

New Jersey State Policemen's Benevolent Association Presented by Abby's Consulting Services LLC



September 05, 2024 Valid 90 days from the quote

Customer-centric benefits solutions

Wellfleet Workplace is a Berkshire Hathaway company focused on delivering customizable, digitally-forward benefit solutions through a suite of member benefit products. As a relationship-focused company, we make working with us easy by:

- Creating custom plan designs with innovative products at competitive rates.
- Not being encumbered by legacy systems or ways of doing business.
- Partnering clients with a dedicated Client Manager.
- Implementing best practices that drive member engagement.
- Offering flexible billing options, including list bill, self-bill & direct bill.

A little bit more about us

Berkshire Hathaway roots

Wellfleet is proud to be a Berkshire Hathaway company. As their primary Accident and Health carrier, we are backed by A++ financial strength ratings—the highest possible—from AM Best*. These superior ratings indicate we meet our financial obligations and are here for the long run. You can also count on our commitment to:

- Doing business with uncompromising integrity,
- Maintaining a steady 100-year outlook &
- Taking care of our customers.

Wellfleet's divisions

Wellfleet is focused on protecting people against risk throughout every stage of life from birth to college, the workplace and beyond. To meet those needs, we have four unique markets, including:

- Wellfleet Workplace Member benefit solutions that complement core medical plans, including Accident, Critical Illness & Short Term Disability Income Insurance
- Wellfleet Student Insurance solutions for the educational market, including Student Health, Accident & Stop Loss
- Wellfleet Rx Exclusive pharmacy solution for the educational market
- Wellfleet Special Risk Participant Accident coverage, including International Medical, K-12 & Business Travel

A key pillar of our organization is **customer-centricity**. From 1993 - 2016, Wellfleet served as an industry-leading third-party administrator (TPA) of health insurance and self-funded medical insurance to educational markets and association groups. Having been a TPA for over 25 years is a testament to our understanding of all our customers, and our ability to deliver exceptional and expedient service.

^{*}For the latest ratings, visit ambest.com.

Wellfleet Workplace

At Wellfleet Workplace, we have an innovative spirit. You can see this in the unique industry solutions we've built, and our commitment to develop and enhance products that meet our customers' needs.

Unlike most insurance companies, we're not limited by antiquated systems or processes. Our end-to-end, high-quality and high-velocity insurance platform supports streamlined workflows from quote through policy administration. By digitizing the insurance lifecycle, clients enjoy operational efficiencies, simplified interactions and the smooth flow of sound data.

We also offer the flexibility to work with the benefit administration and/or enrollment platform of your choice. Our ability to seamlessly integrate with your technology partner drives the quick and accurate exchange of information, which translates for clients into error- and hassle-free billing, as well as time saved through decreased meetings and shortened timelines.

Wellfleet Workplace is committed to making member benefits simple. Our ability to deliver cutting-edge products, custom plan designs and affordable rates through a one-of-a-kind platform removes administrative headaches for you and provides members access to the financial protection they need.

Enrollment made simple

Wellfleet Workplace keeps enrollment simple by helping you meet your goals. We do this by taking a consultative approach to supporting member engagement. For example, we help drive understanding of and participation in our benefits through thoughtful strategies that include marketing support and creative benefits education. Our clients can select from several communications plans that meet the unique needs of their group, such as those tailored to remote members or multiple locations. Members receive clear, understandable messaging and educational materials that support the benefits decision-making process.

We also provide an assessment of the enrollment performance with recommendations for improvement and optimization. Additionally, we offer ongoing communications that reinforce the value of our benefits, including wellness and "how-to-file a claim" reminder emails.

Recommended best practices

Wellfleet Workplace suggests several best practices that can support member engagement, including:

- Encouraging workplace product enrollment at the same time as the core benefits
- Providing accessible & understandable communications materials
- Suggesting placement of workplace products immediately after medical offerings
- Requesting associations have members make an active (yes/no) decision for workplace benefits
- Holding a review of the enrollment performance with recommendations for improvement & optimization

For clients, our enrollment translates into less time spent on benefits, more time for member development and stronger member retention. For members, it equals access to and increased understanding of the offered benefits, support in building financial protection and greater workplace satisfaction.

