

Assurity®

Accident Insurance





The hard truth about accidents? Injuries affect your health. Medical bills affect your wallet.

We can't always predict what amount will be covered by medical insurance and what expenses will be up to us. As inflation and rising deductibles stretch budgets thin, you can help protect yourself from extra debt, keep your savings intact, and stay on track with the purchases you really want to make.

Take care of your family and financial wellbeing with Assurity Accident Insurance, which pays cash benefits for expenses that may not be fully covered by major medical insurance.

You'll have the comfort of knowing there's extra protection in place – paying above and beyond your primary health insurance.

It's easy to think accidents won't happen to you. But the numbers say otherwise.

Every year,

1 in 5

Americans seek medical treatment for injuries. Here's where they occur the most:*



Home
35.9 Million



Auto
5.2 Million



Work
4.1 Million

Advantages

Accident Insurance plans come with features to make life easier.



Simple to get and use

- ✓ **Guaranteed issue** – no medical exams or tests to qualify
- ✓ **Claim benefits** paid directly to you



Affordable and flexible

- ✓ **3 plans** to match more budgets
- ✓ **Coverage options** for your family, yourself or just your kids.



Less than
\$1 a day

Get an affordable plan that fits into your budget –
it's easier than fitting in unexpected medical bills.

Assurity Accident Insurance Base Plan

24-hour coverage

Get coverage for your active **family** and all their activities, from sports to playtime, at home or the places you roam. **About \$24 a month**

Illustration based on a 35-year old

Assurity Accident Insurance Complete Plan

24-hour coverage

Get coverage for your **child** and the sports injuries, cuts, stitches, and many more accidents kids are prone to. **About \$11 a month**



Strengthen your coverage by purchasing optional protection:

- ☑ Get a monthly benefit if you become totally disabled as the result of a covered accident with the **Accident-Only Disability Income Rider**.
- ☑ Get a cash benefit if you or a covered family member receive preventive screening tests, exams or immunization services outside of a hospital with **Preventive Care Rider**.

Optional riders not available in all states.

How it Works



Choose
the plan that best
fits your needs
and budget



Submit
your claim if you or a
family member have
an covered accident



Get Cash
benefits paid
directly to you



Talk to your insurance professional

to see how Accident Insurance can offer extra financial protection against life's unpredictable accidents.

Pick Your Plan

Choose from three plans at different price points, along with valuable add-ons for extra protection. Cash benefits vary with each plan. You decide what fits you best:

Base

I want budget friendly

Advantage

Let's meet in the middle

Complete

Give me as much protection as I can get



If you, your child or a family member are hurt in a covered accident, we pay cash benefits (based on your plan) for related care and recovery, including:

- ☒ The Initial Care you turn to following an accident, whether that's a family physician, Urgent Care facility, an ambulance and an Emergency Department, or a Telehealth call.
- ☒ It can also include things like X-rays and other diagnostic tests, or tools for managing pain and mobility
- ☒ The Continued Care to help you heal, from follow-up visits to rehabilitative therapy, home health care and lodging costs.
- ☒ Critical Care for severe injuries, requiring time in an Intensive Care Unit, a hospital stay, or a prosthetic device, for example.
- ☒ Thoughtful care so you have one less thing to worry about: like paying for childcare and pet care following an accident or transportation to medical facilities.
- ☒ Built-in Accidental Death Rider pays additional benefits if your death is the result of an accident.

Accident Insurance Benefits

Plans offered – Base, Advantage, and Complete – automatically include the policy benefits and Accidental Death Rider at the listed benefit amounts. Each benefit is subject to specific conditions for payment as detailed in the policy. All treatment must be provided or prescribed by a physician unless otherwise noted. Maximum benefits per insured person are one per accident unless otherwise noted. Benefits are paid when an insured person receives treatment or services described below for an injury sustained in a covered accident.

