

LLNS

Business Travel Accident Program
Benefit Program Summary

Effective October 1, 2015

LLNS Business Travel Accident Program

Who Is Eligible for the LLNS Business Travel Accident Program?

The following persons are eligible for the LLNS Business Travel Accident (BTA) program:

- All Employees of the Policyholder, all Staff Members, Interns, Residents and Fellows associated with Policyholder in connection with emergency medical programs; and any other person so designated by the Policyholder while traveling at the express direction and with approval of the Policyholder, and all contract Employees of Akima while traveling with Lawrence Livermore National Security, LLC Employee on business, who are not covered in any other Class.
- All Senior Management Group Employees of the Policyholder who are not in any other Class.
- All those Policyholder Employees designated as members of the Alert Team, the WMD Capabilities Team, the Nuclear Inspection Team, Employees on assignment in Capacity of Advisors & 3 Consultants whose names are on file with the Policyholder not included in any other Class.
- All Eligible Employees and Affiliates of the Policyholder participating in Specialized Aviation Activities (i.e: HIRIS and LASI Missions) who are named and whose activity is on file with the Policyholder, who are not covered in any other Class.
- All Invited Guests while traveling outside their country of permanent residence on a trip as an Invited Guest of the Policyholder.
- Employees who have been specifically named by the Policyholder to be included in this Class for an authorized specified trip provided their name; trip destination and trip duration are provided to the Company prior to the start of such specified trip, and who are not covered in any other Class.
- Spouse and Dependent Child(ren) of primary insured

How Does the Business Travel Accident Program Work?

The BTA program offers you and your family an extra measure of financial protection if you die or suffer certain injuries while traveling on authorized business for LLNS or while engaged in certain designated hazardous activities on behalf of LLNS. BTA coverage does not include any loss that occurs during a vacation or a leave of absence.

BTA benefits are payable in addition to any Workers' & Unemployment Compensation, disability, life insurance or AD&D benefits you may receive.

When Does My BTA Coverage Begin?

Your BTA coverage begins on your eligibility date, as long as you're actively at work on that date. If you aren't actively at work on the day your coverage is supposed to begin, coverage begins on the day you return to active employment.

You generally may receive BTA coverage for injuries you suffer while you are on a business trip for LLNS, provided that:

- The trip is to a location away from your normal duty station for the purpose of performing a job-connected activity;
- The trip is specifically authorized by LLNS and you are listed as being on official travel status by LLNS; and
- Expenses for the trip are reimbursable by LLNS or an authorized sponsor, and the transportation is being provided by LLNS

You generally may receive BTA coverage for injuries while you are on a business trip for LLNS, while you are:

- While on the Business of the Policyholder; and
- during the course of any Trip, including a Sojourn or Personal Deviation taken during the course of the Trip, made by such person.
- while operating or riding in or on (including getting in or out of, or on or off of), or by being struck or run down by any conveyance being used as a means of land or water transportation,
- while riding as a Passenger in or on (including getting in or out of, or on or off of):
 - a. any Civilian Aircraft; or
 - b. any Military Air Transport Aircraft; or
- by being struck or run down by any aircraft.

Covered Benefits

Principal Sum

Under the BTA program, you are covered for accidental death and dismemberment for up to \$1,000,000 depending on your employee classification under the BTA Policy.

The amount payable for any one accident regardless of the number of eligible individuals is \$10,000,000 per accident and \$30,000,000 while participating in Department of Energy Designated Practice Exercises or Actual Emergency Alerts or while on any flight on a rocket propelled or rocket launched aircraft any test for experimental purposes

Accidental Death

If you die within 365 days of a covered accident, your beneficiary will receive 100% of your eligible principal sum.

Accidental Dismemberment

If you suffer a covered loss within 365 days of a covered accident, you will receive a percentage of your eligible principal sum. The percentage you receive depends on the loss, as follows:

<u>For Loss of</u>	<u>Percentage of Principal Sum</u>
Both Hands or Both Feet	100%
Sight of Both Eyes.....	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye.....	100%
Speech and Hearing in Both Ears	100%
One Hand or One Foot	50%
Sight of One Eye	50%
Speech or Hearing in Both Ears	50%
Hearing in One Ear.....	25%
Thumb and Index Finger of Same Hand.....	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%
Uniplegia	25%

If you, as a result of any one accident, experience more than one of the losses listed above, only one benefit (the largest) will be paid.

Bereavement and Trauma Counseling Benefit

If an Insured Person suffers an accidental death or an accidental dismemberment or paralysis for which an Accidental Death or Accidental Dismemberment and Paralysis benefit is payable under the Policy, or if he or she goes into a coma for which a Coma benefit is payable under the Policy, the Company will pay Covered Bereavement and Trauma Counseling Expenses that are due to his or her death or dismemberment or paralysis or coma. The Covered Bereavement and Trauma Counseling Expenses must be incurred within one year after the date of the accident causing such loss(es), up to a maximum of \$150 per session for up to 10 sessions for the Insured Person and all of his or her Immediate Family Members combined with respect to all such losses caused by the same accident.