ACCIDENT INSURANCE

• Situs State: New Jersey

• Proposed Effective Date: January 1, 2025

Eligibility

• Eligible members: 10,000

- Benefit-eligible members who are:
 - o Active Members of the Association
 - o Actively at work.
 - o Actively at work minimum of 20.00 hours worked per week
 - Member eligibility: Ages 16+
- Member must be covered in order to carry Spouse and Child(ren) coverage.
 - Spouse includes domestic partners where allowed by state and employer
 - o Spouse eligibility ages: 16+
 - o Child(ren) eligibility ages: Birth to 26

Underwriting

Acc Plan 1

Member Class: All Eligible Employees

Member & Dependents:

Guaranteed issue (GI)

Coverage type:

24-Hour

Participation:

• Minimum member participation requirement: 5 Employee Applications

Acc Plan 2

Member Class: All Eligible Employees

Member & Dependents:

Guaranteed issue (GI)

Coverage type:

24-Hour

Participation:

Minimum member participation requirement: 5 Employee Applications

Schedule of Benefits & Features

- Unlimited lifetime maximum benefit with no age-related benefit reductions
- Benefits paid based on the schedule of benefits provided for each covered accident
- Waiver of Premium: Premium is waived following a 60-day period of disability due to a covered accident for as long as the covered person remains disabled.
- Portability is included.

ACCIDENT PLAN BENEFITS	Acc Plan 1	Acc Plan 2
Emergency and Initial Accident Treatment Benefits		
Ambulance		
Ground	\$150.00	\$250.00
Air	\$1,000.00	\$1,250.00
Water	\$1,000.00	\$1,250.00
Emergency Room Treatment	\$150.00	\$200.00
Urgent Care	\$100.00	\$125.00
Major Diagnostic Imaging	\$150.00	\$200.00
X-ray	\$50.00	\$75.00
Hospital Benefits		
Hospital Admission	\$1,500.00	\$2,000.00
Hospital Confinement	\$200.00	\$300.00
Maximum per accident	365 days	365 days
Intensive Care Admission	\$2,000.00	\$3,000.00
ICU Confinement	\$400.00	\$600.00
Maximum per accident	365 days	365 days
Observation Unit	\$150.00	\$200.00
Specific Injury Benefit		
Fractures		
Closed/Non-Surgical Treatment		
Skull (except Bones of Face or Nose) Depressed	\$2,500.00	\$4,000.00
Hip, Thigh (Femur)	\$2,500.00	\$4,000.00
Vertebrae, Body of (excluding Vertebral Process)	\$2,500.00	\$4,000.00
Pelvis	\$2,500.00	\$4,000.00
Leg (Tibia and/or Fibula)	\$2,500.00	\$4,000.00
Upper Arm (Humerus)	\$2,000.00	\$3,000.00
Shoulder Blade	\$2,000.00	\$3,000.00
Collarbone	\$2,000.00	\$3,000.00
Upper Jaw, Maxilla (except Alveolar Process)	\$1,500.00	\$2,500.00

Lower Jaw, Mandible (except Alveolar Process)	\$1,500.00	\$2,500.00
Vertebral Process	\$1,000.00	\$1,600.00
Forearm (Ulna and/or Radius)	\$1,000.00	\$1,600.00
Hand, Wrist (except Fingers)	\$1,000.00	\$1,600.00
Кпеесар	\$1,000.00	\$1,600.00 \$1,600.00
Foot (except Toes)	\$1,000.00	
Ankle	\$1,000.00	\$1,600.00
Rib	\$250.00	\$300.00
Соссух	\$250.00	\$300.00
Finger, Toe	\$250.00	\$300.00
Enhancement for Open/Surgical Reduction	2X	2X
Chip Fractures	25%	25%
Dislocations		
Closed/Non-Surgical Treatment		
Hip	\$2,000.00	\$3,000.00
Knee (other than Kneecap)	\$1,500.00	\$2,250.00
Shoulder	\$1,500.00	\$2,250.00
Кпеесар	\$750.00	\$1,000.00
Ankle bone or bones of the foot	\$750.00	\$1,000.00
Elbow	\$750.00	\$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$300.00
Wrist	\$750.00	
Bone or bones of the hand	\$750.00	
Jawbone	\$750.00	
Collarbone	\$750.00	
One toe or finger	\$250.00	
Enhancement for Open/Surgical Reduction	2X	2X
Partial Dislocations	25%	25%
Lacerations		
No Repair	\$75.00	\$100.00
Repair - up to 2 inches	\$150.00	\$200.00
Repair - over 2 inches, up to 6 inches	\$300.00	\$400.00
Repair - over 6 inches	\$600.00	\$800.00
Burns		
2nd Degree Burns		
At least 1%, but less than 20% of skin surface	\$250.00	\$400.00
20% or greater of skin surface	\$750.00	\$1,000.00
3rd Degree Burns	,	, ,
Less than 5% of skin surface	\$750.00	\$1,000.00
At least 5%, but less than 20% of skin surface	\$3,000.00	\$4,000.00
20% or greater of skin surface	\$9,000.00	\$12,000.00
Skin Graft	72,230.00	+ ,300.03
Due to Burns (% of applicable Burn benefit)	25%	50%