Benefit	Base	Advantage	Complete
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Initial Care

Initial Accident Treatment One physician's office, urgent care or ER visit per accident	Physician's Office Urgent Care Facility Emergency Room	\$75 \$75 \$150	\$75 \$75 \$150	\$100 \$100 \$200
Telemedicine		\$45	\$45	\$60

Emergency Care

Ambulance Transport to or from hospital, once per accident	Ground or Water Air	\$300 \$1,500	\$300 \$1,500	\$400 \$2,000
Short-Stay Observation Unit Held in hospital, without admission, after ER treatment		\$50	\$75	\$100
Blood Products Blood, Plasma or Platelets - Processing or transfusion		\$300	\$450	\$600
X-Ray		\$45	\$45	\$60
Diagnostic Exam CT, CAT, DTI, EEG, MRA, MRI, PET or SPECT		\$150	\$150	\$200
Pain Management	Epidural injection or Nerve Ablation/Block Steroid Injection	\$100 \$50	\$150 \$75	\$200 \$100
Appliance Rented or purchased, such as crutches or wheelchair		\$75	\$75	\$100

Continued Care

Follow-Up Treatment Two per accident		\$50	\$75	\$100
Rehabilitative Therapy Physical, Occupational or Speech Therapy - Six per accident		\$30	\$45	\$60
Chiropractic or Acupuncture Three per accident		\$30	\$45	\$60
Home Health Care Six per accident		\$30	\$45	\$60

Benefit		Base	Advantage	Complete
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Continued Care *(Continued)*

Transportation For physician treatment 50+ miles from residence; up to three round trips per accident	Ground	\$100	\$150	\$200
	Air	\$300	\$450	\$600
Companion Lodging For companion accompanying an insured traveling 100+ miles from residence for treatment; up to 30 nights per accident		\$100	\$150	\$200
Residence or Vehicle Modification		\$1,000	\$1,500	\$2,000

Everyday Injury Care

Eye Injury	Blunt Trauma, Corneal Abrasion or Removal of a Foreign Object	\$50	\$75	\$100
	Surgery	\$200	\$300	\$400
Eye Injury Office Visit		\$50	\$75	\$100
Emergency Dental Natural tooth treatment provided by a dentist	Extraction	\$100	\$150	\$200
	Crown, Dentures, or Implants	\$250	\$375	\$500
Emergency Dental Office Visit		\$50	\$75	\$100
Laceration Amount payable varies by length of laceration	7.6 centimeters or more	\$200	\$300	\$400
	2.6 to 7.5 centimeters	\$100	\$150	\$200
	2.5 centimeters or less	\$50	\$75	\$100
	Not requiring stitches or glue	\$30	\$45	\$60
	Puncture wound	\$30	\$45	\$60
Burns Amount payable varies by degree of burn and percentage of body affected	3rd degree burns covering 35% or more of body	\$5,000	\$7,500	\$10,000
	3rd degree burns covering 15% to 34% of body	\$2,500	\$3,750	\$5,000
	3rd degree burns covering less than 15% of body	\$500	\$750	\$1,000
	2nd degree burns covering 35% or more of body	\$500	\$750	\$1,000
	2nd degree burns covering 15% to 34% of body	\$250	\$375	\$500
	2nd degree burns covering less than 15% of body	\$50	\$75	\$100
Burns – Skin Graft Percentage of burn benefit		50%	50%	50%
Poisoning		\$50	\$75	\$100

