

FOR WHEN **LIFE** DOESN'T GO ACCORDING TO PLAN

ASCE GROUP HIGH-LIMIT ACCIDENT INSURANCE

ASCE | MEMBER
ADVANTAGES

INNOVATIVE SOLUTIONS: THE WAY YOU WOULD ENGINEER THEM

UNDERWRITTEN BY **New York Life Insurance Company**

WHY PURCHASE HIGH-LIMIT ACCIDENT INSURANCE THROUGH THE ASCE?

With ASCE Group High-Limit Accident Insurance, you'll have access to the following benefits if you are injured in an accident:

- Must be a member of ASCE
- Must be under age 70
- Must reside in the United States (excluding FL, NC, VT, WA, Puerto Rico and Territories) or Canada (excluding Quebec)
- Coverage options of \$50,000 to \$250,000 are available for lawful spouses
- Child coverage of \$10,000 is available
- Coverage options available from \$50,000 to \$500,000
- Common Carrier Benefit
- Repatriation Benefit
- Rehabilitation Benefit
- Seat Belt Benefit
- Education Benefit
- Spouse Critical Period Benefit
- Adaptive Home/Auto Benefit
- Coverage is portable if you change employers
- Benefits begin to reduce at age 70

See Certificate of Insurance for full plan details.

How Much Coverage Can I Apply For?

If you're an ASCE member, under age 70, a resident of the United States (excluding FL, NC, VT, WA, and territories) or Canada (excluding Quebec), you're eligible to apply for a Principal Sum of \$50,000 to \$500,000 (in units of \$50,000) in ASCE Group High-Limit Accident Insurance.

Coverage of \$50,000 to \$250,000 is available for your spouse, but spouse coverage may not exceed your own member coverage. Each unmarried dependent child from age 15 days through age 25 may be covered for \$10,000.

When you reach age 70, coverage converts to Common Carrier Travel Accident Insurance and any Principal Sum in excess of \$100,000 reduces to \$100,000. Common Carrier coverage protects against accidents that occur while riding on a public conveyance—airplane, bus, train, or taxi.

Not intended for residents of New Mexico.

How Does This Plan Work?

SCHEDULE OF BENEFITS

For an injury directly and independently caused by an accident while coverage is in force for you, your spouse, or your child, the benefits specified will be paid if such resulting loss(es) occur within 365 days of that accident.

Benefits are payable for the following losses:

FULL PRINCIPAL SUM for loss of: life; or two limbs; or movement of both upper and lower limbs (quadriplegia); or sight of both eyes; or both speech and hearing; or one limb and sight of one eye.

THREE-QUARTERS OF PRINCIPAL SUM for loss of: movement of both lower limbs (paraplegia).

ONE-HALF OF PRINCIPAL SUM for loss of: one limb; or movement of both upper and lower limbs on one side of the body (hemiplegia); or sight of one eye; or speech; or hearing.

ONE-QUARTER OF PRINCIPAL SUM for loss of: the thumb and index finger of either hand.

Loss Means: with reference to limbs, actual severance through or above the wrist or ankle joints; with reference to thumb and index finger, actual severance through or above the metacarpophalangeal joints; with reference to sight, speech, or hearing, entire and irrevocable loss thereof; and with reference to movement, complete and irreversible paralysis of such limbs.

The total benefit payable for all losses due to a single accident will not be more than the Principal Sum. Only one of the sums, the largest, will be paid for all injuries to the same limb resulting from one accident.

What Do These Features Provide?

The following benefits are payable in addition to any other benefits received under the Plan.

COMMON CARRIER BENEFIT

If a covered loss occurs as a result of an accident while the injured person is a passenger on a licensed common

carrier (train, bus, etc), an additional \$25,000 benefit will be payable, provided the member is under age 70 at the time of the accident.

REPATRIATION BENEFIT

If a covered accidental death occurs outside of the insured person's state of residence, an additional benefit of up to \$25,000 of the actual expenses incurred will be paid for the preparation and transportation of the body to the place of burial or cremation.

REHABILITATION BENEFIT

Rehabilitation training can help an insured person return to former productivity following an accident. This benefit may be paid for a covered loss other than loss of life. The amount paid will equal the actual expenses incurred for rehabilitation training up to a maximum of \$5,000. The expense must be incurred within two years after the date of the accident. While you, the insured member, are receiving this benefit, you will not be required to pay premium contributions until the earlier of the date you return to work or the \$5,000 maximum has been reached.

