include, but are not limited to: burns, lacerations, concussions, fractures and dislocations. You may also receive additional benefits for treatment of covered accidents. **For example, if you were to experience an accident and fracture your wrist, you could receive the listed payments below to use as you choose**.

Accident-Related Benefit	Benefit (High Plan Example)
Hospital Admission	$1,500
Treatment in the ER (Emergency Care Benefit)	$200
X-Ray	$200
Injury Diagnosed-Fractures Wrist (closed)	$500
Follow Up Doctor's Visit	$100

Control Number 52844

Coverage issued by **The Prudential Insurance Company of America**

Starting a Claim is Easy.
Download the app

Google Play Apple Store

Or visit:
mybenefits.prudential.com
First-time user will need to register before logging in.

Plan Details at a Glance

Coverage Summary

Class 1: All Active Full-time and Part-time Leidos employees working a minimum of 12 hours per week.
Class 2: All Active Full-time and Part-time QTC Management, Inc employees working a minimum of 20 hours per week.
Class 3: All Active Full-time and Part-time QTC Commercial Services, LLC employees working a minimum of 30 hours per week are eligible.
Coverage is available to you, your Spouse/Domestic Partner and child(ren).

Employee and Spouse/Domestic Partner must be age 100 or under when first enrolling. There are no benefit reductions due to age for Employee or Spouse/Domestic Partner. For Child(ren) coverage is up to age 26.

During your enrollment eligibility period, you can enroll for coverage without answering any medical questions. Coverage is Guaranteed Issue.

This is a summary of benefits and does not include all plan provisions, exclusions and limitations. If there is a discrepancy between this document and the group contract issued by The Prudential Insurance Company of America, the terms of the group contract will govern. This coverage is not medical insurance and does not reimburse medical expenses. It does not replace health insurance or pay providers directly for medical care.

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Accidental Losses or Injury Benefits

This coverage pays benefits for accidental losses or injuries. Benefit amounts vary based on the severity of the injury or accident and may be shown as 'up to' stated limits. Refer to your certificate of coverage for all of plan provisions, exclusions and limitations.

Type of Loss or Injury	High Plan	Low Plan
Accidental Dismemberment (includes loss of toes, feet, hands, and/or arms)	Up to $20,000	Up to $15,000
Broken Tooth	Up to $300	Up to $100
Burns	Up to $15,000	Up to $7,500
Catastrophic Accident (includes loss of sight, hearing and speech)	Up to $100,000	Up to $25,000
Coma	$10,000	$5,000
Concussion	$400	$200
Dislocations	Closed Up to $5,000 Open Up to $10,000[1]	Closed Up to $3,000 Open Up to $6,000[1]
Eye Injuries	Up to $400	Up to $250
Fractures	Closed Up to $5,000 Open Up to $10,000[1]	Closed Up to $3,000 Open Up to $6,000[1]
Lacerations	Up to $700	Up to $300
Ruptured Disc with Surgical Repair	$1,000	$500
Puncture Wound	$100	$25
Paralysis	Up to $40,000	Up to $15,000
Skin Graft – Due to Burns	Up to 50% of burn benefit	Up to 50% of burn benefit
Skin Graft – Not due to Burns	Up to $2,000	Up to $500
Torn Knee Cartilage	$750	$500
Torn, Ruptured or Severed Tendon/ Ligament/Rotator Cuff	Up to $1,000	Up to $750

[1]Closed injuries do not break the skin, while open injuries involve a break in the skin and typically require more extensive treatment.

Additional Benefits

Additional Benefits listed below are subject to exclusions and limitations that are not outlined in this summary of benefits. Refer to your certificate of coverage for all of plan provisions, exclusions and limitations.

Type of Benefit	Benefit Description	High Plan	Low Plan
Health Screening Benefit[2]	Paid once per calendar year by taking one of the specified health screening tests outlined in your certificate of coverage while not confined in a hospital.	$100	$50
Ambulance	Paid if an ambulance is required to transport you by ground or water.	$400	$300
Organized Sports	Receive this benefit if your dependent child sustains an accidental injury while participating in an organized sport.	25%	25%
Doctor Follow-Up Visits	Receive this benefit if you sustain a covered injury and receive doctor recommended follow-up care for the injury.	$100	$50
Emergency Care	Receive this benefit if you sustain an accidental injury and receive initial emergency care from a doctor in an Emergency Room, a Physician's office, or an Urgent Care Facility.	Up to $200	Up to $100
Hospital Admission	Receive this benefit if you are admitted to a hospital for treatment of a covered accidental injury.	$1,500	$750
Hospital Confinement	Receive this benefit if you are confined in the hospital for treatment of an accidental injury.	$300	$150
Hospital ICU Admission	Receive this benefit if you are admitted as an inpatient to an ICU due to an accident.	$1,500	$750
Hospital ICU Confinement	Receive this benefit after you are confined in the ICU for treatment of an accidental injury.	$600	$300
Lodging	Receive this benefit if you are confined in a hospital for treatment of an accidental injury, and a companion who accompanies you stays in a hotel or other facility that provides sleeping accommodations in exchange for a fee.	$200	$100
Transportation	Paid if a doctor recommends you get treatment for a covered accident that is not available locally and you have to travel a certain distance from home.	$400	$300
X-Ray	Paid if you receive an X-ray to evaluate a covered accidental injury.	$200	$125

[2]The Health Screening/Wellness Benefit is not available in all states. All Employees of Leidos Inc. are eligible to receive this benefit if they qualify.

Accidental Death Benefits

This coverage will pay a benefit if death results directly from an accident or accidental injury.

Accidental Death Benefit		High Plan	Low Plan
Basic	Employee	$50,000	$25,000
	Spouse/Domestic Partner	$50,000	$25,000
	Child	$50,000	$25,000
Common Carrier	Employee	$150,000	$75,000
	Spouse/Domestic Partner	$150,000	$75,000
	Child	$150,000	$75,000

This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").

This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage.

This policy provides Accident insurance only. It does NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services.

IMPORTANT NOTICE - THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

THIS IS AN EXCEPTED BENEFITS POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY.

Group Accident Insurance coverage is a limited benefit policy issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. **Prudential's Accident Insurance is not a substitute for medical coverage that provides benefits for medical treatment, including hospital, surgical, and medical expenses, and it does not provide reimbursement for such expenses.** The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by The Prudential Insurance Company of America, the Group Contract will govern. In Washington, the controlling document is the Certificate, not the Contract**.** Please contact Prudential for more information. Contract provisions may vary by state. Contract Series: 83500.

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