Not due to Burns		
At least 1%, but less than 20% of skin surface	\$150.00	\$200.00
20% or greater of skin surface	\$300.00	\$400.00
Concussion and Other Brain Injuries	\$150.00	\$200.00
Dental Benefit	\$350.00	\$450.00
Eye Injury Benefit	\$200.00	\$250.00
Surgery Benefits		
Outpatient Surgery Benefit		
Facilities other than Physician Office or Emergency Room	\$300.00	\$450.00
Physician Office or Emergency Room	\$150.00	\$225.00
Internal Injuries Surgical Benefits		
Open Abdominal & Thoracic	\$1,000.00	\$1,500.00
Hernia	\$150.00	\$200.00
Exploratory without Repair	\$125.00	\$175.00
Tendon/Ligament/Rotator Cuff Surgical Benefit		
Single	\$550.00	\$700.00
Multiple	\$825.00	\$1,050.00
Exploratory without Repair	\$275.00	\$350.00
Torn Knee Cartilage Surgery Benefit		
Torn with Surgical Repair	\$475.00	\$600.00
Exploratory without Repair	\$150.00	\$225.00
Diagnosis only with no surgery or repair	\$75.00	\$100.00
Ruptured Disc with Surgical Repair	\$475.00	\$600.00
Anesthesia Benefit		
General Anesthesia	\$175.00	\$225.00
Epidural or Regional Anesthesia	\$75.00	\$100.00
Medical Benefits		
Blood, Plasma & Platelets Benefit	\$400.00	\$500.00
Prosthetic Device Benefit	·	
One only	\$600.00	\$700.00
Two or more	\$1,200.00	\$1,400.00
Appliances	\$125.00	\$200.00
Pain Management Benefit	\$75.00	\$100.00
Prescription Drug Benefit	\$20.00	\$25.00
Maximum number of payments	5	5
Follow-Up Care and Transportation Benefits		
Physician Office Visit	\$75.00	\$100.00
Maximum number of visits	4	4
Post-Traumatic Stress Disorder Benefit	\$75.00	\$100.00
Maximum number of visits	8	8

Therapy Services Benefit (Occupational, Physical, Speech Therapy)	\$30.00	\$35.00
Maximum number of visits	12	12
Chiropractor and Alternate Therapy	\$60.00	\$70.00
Maximum number of visits	8	8
Rehabilitation Unit Confinement	\$150.00	\$175.00
Maximum number of days	90	90
Home Health Care	\$75.00	\$100.00
Maximum number of visits	30	30
Skilled Nursing Facility	\$275.00	\$300.00
Maximum number of visits	30	30
Private Duty Nursing	\$100.00	\$125.00
Maximum number of visits	6	6
Residence/Vehicle Modification Benefit	\$2,500.00	\$3,500.00
Transportation (minimum of 100 miles from residence, up to 3 round trips)	\$.30/mile	\$.60/mile
Lodging	\$150.00	\$200.00
Maximum number of days	30	30
Accidental Death Benefits		
Accidental Death		
Employee	\$75,000.00	\$100,000.00
Spouse	\$37,500.00	\$50,000.00
Child(ren)	\$37,500.00	\$50,000.00
Common Carrier Accidental Death		
Employee	\$150,000.00	\$200,000.00
Spouse	\$75,000.00	\$100,000.00
Child(ren)	\$75,000.00	\$100,000.00
Organ Donor Benefit	\$5,000.00	\$5,000.00
Accidental Dismemberment Benefits		
Dismemberment		
Loss of Both Hands, or Loss of Both Feet, or Loss of One Hand and One Foot	\$25,000.00	\$40,000.00
Loss of One Hand or Loss of One Foot	\$12,500.00	\$20,000.00
Partial Dismemberment	, , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
Loss of One or More Fingers or Toes	\$1,500.00	\$2,000.00
Partial Amputation of Finger or Toe	\$1,500.00	\$2,000.00
Catastrophic Benefits		
Catastrophic Loss		
Loss of Sight in both eyes or Hearing in both ears	\$25,000.00	\$20,000.00
Coma	\$15,000.00	\$20,000.00
Paralysis		
Paraplegia	\$12,500.00	\$15,000.00