SEAT BELT BENEFIT

If an insured person is involved in an automobile accident in which he/she was properly wearing a seat belt, and dies within 90 days as a result of that accident, the beneficiary can receive an additional amount that is the lesser of \$50,000 or 50% of the Principal Sum payable. Please refer to the Certificate of Insurance for certain limitations and conditions on this benefit.

EDUCATION BENEFIT

If the benefit for loss of life is payable with respect to the insured member, and his/her dependents are covered by this Plan on the date of the accident, this Plan will pay an education benefit equal to the lesser of 2% of the member's Principal Sum payable or \$2,500 per year. This benefit will be payable up to four years, for each insured dependent who is enrolled (or enrolls within 365 days of the accident) as a

full-time student at an institution of higher learning (college, university, or trade school). In addition, if no insured spouse or child qualifies for this benefit following the covered loss of the member's life, a lump sum benefit equal to 4% of the member's Principal Sum will be payable.

SPOUSE CRITICAL PERIOD BENEFIT

If the insured member dies as a result of a covered accident, his/her insured spouse will receive additional monthly payments equal to 1% of the member's Principal Sum. These payments will be made until the earlier of six months or the insured spouse's death.

ADAPTIVE HOME/AUTO BENEFIT

If a covered loss (other than loss of life) results in a physical disability, and, because of that disability, an insured person incurs expenses necessary to modify his/her home and/or car, a benefit amount equal to the actual charges will be payable. However, this benefit will not exceed the lesser of 5% of the Principal Sum or \$5,000. Please refer to the Certificate of Insurance for certain limitations and conditions on this benefit.

BENEFICIARY

The beneficiary is the person last designated by you in writing, and recorded as such by or on behalf of New York Life Insurance Company. Payments for losses other than for your loss of life will be made to you. The beneficiary for dependent(s) coverage is you, the member.

EFFECTIVE DATE

Note: Residents of MD And NC: Any reference to "performing normal activities of a person in good health of like age" is replaced by the requirement that the health status of any proposed insured person remain the same as stated in your application. You and your eligible dependents will become insured on the date specified by New York Life Insurance Company, provided the initial premium contribution has been paid and you and your approved dependents are actively performing the normal activities of a person in good health of like age on that date. Dependent insurance

will not take effect unless your insurance is in effect on a premium paying basis, and any person who is not performing his/her normal activities as required will not become insured until the date he/she is performing such activities, provided such date is within three months of the date insurance would have been effective and the person is still eligible. (Payment of a premium contribution for insurance does not mean there is any coverage in force before the effective date as specified by New York Life Insurance Company.)

WHEN COVERAGE ENDS:

Your insurance remains in force unless you cease to be an ASCE member, fail to pay premium contributions when due, the person enters full-time active duty in the Armed Forces, or the Plan is terminated or modified by the Policyholder or New York Life Insurance Company to end insurance for the group of insureds to which you belong. Dependent coverage will also terminate when member coverage terminates or when the dependent ceases to be a lawful spouse or eligible dependent child. A member's surviving spouse and children may continue coverage if it was in force at the time of the member's death as described in the Certificate of Insurance.

CERTIFICATE OF INSURANCE

This brochure is only a brief description of the principal provisions and features of the ASCE Group High-Limit Accident Insurance Plan. The complete terms and conditions are set forth in the group policy issued by New York Life Insurance Company to the Trustee of the ASCE Group High-Limit Accident Insurance Plan. When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the Plan. In the event of any conflict or inconsistency between the information on this site and the information contained in the underlying plan documents, the plan documents will in all respects control and govern. If any provision is not explained or only partially explained, your rights will always be determined under the provisions of the underlying plan documents. Insurance coverage and availability may differ by state.

EXCLUSIONS AND LIMITATIONS

No benefit will be payable for any loss that occurs during or is due or related to: military service; incarceration or participation in an illegal occupation/activity or the commission of a crime; voluntary intake of drugs, narcotics, or alcohol (unless prescribed by a physician); any declared or undeclared war or act thereof; or operating, riding in or descending from any aircraft except when riding as a passenger; or for any loss that is due or related to: a physical or mental sickness or medical/surgical treatment thereof, or suicide or intentionally self-inflicted injury while sane or insane. In addition, when you reach age 70, coverage converts to Common Carrier Travel Accident Insurance, and any Principal Sums in excess of \$100,000 reduce to \$100,000.