Benefit		Base	Advantage	Complete
Active Life Injury Care				
Fracture	Skull (depressed)	\$1,500	\$2,250	\$3,000
Amount payable varies based on affected bone and treatment type. Listed benefits are for non-surgical treatment; surgical treatment benefit is double. Chip fractures pay 25% on the non-surgical benefit.	Hip, thigh (femur), acetabulum	\$1,350	\$2,025	\$2,700
	Pelvis (except coccyx)	\$1,350	\$2,025	\$2,700
	Lower leg (tibia, fibula)	\$825	\$1,238	\$1,650
	Shoulder blade (scapula)	\$825	\$1,238	\$1,650
	Upper arm (humerus)	\$825	\$1,238	\$1,650
	Ankle	\$600	\$900	\$1,200
	Collar bone (humerus)	\$600	\$900	\$1,200
	Elbow	\$600	\$900	\$1,200
	Forearm (radius, ulna)	\$600	\$900	\$1,200
	Kneecap (patella)	\$600	\$900	\$1,200
	Skull (non-depressed)	\$600	\$900	\$1,200
	Sternum	\$600	\$900	\$1,200
	Foot (except toes)	\$525	\$788	\$1,050
	Hand (except fingers) or wrist	\$525	\$788	\$1,050
	Vertebrae (except vertebral process)	\$450	\$675	\$900
	Lower jaw (mandible except for alveolar process)	\$300	\$450	\$600
	Two or more ribs	\$300	\$450	\$600
	Bones of face or nose	\$225	\$338	\$450
	Two or more fingers or toes	\$225	\$338	\$450
	Upper jaw	\$225	\$338	\$450
	Vertebral process	\$225	\$338	\$450
	Rib	\$150	\$225	\$300
	Coccyx	\$105	\$158	\$210
	One finger or toe	\$105	\$158	\$210
	Sacrum	\$105	\$158	\$210
Dislocation	Hip joint	\$1,500	\$2,250	\$3,000
Amount payable varies based on affected joint or bone. Listed benefits are for non-surgical treatment; surgical treatment benefit is double. For surgery without anesthesia or an incomplete dislocation, 25% of the benefit is payable.	Ankle joint	\$600	\$900	\$1,200
	Bones(s) of foot (except toes)	\$600	\$900	\$1,200
	Knee joint (except patella)	\$600	\$900	\$1,200
	Wrist joint	\$525	\$788	\$1,050
	Elbow joint	\$450	\$675	\$900
	Collar bone (sternoclavicular)	\$375	\$563	\$750
	Lower jaw	\$375	\$563	\$750
	Shoulder joint	\$300	\$450	\$600
	Bone(s) of hand (except fingers)	\$225	\$338	\$450
	Two or more fingers or toes	\$105	\$158	\$210
	Collar bone (acromioclavicular)	\$75	\$113	\$150
	One finger or toe	\$45	\$68	\$90
Head Injury	Traumatic Brain Injury	\$500	\$750	\$1,000
Concussion or traumatic brain injury	Concussion	\$50	\$75	\$100

Benefit	Base	Advantage	Complete
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Specific Injury Care

Organized Sports Injury Percentage of all other payable benefits if injured during amateur organized athletic competition or supervised practice for such; up to \$1,000	25%	25%	25%
Motor Vehicle Injury Percentage of all other payable benefits if injured while driving or riding in an automobile not being used for wage, compensation or profit; up to \$1,000	10%	10%	10%

Catastrophic Care

Paralysis Lasting 90+ days, diagnosed permanent; one quadriplegia, hemiplegia or paraplegia benefit per lifetime	Quadriplegia Paraplegia or Hemiplegia	\$20,000 \$10,000	\$30,000 \$15,000	\$40,000 \$20,000
Coma Not medically induced or the result of drug or alcohol use		\$15,000	\$22,500	\$30,000
Loss of Use Loss of sight, hearing or speech	Loss of sight in both eyes Loss of hearing in both ears Loss of speech Loss of sight in one eye	\$20,000 \$20,000 \$20,000 \$10,000	\$30,000 \$30,000 \$30,000 \$15,000	\$40,000 \$40,000 \$40,000 \$20,000
	Both hands or both arms Both feet or both legs	\$10,000 \$10,000	\$15,000 \$15,000	\$20,000 \$20,000
Dismemberment Loss of arm, leg, foot, finger, or toe.	One hand or arm and one foot or leg One hand or one arm One foot or one leg One or more entire toes One or more entire fingers	\$10,000 \$5,000 \$5,000 \$1,000 \$1,000	\$15,000 \$7,500 \$7,500 \$1,500 \$1,500	\$20,000 \$10,000 \$10,000 \$2,000 \$2,000
Prosthetic Devices Not including hearing or dental aids, eyeglasses, cosmetic devices, or joint replacements.	One Device Multiple Devices	\$1,000 \$2,000	\$1,500 \$3,000	\$2,000 \$4,000

