



# ACCIDENTS HAPPEN.

Wouldn't you like extra protection for your family?

AccidentAdvance<sup>SM</sup>  
accident insurance

Underwritten by **Transamerica Life Insurance Company**, Cedar Rapids, Iowa.

### Now there's help if you suffer an accident.

Accidents are a part of everyday life, but are you prepared for the added financial burden? If you have a serious accident, you'll want extra cash to cover your increased expenses. Accident insurance pays benefits you can use for medical bills and other out-of-pocket expenses – or for any other purpose, including paying your mortgage or other bills. Your medical coverage may not take care of all of the added expenses you'll have after an accident.

### Extended physical therapy benefits, emergency room treatment, and more.

Did you know that 29.5 million visits to the emergency room in a given year will be because of accidents?<sup>1</sup> You'll want your family protected. This policy helps provide protection for you and your insured family every day of the year for covered accidents. Pays benefits for:

- Accident only emergency benefit, including X-rays and physician care received within 96 hours of an accident
- Accident only follow-up visits and physical therapy benefit, which could be important for recovery
- Initial accident only hospitalization benefit, including ambulance and intensive care

These benefits are paid directly to you, not to your doctor or hospital. You can use this money for anything you need. The extra cash can really help you and your family during a difficult time.

### Help protect yourself, your spouse, and your eligible dependents.

Issue ages for employees and spouses are 18 through 64. Eligible children can have coverage through age 25.

Help offset your major medical deductible

Spouse and Children Coverage Available

Convenient Payroll Deduction

Guarantee Issue Coverage

Competitively Priced Premiums

You Can Keep Coverage If You Change Jobs or Retire

Up to date information regarding our compensation practices can be found in the Disclosures section of our website at: [www.tebcs.com](http://www.tebcs.com).

<sup>1</sup> Centers for Disease Control and Prevention, National Center for Health Statistics, [cdc.gov/nchs/fastats/acc-inj.htm](http://cdc.gov/nchs/fastats/acc-inj.htm).

This is a brief summary of AccidentAdvance, Accident Insurance. Policy form series CPACC100 and CCACC100.

Forms and form numbers may vary, coverage available where approved. Limitations and Exclusions apply. Refer to the policy, certificate and riders for complete details.



# PRODUCT DETAILS

Plan 1  
24 Hour

Module 1 Accident Emergency Treatment		10.00 Units	
<b>Accident Emergency Treatment Benefit</b> For physician treatment and X-rays in a hospital or doctor's office within 96 hours of the accident.		<b>\$250</b>	
<b>Major Diagnostic Examination Benefit</b> For one CT Scan, MRI, or EEG completed within 90 days of the accident.		<b>\$400</b>	
<b>Dislocation Benefit</b> Payable for joint dislocation reduced under general anesthesia. Dislocation reduced without general anesthesia paid at 25% of the joint's benefit amount. Multiple reduced dislocations are paid at 1 1/2 times the highest benefit amount. No other amount will be paid under this benefit.	<b>Dislocated Joint</b>	<b>Reduction</b>	
		<b>Open</b>	<b>Closed</b>
	Hip	<b>\$8,000</b>	<b>\$2,700</b>
	Knee or Shoulder	<b>\$2,700</b>	<b>\$1,100</b>
	Collar Bone	<b>\$4,300</b>	<b>\$800</b>
	Ankle or Foot (except toes)	<b>\$2,700</b>	<b>\$800</b>
	Lower Jaw	<b>\$2,700</b>	<b>\$1,400</b>
	Wrist or Elbow	<b>\$2,200</b>	<b>\$1,100</b>
Toe or Finger	<b>\$600</b>	<b>\$300</b>	
<b>Fractures Benefit</b> For repair of a fracture sustained in an accident. A chip fracture is paid at 10% of the fracture's benefit amount. Multiple repaired fractures are paid at 1 1/2 times the highest benefit amount. No other amount will be paid under this benefit.	<b>Fractured Bone</b>	<b>Reduction</b>	
		<b>Open</b>	<b>Closed</b>
	Coccyx	<b>\$1,400</b>	<b>\$700</b>
	Hand (except fingers), Foot (except toes/heel), Wrist, Shoulder Blade, Forearm, Ankle, Elbow, Kneecap, Sternum or Lower Jaw	<b>\$3,400</b>	<b>\$1,700</b>
	Hip	<b>\$10,000</b>	<b>\$3,400</b>
	Leg	<b>\$4,200</b>	<b>\$3,400</b>
	Nose, Heel or Fingers	<b>\$3,400</b>	<b>\$700</b>
	Ribs	<b>\$6,700</b>	<b>\$700</b>
	Skull	<b>\$5,400</b>	<b>\$2,000</b>
	Toes	<b>\$1,400</b>	<b>\$700</b>
	Upper Jaw, Upper Arm or Face (except Nose), Collar Bone	<b>\$4,000</b>	<b>\$1,700</b>
	Vertebrae, Pelvis	<b>\$1,700</b>	<b>\$1,700</b>
Vertebral Processes	<b>\$6,700</b>	<b>\$1,000</b>	

**For both dislocations and fractures, 1 1/2 times the highest dislocation or fracture benefit amount is paid. No other dislocation or fracture benefit is paid.**