Carjacking Benefit

The Company will pay a benefit when the Insured Person suffers one or more losses for which benefits are payable under the Accidental Death Benefit, Accidental Dismemberment and Paralysis Benefit, Coma Benefit provided by the Policy as a result of a Carjacking of an Automobile while the Insured Person is operating, or riding as a passenger in, (including getting in or out of) such Automobile.

The amount payable is the lesser of: (1) \$25,000; or (2) 10% of the largest benefit payable under any one of the Benefits specified above due to the Carjacking. Only one benefit is payable under this Rider for all losses as a result of the same Carjacking. Verification of the Carjacking must be a part of an official report of the Carjacking or be certified, in writing, by the investigating officer(s).

Business Travel Assistance Coverage

The BTA program includes Travel Assistance coverage. If you are traveling on authorized business, you also have access to the following business travel assistance:



Travel Assist ID Card
10-22-15.pdf



Travel Assist Web
User Guide.pdf

Coma Benefit

If Injury renders an Insured Person Comatose within 365 days of the date of the accident that caused the Injury, and if the Coma continues for a period of 30 consecutive days, the Company will pay a monthly benefit of 1% of the Principal Sum. No benefit is provided for the first 30 days of Coma.

Emergency Evacuation Benefit

The Company will pay for Covered Emergency Evacuation Expenses reasonably incurred if the Insured Person suffers an Injury or Emergency Sickness that warrants his or her Emergency Evacuation while he or she is outside a 100 mile radius from his or her current place of primary residence, up to a maximum of \$500,000 for all Emergency Evacuations due to all Injuries from the same accident or all Emergency Sicknesses from the same or related causes.

Home Alteration and Vehicle Modification Benefit

If an Insured Person suffers an accidental dismemberment or paralysis for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy; did not, prior to the date of the accident causing such loss(es), require the use of a wheelchair to be ambulatory; and as a direct result of such loss(es) is now required to use a wheelchair to be ambulatory; the Company will pay Covered Home Alteration and Vehicle Modification Expenses that are incurred within one year after the date of the accident causing such loss(es), up to a maximum of \$25,000 for all such losses caused by the same accident

Permanent Total Disability Benefit (Not Applicable to Insured Persons Age 70 or Older on the Date of the Accident).

The BTA program offers coverage if you suffer a permanent and total disability. A permanent and total disability means that you are permanently unable to perform the material and substantial duties of any occupation for which you are qualified. This coverage is not available for any of your dependents, and will not be paid once you are over the age of 75.

The permanent and total disability must result from an injury that occurred while traveling for LLNS business, or while engaged in covered hazardous activities. The disability must occur within 365 days of the accident, and must continue for a period of at least 12 months.

If you are eligible to receive this benefit, you will be paid one percent of your eligible principal sum per month. Payments will start after the thirteenth consecutive month of permanent and total disability.

Payments for this benefit will end the earliest of:

- The date you cease to be permanently and totally disabled due to the injury,
- The date you die, or
- The date the total amount of your principal sum (100%) is paid through the monthly benefit.

Rehabilitation Benefit

If an Insured Person suffers an accidental dismemberment or paralysis for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy, the Company will reimburse the Insured Person for Covered Rehabilitative Expenses that are due to the Injury causing the dismemberment or paralysis. The Covered Rehabilitative Expenses must be incurred within two years after the date of the accident causing that Injury, up to a maximum of \$50,000 for all Injuries caused by the same accident.

Repatriation of Remains Benefit

If an Insured Person suffers loss of life due to Injury or Emergency Sickness while outside a 100 mile radius from his or her current place of primary residence, the Company will pay for covered expenses reasonably incurred to return his or her body to his or her current place of primary residence, up to a maximum of \$500,000. Covered expenses include, but are not limited to, expenses for: (1) embalming or cremation; (2) the most economical coffins or receptacles adequate for transportation of the remains; and (3) transportation of the remains by the most direct and economical conveyance and route possible.

Seat Belt Benefit

The Company will pay a benefit when the Insured Person suffers accidental death such that an Accidental Death benefit is payable under the Policy and the accident causing death occurs while the Insured Person is operating, or riding as a passenger in, an Automobile and wearing a properly fastened, original, factory-installed seat belt. The amount payable is the lesser of: (1) \$25,000; or (2) 10% of the Insured Person's Principal Sum.

Air Bag Benefit.