2015 RATES

The premium contributions shown reflect the current rates and benefit structure. Premium contributions may be changed by New York Life Insurance Company on any premium due date and on any date on which benefits are changed. However, your rates may change only if they are changed for all others in the same class of insureds. For example, a class of insureds is all others with the same issue age. Benefit option amounts are not guaranteed and are subject to change by agreement between New York Life Insurance Company and the Trustee under Trust Agreement with the ASCE.

HOW TO APPLY:

Before you request coverage, you must be a member in good standing with ASCE. Please wait until your application for membership is accepted before initiating insurance. If you have any questions regarding membership, please contact ASCE directly. To apply for insurance, please download the application for the product you would like to apply for. You may fax your completed and signed application toll-free to 866.817.9009 or send it via mail to:

ASCE Member Insurance Program
1200 East Glen Avenue
Peoria Heights, IL 61616-5348

For residents of Puerto Rico, completed applications and premium payments should be sent to: Global Insurance Agency, P.O. Box 9023918 San Juan, Puerto Rico, 00902-3918

In order to expedite claim payments we request that you provide the following information for everyone you are requesting coverage on as well as on any named beneficiary: full name, address, date of birth, social security number, and telephone number. Please call 800.469.3582 to complete this request. If you prefer, enclose a separate piece of paper with this information together with your application.

30-DAY FREE LOOK:

When you become insured, you will be sent a Certificate of Insurance summarizing your insurance coverage. If you are not completely satisfied with the terms of your certificate, you may return it without claim, within 30 days. Your coverage will be invalidated and you will receive a full refund—no questions asked!

Current 2017 Annual Premium Contributions		
Principal Sums	When Member is Under Age 70	When Member is Age 70 and Over
For Member		
\$50,000	\$26.00	\$26.00
100,000	52.00	52.00
150,000	78.00	-
200,000	104.00	-
250,000	130.00	-
300,000	156.00	-
350,000	182.00	-
400,000	208.00	-
450,000	234.00	-
500,000	260.00	-

Renewal only. On the premium due date on or immediately after the date the member reaches age 70, coverage converts to Common Carrier Travel Accident Coverage, and any Principal Sum in excess of \$100,000 reduces to \$100,000.

Current 2017 Annual Premium Contributions		
Principal Sums	When Member is Under Age 70	When Member is Age 70 and Over
For Spouse		
\$50,000	\$26.00	\$26.00
100,000	52.00	52.00
150,000	78.00	-
200,000	104.00	-
250,000	130.00	-
300,000	-	-
350,000	-	-
400,000	-	-
450,000	-	-
500,000	-	-
For Children		
\$10,000 (each child)	\$10.50	\$7.80

Spouse's Principal Sum cannot exceed the Member's Principal Sum.

One premium is for all children regardless of number.

Exclusions and Limitations: Benefits are not payable for any disability that occurs during or is due or related to: 1) intentionally self-inflicted injury while sane or insane (Missouri residents: the exclusion for intentionally self-inflicted injury is not applicable to injury caused by an attempted suicide while insane); 2) declared or undeclared war or any act thereof, military service, or incarceration or participation in an illegal occupation/activity or the commission of a crime; 3) pregnancy or childbirth (except complications thereof); or 4) any impairment or disease specifically excluded from your coverage.

The Plan limits benefits for disabilities due to mental disorders or chemical dependencies to a maximum of 24 monthly payments.

No benefits will be paid unless the disability occurs while you are insured under the Plan and you are under the care of a licensed physician or surgeon other than yourself (or member of your immediate family or household) during the period of disability.

Benefits will not be paid for a disability that is classified as or related to a PRE-EXISTING CONDITION for up to two years following the effective date of coverage. A PRE-EXISTING CONDITION is defined as an illness or any condition related to such illness for which a person consults a doctor, receives medical services or supplies, or takes any medication during the 12-month period immediately before the effective date of insurance, if such illness or condition is not fully disclosed on the application for insurance. Any impairment restriction, illness, or condition for which the insured has not received medical services during the 12-month period following the effective date of coverage or which was fully disclosed on the application for insurance is not considered a PRE-EXISTING CONDITION.