## PRODUCT DETAILS

Module 2 Follow-Up Visits and Physical Therapy		7.50 Units
<b>Accident Follow-Up Treatment Benefit</b> Maximum of three (3) follow-up visits per accident. Original treatment must have been within 96 hours of the accident. Treatment must be provided by a physician in their office or in a hospital on an outpatient basis; begin within 30 days of, and be completed within the 6 months following the later of: the accident; discharge from the hospital from a covered confinement; or discharge from an extended care facility.		\$75
<b>Physical Therapy Benefit</b> For treatments by a licensed physical therapist under a physician's advice that begin within 120 days of the accident and are completed within 1 year of the accident, not to exceed 10 treatments per accident.		\$75
Module 3 Initial Accident Hospitalization		3.50 Units
<b>Initial Accident Hospitalization Benefit</b> Payable once for the first hospital admission due to an accident. Benefit is payable once for the first Intensive Care Unit admission due to an accident. The ICU benefit is paid even if admitted to the hospital initially and then transferred to ICU later during the same hospitalization.		\$1,050
<b>Ambulance Benefit</b> For transportation to the nearest hospital for treatment within 96 hours of the accident by a licensed ambulance service.	Ground Ambulance	\$210
	Air Ambulance	\$1,050
Additional Riders		
Accident Hospital and ICU Income Rider (Form No. CRHICU00)		8.00 Units
<b>Accident Hospital Income Benefit</b> For hospital confinement for treatment of injuries beginning within 30 days of the accident. Benefit is payable for up to 365 days per accident.		\$200
<b>Accident ICU Benefit</b> For ICU confinement while the person is receiving the hospital income benefit. Benefit is payable for up to 15 days per accident.		\$600

# PRODUCT DETAILS

Rates					Ver 3.0.NC.0.00
Coverage	Rate Frequency	Member	Member and Child(ren)	Member and Spouse	Member, Spouse and Child(ren)
Plan I 24 Hour	Weekly	\$3.40	\$4.55	\$5.24	\$6.56

# LIMITATIONS AND EXCLUSIONS

We will not pay benefits for losses caused by or as a result of a covered person:

- Driving any taxi for wage, compensation or profit;
- Mountaineering, parachuting or hang gliding;
- Voluntarily taking, administering, absorbing or inhaling poison, gas or fumes;
- Alcoholism or drug addiction;
- Participating in any sport or sporting activity for wage, compensation, profit, or racing any type of vehicle in an organized event;
- Traveling in or descending from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline (other than a charter airline) on a regularly scheduled passenger trip;
- War, or any act of war, whether declared or undeclared;
- Participating in any activity or event, including the operation of a vehicle, while intoxicated or under the influence according to the laws of the jurisdiction in which the accident occurred;
- Participating in a riot, civil commotion, civil disobedience or unlawful assembly;
- Committing, attempting to commit, or taking part in a felony or assault or engaging in an illegal occupation;
- Intentionally self-inflicting bodily injury or attempting suicide while sane or insane;
- Any loss incurred while on active duty status in the armed forces. If you notify us of such active duty, we will refund any premiums paid for any period for which no coverage is provided as a result of this exception.

## Termination of Insurance

Subject to the Portability Option, insurance coverage on the member will end on the earliest of:

- the date of his or her death;
- the date he or she ceases to be eligible for coverage;
- the last date for which premium payment has been made to us, subject to the grace period;
- the date he or she terminates membership;
- the date the group master policy terminates;
- the date he or she sends us a written notice to cancel coverage.

The insurance coverage on a dependent will cease on the earliest of:

- the date of the member's death;
- the date the member's coverage terminates;
- the last date for which premium payment has been made to us, subject to the grace period;
- the date the dependent no longer meets the definition of dependent;
- the date the certificate is modified so as to exclude dependent coverage;
- the date the member sends us a written notice to cancel coverage on a dependent.

## Extension of Benefits

Whenever termination of coverage under this section occurs due to termination of membership, such termination will be without prejudice to:

- any hospital confinement which began while coverage was in force; or
- any covered treatment or service for which benefits would be provided and which began while coverage was in force; provided, however that the covered person is and continues to be hospital confined or receiving treatment.

Such Extension of Benefits will continue for up to the earlier of:

- 30 days; or
- the date on which the covered person is no longer hospitalized or receiving treatment.

## Portability Option

If a member loses eligibility for this insurance for any reason other than nonpayment of premiums, coverage can be continued by paying the premiums directly to us within 31 days after termination. We will bill the member directly once we receive notification to continue coverage.

## LIMITATIONS AND EXCLUSIONS

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### **Termination of the Group Master Policy**

The policyholder may end the policy on any premium due date by submitting a 60-day advance written notice. A group will not be continued if it drops below the minimum required participation. The group master policy will be terminated and coverage of all remaining insureds will end, subject to the Portability Option.

### **Other Insurance with Us**

An individual can only have one accident policy or certificate with us. An individual can only have one disability income policy, certificate, or rider with us. If a person already has accident insurance with us, such person is not eligible to apply for this coverage. If a person already has disability income insurance with us, such person is not eligible to apply for the disability income riders.