

## JATC Apprentice/Journeyman/Instructor Insurance Plan – Benefit Summary

The Accident Insurance Plan provides insurance for Apprentices and Trainees while participating, including direct travel to and from, apprenticeship and training classes and meetings sponsored by the participating Local.

\$25,000      Accident Expense Benefit  
(after a deductible of \$25 per accident)

### Accidental Death & Dismemberment

\$25,000      Death Benefit

\$25,000      for the loss of either two hands, two feet, two eyes, or any combination of any two of the above.

\$12,500      for the loss of either one hand, one foot, or one eye

### Optional Benefit:

\$200 or \$400      Maximum Weekly Disability Benefit  
(Maximum number of weeks: 52 weeks)

If you have an accident that results in medical expenses, contact your Local's administrative office. You will have to complete a claim form and submit with itemized medical bills to:

Mass Benefits Consultants, Inc.  
P.O. Box 828  
Annandale, VA 22003-0828

Claim payments come directly from AIG (the insurance company) and generally take about 4 weeks from the time the completed claim is received.

You can call Mass Benefits with any benefit or claim questions. Our toll-free phone number is 1-800-221-3083. Our office hours are 8:30 am to 4:30 pm eastern time, Monday – Friday.

**ENROLLMENT FORM**  
(to be completed by the participating Local)

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Local Name and #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

We wish to participate in the Apprenticeship & Training Committee Accident Insurance Plan. Coverage will begin the date the application and payment is received.

Coverage may be purchased for each of the following categories (all eligible participants in each selected category must be covered):

<u>Category</u>	<u>Number of Participants</u>	
Apprentices	_____	
Trainees	_____	
Instructors	_____	
Upgrading Journeymen	_____	
<b>TOTAL:</b>	_____	<b>\$</b> _____

**Annual Cost is \$5.00 per participant without Weekly Accident Indemnity.**

**Annual Cost is \$10.00 per participant - \$200.00 Weekly Accident Indemnity**

**Annual Cost is \$20.00 per participant - \$400.00 Weekly Accident Indemnity**

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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Print Name and Title \_\_\_\_\_

For more than 35 years, the AIG Life Companies (U.S.) have offered a comprehensive and competitive line of Accident and Health insurance products and services.

AIG Life has earned the highest possible ratings from three principal rating companies:

AAA (Extremely Strong) by Standard & Poor's  
*(Insurer financial strength and claims paying abilities)*

Aaa (Exceptional) by Moody's  
*(Financial strength)*

A++ (Superior) by A.M. Best  
*(Operating performance and financial strength)*

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Although every attempt has been made to verify the accuracy of the information contained on this website, errors and omissions may occur. You will receive a certificate of insurance describing the exact coverage and benefits purchased. This website explains the general purposes of the insurance described, but in no way changes or affects the insurance afforded under the group insurance policy actually issued. All coverage is subject to the actual policy conditions and exclusions.