Important Notice: How New York Life Obtains Information and Underwrites Your Request for Group High-Limit Accident Insurance

In this notice, references to “you” and “your” include any person proposed for insurance. Information regarding insurability will be treated as confidential. In considering whether the person(s) in your request for insurance qualify for insurance, we will rely on the medical information you provide, and on the information you AUTHORIZE us to obtain from your physician, other medical practitioners and facilities, other insurance companies to which you have applied for insurance and MIB, Inc. (“MIB”). MIB is a not-for-profit organization of insurance companies, which operates an information exchange on behalf of its members. If you apply for life or health insurance coverage, a claim for benefits is submitted to an MIB member company, medical or non-medical information may be given to MIB, and such information may then be furnished by MIB, upon request, to a member company.

Your AUTHORIZATION may be used for a period of 24 months from the date you signed the application for insurance, unless sooner revoked. The AUTHORIZATION may be revoked at any time by notifying New York Life in writing at the address provided. Your revocation will not be effective to the extent New York Life or any other person already has disclosed or collected information or taken other action in reliance on it, or to the extent that New York Life has a legal right to contest a claim under an insurance certificate or the certificate itself. The information New York Life obtains through your AUTHORIZATION may become subject to further disclosure. For example, New York Life may be required to provide it to insurance, regulatory, or other government agencies. In this case, the information may no longer be protected by the rules governing your AUTHORIZATION. MIB and other insurance companies may also furnish New York Life, its subsidiaries, or the Plan Administrator with non-medical information (such as driving records, past convictions, hazardous sport or aviation activity, use of alcohol or drugs, and other applications for insurance). The information provided may include information that may predate the time frame stated on the medical questions section, if any, on this application. This information may be used during the underwriting and claims processes, where permitted by law.

New York Life may release this information to the Plan Administrator, other insurance companies to which you may apply for life and health insurance, or to which a claim for benefits may be submitted and to others whom you authorize in writing, however, this will not be done in connection with test results concerning Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV). We may also make a brief report of your protected health information to MIB, but we will not disclose our underwriting decision.

New York Life will not disclose such information to anyone except those you authorize or where required or permitted by law. Information in our files may be seen by New York Life and Plan Administrator employees, but only on a “need to know” basis in considering your request. Upon receipt of all requested information, we will make a determination as to whether your request for insurance can be approved.

If we cannot provide the coverage you requested, we will tell you why. If you feel our information is inaccurate, you will be given a chance to correct or complete the information in our files. Upon written request to New York Life or MIB, you will be provided with non-medical information. Generally, medical information will be given either directly to the proposed insured or to a medical professional designated by the proposed insured.

Your request is handled in accordance with the Federal Fair Credit Reporting Act procedures. If you question the accuracy of the information provided by MIB, you may contact MIB and seek a correction.

MIB’s information office is: MIB, Inc., 50 Braintree Hill Park, Suite 400, Braintree, MA 02184-8734, telephone 866-692-6901 (TTY 866 346-3642). For Canadian residents, the address is: MIB Information Office, 330 University Avenue, Suite 501, Toronto, Ontario, Canada M5G 1R7, telephone 416-597-0590. Information for consumers about MIB may be obtained on its website at www.mib.com.

For NM Residents: PROTECTED PERSONS¹ have a right of access to certain CONFIDENTIAL ABUSE INFORMATION² we maintain in our files and they may choose to receive such information directly. You have the right to register as a PROTECTED PERSON by sending a signed request to the Administrator at the address listed on the application. Please include your full name, date of birth, and address.

¹ PROTECTED PERSON means a victim of domestic abuse: who has notified us that he/she is or has been a victim of domestic abuse; and who is an insured person or prospective insured person.

² CONFIDENTIAL ABUSE INFORMATION means information about: acts of domestic abuse or abuse status; the work or home address or telephone number of a victim of domestic abuse; or the status of an applicant or insured as family member, employer or associate of a victim of domestic abuse or a person with whom an applicant or insured is known to have a direct, close, personal, family or abuse-related relationship.



New York Life Insurance Company

8/12 ed.