The Company will pay an additional benefit if a Seat Belt Benefit is payable and if the Insured Person is positioned in a seat protected by a properly functioning, original, factory-installed Supplemental Restraint System that inflates on impact. The additional amount payable is the lesser of: (1) \$25,000; or (2) 10% of the Insured Person's Principal Sum.

Verification of the actual use of the seat belt, at the time of the accident, and that the Supplemental Restraint System inflated properly upon impact must be a part of an official report of the accident or be certified, in writing, by the investigating officer(s).

Security Evacuation Benefit

If, as a result of an Occurrence that takes place during an Insured Person's Period of Coverage and while traveling outside his or her Home Country, an Insured Person requires a Security Evacuation, the Company will pay benefits to Transport the Insured Person to the Nearest Place of Safety. The determination that an Insured Person requires a Security Evacuation must be made by a Designated Security Consultant and all arrangements must be made by the insurance Travel Assists Company.

Benefits will be payable for eligible expenses up to a Maximum of \$100,000. Eligible expenses are for Transportation and Related Costs to the Nearest Place of Safety necessary to ensure the Insured Person's safety and well-being as determined by the Designated Security Consultant. Security Evacuation benefits are payable only once per Occurrence.

Occurrence means any of the following situations in which an Insured Person finds him or herself while covered by the Policy:

- expulsion from a Host Country or being declared persona non-grata on the written authority of the recognized government of a Host Country;
- political or military events involving a Host Country, if the Appropriate Authorities issue an Advisory stating that citizens of the Insured Person's Home Country or citizens of the Host Country should leave the Host Country;
- Natural Disaster within 7 days of an event ;
- Verified Physical Attack or a Verified Threat of Physical Attack from a third party;
- the Insured Person had been deemed kidnapped or a Missing Person by local or international authorities and, when found, his or her safety and/or well-being are in question within 7 days of his or her being found.

Out of Country Medical Expense Benefit

If, while traveling outside of his or her country of permanent residence, during the course of any Trip of less than 180 days and While on the Business of the Policyholder, an Insured Person suffers an Injury or contracts an Sickness that requires him or her to be treated by a Physician, the Company will pay, the Usual and Customary Charges incurred for Covered Medical Services received due to that Injury or Sickness up to \$250,000 per Insured Person for that Injury or Sickness. This benefit is payable for such charges incurred outside the Insured Person's country of permanent residence and within 52 weeks after the date of the accident causing the Injury or the onset of the Sickness.

Covered Medical Service(s) - as used in this Rider, means any of the following services, if the service is Medically Necessary:

- Hospital semi-private room and board (or, when Medically Necessary, room and board in an intensive care or cardiac care unit); Hospital ancillary services (including, but not limited to, use of the operating room or emergency room); or use of an Ambulatory Medical Center;
- services of a Physician or a registered nurse (R.N.);
- ambulance service to or from a Hospital;
- laboratory tests;
- radiological procedures;
- anesthetics and the administration of anesthetics;
- blood, blood products and artificial blood products, and the transfusion thereof; physical therapy and occupational therapy;
- rental of Durable Medical Equipment;
- artificial limbs, artificial eyes or other prosthetic appliances; or
- medicines or drugs administered by a Physician or that can be obtained only with a Physician's written prescription

What is Not Covered?

The BTA program does not cover any loss (fatal or non-fatal), caused by or resulting from:

- Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury or auto-eroticism.
- Travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, whether as a Passenger, pilot, operator or crew member, unless specifically provided by this Policy.
- Declared or undeclared war, or any act of declared or undeclared war unless specifically provided by this Policy
- Sickness, or disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from any of these.
- Infections of any kind regardless of how contracted, except bacterial infections that are directly caused 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
- 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.)
- The Insured Person being under the influence of intoxicants while operating any vehicle or means of transportation or conveyance.
- The medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from the treatment.
- Stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.

How Do I Assign a Beneficiary?

If you die and are eligible to receive a benefit under the BTA program, benefits will be paid to your designated beneficiary(ies). Your beneficiary(ies) under the BTA program are the same as those you named under the LLNS life insurance program. If you would like to designate a different beneficiary(ies) from those listed under the LLNS life insurance program, you must submit a written beneficiary change request to the LLNL Benefits Office.

If you have not designated a beneficiary under either program, your BTA program benefits will be paid in this order:

- First, to your spouse or domestic partner (as defined under federal law); then to
- Your children; then to
- Your parents; then to
- Your estate.

How Do I Submit a Claim?

If you suffer a loss or death that is eligible for BTA benefits, you must notify the LLNL Benefits Office. The policy number is listed below. Claim forms and assistance are available by calling AIG (800) 551-0824.

Submit claims to:

AIG, Accident and Health Claims Division,
P.O. Box 25987,
Shawnee Mission, KS 66225

Policy Number- GTP 0009146344