Hospital Care

Hospital Admission Once per accident; once per calendar year		\$1,000	\$1,500	\$2,000
Hospital Confinement Up to 365 days per accident		\$200	\$300	\$400
Hospital Observation Once per accident		\$500	\$750	\$1,000
Hospital Observation Stay Once per accident based on hours of observation	20 to 48 hours 49 or more hours	\$100 \$200	\$150 \$300	\$200 \$400

Benefit	Base	Advantage	Complete
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Hospital Care *(Continued)*

Intensive Care Unit Admission Once per accident; once per calendar year	\$1,500	\$2,250	\$3,000
Intensive Care Unit Confinement Up to 30 days per accident	\$300	\$450	\$600
Rehabilitation Unit Confinement Up to 30 days per accident; 60 days per calendar year	\$200	\$300	\$400
Family Care For all dependent children, by licensed provider, while insured is confined to a hospital; up to 30 days per accident	\$30	\$45	\$60
Pet Care For pet care, by an independent provider, while an insured is confined to a hospital up; to 30 days per accident	\$30	\$45	\$60
Recovery If unable to work after surgery or hospital confinement; up to six days per accident	\$50	\$75	\$100

Surgical Care

General Surgery Open Abdominal, Thoracic, Cranial or Hernia surgery with repair, or laparoscopic surgery for diagnostic purposes only	Abdominal, Thoracic, or Cranial with Repair	\$1,000	\$1,500	-
	Hernia with Repair	\$250	\$375	-
	Laparoscopic without Repair	\$250	\$375	-
Orthopedic Surgery Tendon, Ligament, Rotator Cuff, or Knee Cartilage with Repair		\$500	\$750	-
	Ruptured Disc with Repair	\$500	\$750	-
	Arthroscopic without Repair	\$250	\$375	-
Inpatient Surgery Inpatient surgery for an injury requiring anesthesia		-	-	\$2,000
Outpatient Surgery Outpatient surgery for an injury requiring anesthesia		-	-	\$500

Accidental Death Rider *(Included Benefit)*

Accidental Death	Primary Insured	\$10,000	\$25,000	\$50,000
	Spouse	\$10,000	\$25,000	\$50,000
	Child	\$2,500	\$6,250	\$12,500
Accidental Death – Common Carrier Additional benefit if fare-paying passenger on common carrier	Primary Insured	\$10,000	\$25,000	\$50,000
	Spouse	\$10,000	\$25,000	\$50,000
	Child	\$2,500	\$6,250	\$12,500
Accidental Death – Automobile Seatbelt Additional benefit if seatbelt in use	Primary Insured	\$2,500	\$6,250	\$12,500
	Spouse	\$2,500	\$6,250	\$12,500
	Child	\$625	\$1,563	\$3,125

Notes



Why we're different.

Mutual strength

For over 130 years, our financial strength has helped people support one another through difficult times.

A force for good

As a Certified B Corporation, we work toward positive impacts for employees, communities and the environment.

Personal service

Get the customer service you need from real, responsive and efficient people in our Lincoln, Nebraska headquarters.

Customer Service

800-276-7619
Ext. 4264

Find out more

assurity.com



*National Safety Council, Injury Facts, 2021

NOT AVAILABLE IN NEW YORK.

THIS IS AN EXCEPTED BENEFITS POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. Accident Expense insurance may contain reductions of benefits, limitations and exclusions. The description of benefits is intended only to highlight the insured's benefits and should not be relied upon to fully determine coverage.

Policy Form No. I H2203 and Rider Form Nos. R I2204, R I2205, and R I2208 are underwritten by Assurity Life Insurance Company, Lincoln, Nebraska.

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