



# If they need you, you need a Champion

Good things in life happen every day, and unfortunately, accidents happen too. You need a champion to help you defend and protect everything you value—your family, your goals, your dreams, your independence—in essence, your life.



ACCIDENT | CHAMPION

# ACCIDENT | CHAMPION



First Accident Benefit pays an additional \$100.



Sports Package pays25% higher benefits.

### No one plans on getting injured ... but just in case, we've got **you** covered.

You do everything you can to stay active and healthy, but accidents happen every day, including sports-related accidents. An injury that hurts an arm or a leg can hurt your finances too. That's where Accident Champion can help.

Accident Champion **pays cash benefits directly to you** or anyone you choose regardless of any other coverage you have. And Accident Champion pays extra benefits for injuries resulting from participating in organized sports. Let Accident Champion help take care of your bills so you can take care of yourself and your family.

### Accident Champion Benefits always include:

### **First Accident**

**Pays you \$100 soon after you report your first claim for covered benefits!** If you get injured, we can begin processing your claim as soon as you submit it, so you can get cash benefits in a timely manner.

### **Sports Package**

Your benefits **increase 25%**, up to \$1,000 per person per year, for injuries resulting from participating in organized sports! Playing sports can lead to injuries and unwelcome expenses. We'll increase your benefits to help pay those expenses.

### **Rehabilitation Package**

### We pay cash benefits for Admission, Daily Confinement and Recovery!

Whether you are released to a Rehabilitation Center following a hospital stay or you recover at home, we pay a daily recovery benefit to help with your transition.

### Here's How Accident Champion Benefits Can Work:

Accident Champion helps pay for the unexpected costs of an accidental injury by providing benefits for initial care, injuries, treatment, facility care and follow-up care.

If your child gets injured during soccer practice and breaks his leg, here's how benefits may stack up:

First Accident	\$	100
Ambulance	\$	200
ER Visit	\$	125
X-Ray	\$	40
Fracture	\$	500
Crutches	\$	100
Physical Therapy	\$	500
Follow-up Visits	\$	150
Subtotal	\$	1,715
PLUS Sports Package	\$	429
Total Payment	\$	2,144
The Sports Package increases the total benefit payment by <b>25%</b>	BENE INCRI <b>\$4</b>	

This example is for illustrative purposes only and should not be compared to an actual claim. Whether an injury is covered depends on the circumstances of the loss. Refer to the certificate of insurance or policy for terms and conditions.

# Schedule of Benefits 24-hour coverage

# **DIAMOND** PLAN

### **Initial Care**

Ambulance (Ground/Air)S	\$200/\$2,000
Emergency Room	\$125
Initial Doctor's Office Visit	\$50
Urgent Care	\$100
Emergency Dental	
(Crown/Extraction)	\$400/\$100
Hospital and Rehabilitation	
Hospital Admission	\$1,250
ICU Admission	\$2,500
Rehabilitation Admission	\$1,250
Hospital Confinement	
Per day, up to 365 days	\$250
ICU Confinement	¢500
Per day, up to 30 days	\$500
Rehabilitation Confinement Per day, up to 30 days	\$150
Recovery	<b>\$100</b>
Per day, up to seven days	\$100
Follow up Core 9 Treatment	
Follow-up Care & Treatment Abdominal or Thoracic Surgery	\$1,500
Appliances	\$1,300
Blood, Plasma, Platelets	\$100
Chiropractic Care	\$300
Per visit, up to three visits	\$25
Concussion	\$100
Follow-up Treatment	
Per visit, up to three visits	\$50
Lodging	
Per night, up to 30 nights	\$150
Major Diagnostic Exam	¢200
(CT, MRI, etc.)	\$200 \$2,500
Organ Loss	\$2,500
Outpatient Surgery Facility	φ25
Physical Therapy Per visit, up to 10 visits	\$50
Prosthetics	\$1,500
Tendon, Ligament, Rotator Cuff Surge	
Transportation	<u> </u>
For treatment and confinement in a hospi	tal 100
miles or more away; per trip, up to three tr	
X-ray	\$40



