# 24-HOUR ACCIDENT INSURANCE

OUNTARY BENEFIT

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

## **Plan I Schedule of Benefits**

Benefit Amount Per Covered Person						
A - a: - l - mt	INSURED AND SPOUSE	\$100.00	Appliances		\$ 100.00	
Accident Emergency Treatment	CHILD	70.00	Physical Therapy	PER DAY:	50.00	
Accident Hospital Income Benefit	Prosthesis			500.00		
Family Lodging	PER DAY:	100.00	Initial Hospitalization for Injury		300.00	
Ambulance	GROUND:	150.00	Accident Follow-Up Treatment	PER VISIT:	25.00	
Ambulance	AIR:	600.00	Additional Intensive Care Unit	PER DAY:	300.00	
Transportation		300.00	Wellness		60.00	

### **Accident Specific Sum Injuries Benefit**

Dislocations	Redu	ction
Dislocations	Open	Closed
Hip	\$ 2,000.00	\$ 665.00
Knee or Shoulder	665.00	265.00
Collar Bone	1,065.00	200.00
Ankle or Foot (excl. toes)	665.00	200.00
Lower Jaw	665.00	330.00
Wrist or Elbow	530.00	265.00
Toe or Finger	130.00	65.00
Tendons / Ligaments		Benefit
One		\$ 330.00
Two or More		665.00
Burns		Benefit
2nd Degree, 25%-35% of body		\$ 265.00
2nd Degree, > 35% of body	/	665.00
3rd Degree, 6-10 square inc	ches of body	530.00
3rd Degree, 10-25 square inches of body		1,330.00
3rd Degree, > 25 square inches		2,665.00
Ruptured Disc / Torn Knee Cartilage		Benefit
During 1st year of coverage		\$ 130.00
After 1st year of coverage		400.00

<u>.</u> .	Redu	ction
Fractures	Open	Closed
Leg	830.00	665.00
Hand/Foot/Wrist, etc.	665.00	330.00
Upper Jaw & Arm/Face	800.00	330.00
Rib(s)	1,330.00	130.00
Nose/Heel/Fingers	665.00	130.00
Соссух	265.00	130.00
Toes(s)	265.00	130.00
Vertebral Processes	1,330.00	200.00
Vertebrae (body of)/Pelvis	330.00	N/A
Skull (depressed)	1,065.00	N/A
Skull (simple)	400.00	N/A
Lacerations		Benefit
Less than 2 inches		\$ 30.00
2-6 inches		130.00
> 6 inches total		265.00
Eye, Internal, and Blood/Plas	sma	Benefit
Eye Injury w/ Surgery		\$ 130.00
Internal Injuries		1,330.00
Blood/Plasma		65.00

Accidental Death Benefit	Insured	Spouse	Child
Common Carrier	\$ 35,000.00	\$ 17,500.00	\$ 3,500.00
Motor Vehicle	25,000.00	12,500.00	2,500.00
Other Accidents	15,000.00	7,500.00	1,500.00

Accidental Dismemberment Benefit	Insured	Spouse	Child
One or more fingers and/or one or more toes (5%)	\$ 750.00	\$ 375.00	\$ 75.00
One eye, hand, foot, arm or leg (20%)	3,000.00	1,500.00	300.00
Two eyes, hands or feet (50%) or Two arms or two legs (50%)	7,500.00	3,750.00	750.00
Both arms and both legs (100%)	15,000.00	7,500.00	1,500.00

A finger or toe is considered lost when completely severed at the hand or foot. Loss of a foot means complete severance at or above the ankle joint. Loss of a hand is the entire loss of at least four fingers. Loss of sight is defined as entire and irrevocable loss of vision.

# 24-HOUR ACCIDENT INSURANCE

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

## **Plan II Schedule of Benefits**

### Benefit Amount Per Covered Person

INSURED AND SE		\$150.00	Appliances		\$ 150.00
Accident Emergency Treatment	CHILD	105.00	Physical Therapy PER DAY		75.00
Accident Hospital Income Benefit		200.00	Prosthesis		750.00
Family Lodging	PER DAY:	200.00	Initial Hospitalization for Injury		1,500.00
Ambalana	GROUND:	GROUND: 150.00 Accident Follow-Up Treatment		PER VISIT:	25.00
Ambulance	AIR:	600.00	Additional Intensive Care Unit PER DAY:		600.00
Transportation 3		300.00	Wellness		60.00

**Accident Specific Sum Injuries Benefit** 

Dislocations	Reduction		
Dislocations	Open	Closed	
Hip	\$4,000.00	\$1,333.30	
Knee or Shoulder	1,333.30	533.30	
Collar Bone	2,133.30	400.00	
Ankle or Foot (excl. toes)	1,333.30	400.00	
Lower Jaw	1,333.30	666.60	
Wrist or Elbow	1,066.60	533.30	
Toe or Finger	266.60	133.30	
Tendons / Ligaments	Benefit		
One		\$666.60	
Two or More		1,333.30	
Burns		Benefit	
2nd Degree, 25%-35% of body		\$533.30	
2nd Degree, > 35% of body	/	1,333.30	
3rd Degree, 6-10 square inc	ches of body	1,066.60	
3rd Degree, 10-25 square inches of body		2,666.60	
3rd Degree, > 25 square inches		5,333.30	
Ruptured Disc / Torn Knee Cartilage		Benefit	
During 1st year of coverage		\$266.60	
After 1st year of coverage		800.00	

	Redu	ction
Fractures	Open	Closed
Hip	\$4,000.00	\$1,333.30
Leg	1,666.60	1,333.30
Hand/Foot/Wrist, etc.	1,333.30	666.60
Upper Jaw & Arm/Face	1,600.00	666.60
Rib(s)	2,666.60	266.60
Nose/Heel/Fingers	1,333.30	266.60
Coccyx or Toe(s)	533.30	266.60
Vertebral Processes	1,600.00	240.00
Vertebrae (body of)/Pelvis	665.00	N/A
Skull (depressed)	2,130.00	N/A
Skull (simple)	800.00	N/A
Lacerations		Benefit
Less than 2 inches		\$66.60
2-6 inches		266.60
> 6 inches total		533.30
Eye, Internal, and Blood/Plas	sma	Benefit
Eye Injury w/ Surgery		\$ 265.00
Internal Injuries		265.00
Blood/Plasma		130.00

Accidental Death Benefit	Insured	Spouse	Child
Common Carrier	\$ 70,000.00	\$ 35,000.00	\$ 7,000.00
Motor Vehicle	50,000.00	25,000.00	5,000.00
Other Accidents	30,000.00	15,000.00	3,000.00
Accidental Dismemberment Benefit	Insured	Spouse	Child

Accidental Dismemberment Benefit	Insured	Spouse	Child
One or more fingers and/or one or more toes* (5%)	\$ 1,500.00	\$ 750.00	\$ 150.00
One eye, hand, foot, arm or leg* (20%)	6,000.00	3,000.00	600.00
Two eyes, hands or feet (50%) or Two arms or two legs (50%)	15,000.00	7,500.00	1,500.00
Both arms and both legs (100%)	30,000.00	15,000.00	3,000.00

A finger or toe is considered lost when completely severed at the hand or foot. Loss of a foot means complete severance at or above the ankle joint. Loss of a hand is the entire loss of at least four fingers. Loss of sight is defined as entire and irrevocable loss of vision.