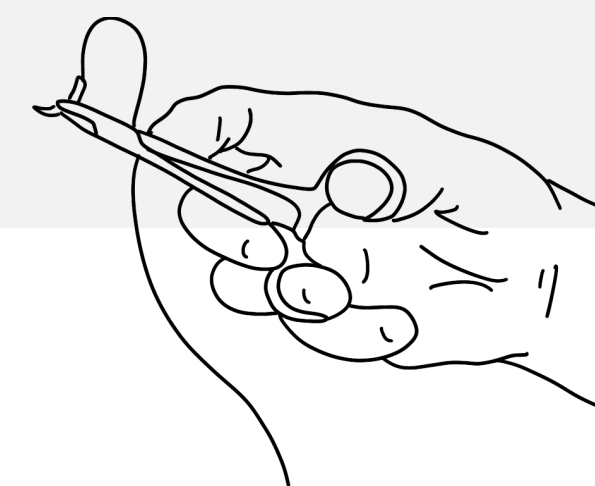


# Coverage Summary

BICYCLE COLORADO

# Spot



Forget the insurance language, here's a summary of your coverage, which we hope answers your questions!

## Eligibility

Enrolled members of Bicycle Colorado's voluntary annual program.

## Covered Activities

Bicycle-related activities, including e-bikes up to 750 watts anywhere in the US. Activities include but are not limited to: commuting, group rides, training, gran fondos, as well as events sponsored and supervised by Bicycle Colorado. Coverage does not apply to any other sponsored races.

## Policy Details

### ACCIDENT

A sudden unexpected and unintended event, independent of sickness and all other causes.

### FIRST EXPENSES

Must be incurred within 90 days from the date of the accident.

### TREATMENT TIME FRAME

Benefits paid up to 52 weeks from the date of the accident.

### ACCIDENTAL DEATH & DISMEMBERMENT (AD&D):

Coverage is for death or severe dismemberment as the result of an accident while participating in a covered activity

### HEART OR CIRCULATORY MALFUNCTION:

Coverage is for injury or death that is the result of heart failure while participating in a covered activity. No coverage for pre-existing heart conditions.

## Policy Benefits

COVERAGE	AMOUNT
Accident Medical Expense	\$25,000
Accidental Death & Dismemberment	\$5,000
Heart or Circulatory Malfunction	\$5,000

## Policy Exclusions

We will not pay benefits for a loss due to or expenses incurred for:

1. Intentionally self-inflicted injury, suicide while sane.
2. Injury caused by, attributable to, or resulting from the Insured's Intoxication.
3. Injury caused by, attributable to, or resulting from the Insured's use of a Controlled Substance unless administered on the advice of a Physician and taking the prescribed dosage.
4. Operating a motor vehicle under the influence of a Controlled Substance unless administered on the advice of a Physician and taking the prescribed dosage.
5. Operating a motor vehicle while having a blood alcohol level that equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where the Injury occurred.
6. Commitment of or an attempt to commit a felony, or engagement in an illegal activity.
7. An act of declared or undeclared war.
8. Active duty service in any Armed Forces.

## Policy Exclusions (continued)

9. Operating, learning to operate, or serving as a pilot or crew member of any aircraft unless specified in the Insured Risk section of this policy.

10. Injuries associated with activities or travel outside the United States.

11. Sickness, disease, regardless of how contracted. This does not exclude bacterial infection that is the natural and foreseeable result of an Injury or accidental food poisoning.

12. Orthodontic braces or appliances.

13. Any loss for which benefits are paid under state or federal worker's compensation, employers' liability, or occupational disease law.

14. A charge which is in excess of the Reasonable Allowable Expense.

15. Eyeglasses, contact lenses, hearing aids, or related examinations or prescriptions.

16. Treatment of a hernia.

Coverage is underwritten and claims are serviced by Mutual of Omaha Insurance Company. Bicycle Colorado is the policyholder for Accident Insurance for enrolled members of the Bicycle Colorado's voluntary annual program participating in bicycle (including e-bikes up to 750 watts) related activities, including but not limited to: commuting, group rides, training, gran fondos, as well as events sponsored and supervised by the Policyholder. Coverage does not apply to any other sponsored races. Coverage is subject to the terms, conditions, and exclusions of the policy.