### Injuries

Burns 2nd/3rd Degree	\$1,000-\$10,000
Coma	\$12,500
Dislocations Ankle, Foot, Hip, Knee Finger, Toe All other	\$1,000 \$200 \$500
Eye	\$300
Fractures Skull, Hip, Thigh, Body of Vertebrae Finger, Toe All other	\$1,000 \$200 \$500
Herniated Disc Surgery	\$750
Knee Cartilage (Torn) Surgery	\$750
Lacerations	\$30-\$500
Loss of Hands, Feet or Sight	up to \$20,000
Loss of Fingers or Toes	up to \$2,000

#### **Additional Benefits**

First Accident Once per policy	\$100		
Accidental Death Employee & Spouse Child	\$20,000 \$4,000		
Catastrophic Accident Prior to Age 70 Employee & Spouse Child On or after Age 70 Family Care For each child in a child care center:	\$25,000 \$12,500 50%		
Per day, up to 30 days	\$25		
<b>Sports Package Benefits are 25% higher</b> when accident is due to organized sports. Up to \$1,000 per person per year			
Wellness Per person, once per year; 90 day waiting period	\$50		
Weekly Premium			

Employee	\$ 4.80
Employee + Spouse	\$ 7.54
Employee + Child(ren)	\$ 7.54
Family	\$10.34

# How does ACCIDENT CHAMPION help?

You do everything you can to keep your family safe, but accidents happen, and when they do, it's good to know we've got you covered. Let Accident Champion help take care of your bills, so you can take care of your family.

### **Features**

### **Date of Application Coverage**

Coverage becomes effective as soon as your application is signed, you have authorized payment and the Initial Eligibility requirements are met.

### **Guaranteed Issue**

No medical history is required for coverage to be issued.

### **Guaranteed Renewable**

Your coverage cannot be cancelled as long as your premiums are paid as due.

### **Fully Portable**

You can keep your coverage even if you change jobs or retire.

### **HSA Compatible**

Accident Benefits Summary		
Name:		
Type of Coverage	Payroll Deduction	
Employee		
□ Employee + Spouse		
Employee + Child(ren)		
Family	\$	

This is a supplement to health insurance and is not a substitute for Major Medical or other minimal essential coverage.

This document is a brief description of Certificate Form No. C14059R or Policy 14185. Refer to your certificate of insurance or policy for specific details on benefits, exclusions and limitations that may vary by state.



Combined Insurance Company of America Chicago, Illinois

# **Initial Eligibility**

### Employee

- Actively employed working at least 17.5 hours per week
- Ages 18 and up

### Spouse

• Ages 18 and up

### Dependent children/grandchildren

- Ages 0 to 26
- No student status required
- Coverage will continue for incapacitated dependent children regardless of age.



### Facts

**About 39 million** emergency room visits each year are due to injuries.<sup>1</sup>

In 2019, **1 in 7 people** sought medical attention for injuries.<sup>2</sup>

**About 90%** of medically consulted injuries occur off the job.<sup>2</sup>

<sup>1</sup> www.cdc.gov/nchs/fastats, as of Jan. 2019

<sup>2</sup> National Safety Council, InjuryFacts.nsc.org, 2021

# **Exclusions & Limitations**

This is Accident-Only Insurance. No benefits will be paid for services rendered by a member of the Immediate Family of a Covered Person.

No benefits will be payable for sickness or infection including physical or mental condition that is not caused solely by or as a direct result of a Covered Accident.

No benefits will be paid for an injury that is caused by, contributed to, or occurs as a result of a covered person's:

- Being intoxicated, or under the influence of alcohol or any narcotic or other prescription drug unless administered on the advice of a Physician and taken according to the Physician's instructions (the term "intoxicated" means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction in which the accident occurred);
- Participating in an illegal activity or attempting to commit or actually committing a felony ("felony" is as defined by the law of the jurisdiction in which the activity takes place);
- Committing or attempting to commit suicide or intentionally injuring himself or herself;
- Having dental treatment, except for such care or treatment due to injury to sound natural teeth within twelve (12) months of the Covered Accident;
- Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary thereto; or
- Participation in any contest using any type of motorized vehicle.