Quadriplegia	\$25,000.00	\$30,000.00
Riders		
Health Screening Benefit Rider:	\$50.00	\$50.00
Number of payments per year, per covered person.	1	1
Organized Athletic Activity Rider (Enhancement %)	25%	25%
Maximum benefit per accident	\$1,500.00	\$1,500.00

Future Enrollment

Annual open enrollment

- Newly eligible member and late entrants may enroll on a guaranteed issue (GI) basis.
- When multiple plans are offered, coverage changes are allowed for covered members who are already enrolled and want to change plan options or add dependent coverage.

Perpetual enrollment

- Newly eligible members may enroll as they become eligible.
- Late entrants may only apply at annual enrollment.
- Coverage increases and the adding of dependents is only allowed during annual enrollment or within 30 days
 of a qualifying life event.

Rates

Rating Information		
Contribution type:	Voluntary	
Employer Contribution level:	\$0.00	
Rate guarantee:	2 Year(s)	

Monthly Rates

	Member Only	Member & Spouse	Member & Child(ren)	Family
Acc Plan 1	\$11.99	\$20.61	\$22.25	\$30.86

Monthly Rates

	Member Only	Member & Spouse	Member & Child(ren)	Family
Acc Plan 2	\$15.99	\$27.43	\$29.49	\$40.92

Underwritten by Wellfleet Insurance Company

Renewal

Wellfleet will review the plan following the rate guarantee period to assess the claims activity, participation and persistency.

- Favorable plan results may be given a "no change notice" or an enhancement to their plan at the current rates.
- If Wellfleet feels a plan needs improvement, they will consult on ways to improve the situation or receive rate action consideration.

EXCLUSIONS*

In addition to any benefit-specific exclusion, benefits will not be paid for any loss which, directly or indirectly, in whole or in part, is caused by or results from any of the following unless coverage is specifically provided for by name in this Certificate:

- 1. Intentionally self-inflicted injury, suicide, or any attempt or threat while sane or insane;
- 2. Participating in war or any act of war whether declared or undeclared;
- 3. Commission or attempt to commit a felony;
- 4. Commission of or active participation in a riot, insurrection, or terrorist activity;
- 5. Engaging in an illegal activity or occupation;
- 6. Flight in, boarding, or alighting from an aircraft or any craft designed to fly above the earth's surface, including any travel beyond the earth's atmosphere except a fare-paying passenger on a regularly scheduled commercial or charter airline;
- 7. Practicing for or participating in any semi-professional or professional competitive athletic contest, including officiating or coaching, for which the covered person receives any compensation or remuneration;
- 8. Sickness, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food;
- 9. Voluntary ingestion or inhalation of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a physician and taken in accordance with the prescribed dosage;
- 10. Operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant including any prescribed drug for which the covered person has been provided a written warning against operating a vehicle while taking it. Under the influence of alcohol, for purposes of this exclusion, means intoxicated, as defined by the law of the State in which the covered accident occurred;
- 11. Experimental or investigational procedures;
- 12. Care that is not recommended and approved by a physician.

^{*} May vary by state. Policy, Certificate and Riders should be reviewed for complete benefits, exclusions and limitations.

PROPOSAL AGREEMENT FOR New Jersey State Policemen's Benevolent Association

Complete/Update as Necessary

Enrollment Assumptions			
Enrollment Method:	Active		
Enrollment Strategy:			
Enrollment Partner:			
Enrollment System:	-		
Enrollment Timeline:	Start Date:		
	End Date:		
Product Acceptance		Please indicate plan option	ons chosen
Accident: MP0000847554	Plan Option(s):		
Association Agreement	t		
The association agrees to ma	ake Wellfleet Workplace	insurance plans available to all eliginsurance plans and remit in a time	
X	1		1
SIGNATURE OF OI	FFICER	TITLE	DATE
Droducar Agraamant			
Producer Agreement			
	-	ng all eligible members are present	•
•	association with question	ns related to Wellfleet Workplace's	insurance plan and
administrative practices.			
		ng an active producer license in the	group's situs state and
being appointed with Wellfle	eet in that state.		
X	1		
SIGNATURE OF PRO	I	 DATF	
		UALI	

This agreement is valid for a period of 60 calendar days. Applications will not be accepted under this agreement until written acceptance of this agreement and the Master Application are received by Wellfleet Workplace.