



## **Accident and Sickness Protector**

## Combined Insurance's Accident and Sickness Protector — a Good Decision

This accident and sickness coverage provides cash benefits to help you and your loved ones when needed most.

#### **Protection That Works for You**

The Accident & Sickness Protector covers you on or off the job, 24 hours a day, every day of the year. You are the owner of this policy - even if you change employers you can keep your coverage without interruption. Claims are payable to you and are paid in addition to any other insurance you might have.

72% of Americans would find it difficult to meet their current financial obligations if their paycheck was delayed for a week.<sup>4</sup>



#### Specified Indemnity Benefits Payable for a Covered Accident or Sickness

	CHOICE	STANDARD
Hospital Admission	\$800	\$400
Hospital Confinement (overnight as an Inpatient)	\$200 per day	\$100 per day
Intensive Care	\$200 per day	\$100 per day
Ground Ambulance (one trip within 48 hours)	\$100	\$50
Air Ambulance (one trip within 48 hours)	\$500	\$250
Blood and Blood Plasma (In NV- for Accident, must be within 90 days of injury)	\$150	\$75
Transportation (maximum of 3 trips)	\$300 per trip	\$150 per trip
Family Lodging (lifetime maximum of 30 days)	\$100 per day	\$50 per day
Recovery Following Hospital Confinement	\$100 per day	\$50 per day
Emergency Room or Urgent Care Visit <sup>1</sup>	\$100	\$50
Emergency Room Follow-up Treatment		
ER for Accident (up to 4 treatments)	\$25 per treatment	\$12.50 per treatment
ER or Urgent Care Follow-up Treatment for Sickness (up to 2 treatments)	\$50 per treatment	\$25 per treatment
Appliances	\$100	\$50
Minor Outpatient surgery <sup>1,2</sup>	\$250	\$125
Major Outpatient surgery <sup>1,2</sup>	\$1,000	\$500

### Additional Specified Indemnity Benefits Payable for Covered Accidents

	СНОІСЕ	STANDARD
Concussion (within 72 hours of injury)	\$100	\$50
Physical Therapy (maximum 10 sessions; within 90 days of injury)	\$25 per session	\$12.50 per session
Major and Minor Fractures <sup>1,3</sup>	Minor \$250, Major \$1,000	Minor \$125, Major \$500
Health Screening Test or Procedure	\$50	\$25
Accidental Loss of Life and Dismemberment – Any Accident		
Loss of One Limb or Sight in One Eye	Insured \$10,000, Spouse \$5,000, Child \$2,500	Insured \$5,000, Spouse \$2,500, Child \$1,250
Loss of Life or Multiple Limbs or Sight in Both Eyes	Insured \$25,000, Spouse \$10,000, Child \$5,000	Insured \$12,500, Spouse \$5,000, Child \$2,500
Accidental Loss of Life – Common Carrier	Insured \$100,000, Spouse \$100,000, Child \$50,000	Insured \$50,000, Spouse \$50,000, Child \$25,000





### **Accident and Sickness Protector**

Limitations and Exclusions

# Accident Policy Coverage Exclusions

Benefits will not be payable if a loss is directly caused by or results from any sickness or disease, or a covered person's:

- 1. Suicide<sup>†</sup> or attempted suicide<sup>†</sup> (in MO while sane), or intentionally self-inflicted injury
- 2. Committing or attempting to commit a felony
- 3. Being under the influence of a controlled substance or illegal drugs (unless administered by a physician and taken according to the physician's instructions), or while intoxicated (as defined by the law of the jurisdiction in which the accident occurred) (Not applicable in NV)
- 4. Being exposed to war or any act of war, declared or undeclared, or serving in any armed forces or units auxiliary thereto
- 5. Travel or flight in any kind of aircraft, except as a fare-paying passenger in an aircraft operated on a regular schedule by a common carrier for passenger service over an established air route
- 6. Engaging in hang-gliding, parachuting, bungee jumping, parasailing, or any similar activities\* or
- 7. Participating in any sport or sporting activity for which any type of compensation or remuneration is received, or racing any type of vehicle in any organized event\*

### Renewability

Sickness Rider is Guaranteed Renewable until your 75th birthday providing the policy to which this rider is attached is in force and the rider premium is paid on or before the due date or within the grace period. We reserve the right to change the premium for the Sickness Rider. We cannot change your premium unless we change everyone in your class (for example, everyone in your state).

Hospital does not include a nursing home or convalescent care facility, whether such facility is independent or associated with a hospital.

- <sup>1</sup> Child benefit paid at 50% of amount shown.
- <sup>2</sup> Outpatient surgery is classified as "minor" when performed in a clinic, doctor's office or emergency care facility. Outpatient surgery is classified as "major" when performed in an ambulatory surgical center or a hospital operating room.

### **Optional Sickness Rider**

The Accident-Only Policy does not provide benefits for loss from sickness. Benefits for sickness are only available if your application for the Optional Sickness Rider (Form No. series 12400-719/12401-719) is approved by our underwriting department and you pay the required rider premium.

If you have the Optional Sickness Rider please note the following:

#### **Sickness Rider Exclusions**

Benefits will not be payable if a loss results from a covered person's:

- 1. Suicide, attempted suicide (in MO while sane), or intentionally self-inflicted injury
- 2. Accidental bodily injury
- 3. Alcoholism or drug addiction (not applicable in NV; in GA only: Being intoxicated or under the influence of a narcotic unless administered on the advice of a physician)
- 4. Mental or emotional disorders (In TX without demonstrable organic origin) or
- 5. Normal pregnancy or childbirth
- 6. NV ONLY: Commission of or attempt to commit a felony

## Sickness Pre-existing Conditions Limitation

Loss caused by a pre-existing condition is not covered unless such loss begins after 12\* months from the coverage effective date.

A pre-existing condition is a medical condition which was diagnosed or treated by a physician within 12\* months before the effective date of the rider.

\*6 months in NM, NV, and WY.

# This Is Very Important

If a covered individual is a Medicaid recipient, policy benefits may be assigned and payable to your state Medicaid agency. Also, benefit payments you receive may count as income for medicaid eligibility purposes.

#### **Important Notice**

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

#### Notice of Claim / Proof of Loss

Written proof of loss must be given to Combined within 90 days after such loss. If it was not reasonably possible to give written proof within 90 days, the proof required must be given no later than 1 year from the time specified unless the claimant was legally incapacitated.

This document contains a brief description of policy Form No. series 14027/14028, Urgent Care Benefit Rider Form No. series 14100 and Sickness Rider Form No. series 12400-719/12401-719. See the policy for complete details of policy benefits, exclusions and limitations. Products may vary by State and are subject to availability and qualifications.

Note: Benefits shown are Accident Policy with optional Sickness Rider.

- <sup>3</sup> Minor fracture; breaking of the nose, teeth, fingers, thumbs, or toes. Major fracture; breaking of any other bone of the body.
- <sup>4</sup> American Payroll Association. Getting Paid in America Survey, 2022.
- † Does not apply in IL.
- \* Does not apply in DE, IL.
  - Combined Insurance Company of America, Chicago, IL | www.combinedinsurance.com