

Olivia was driving to the store when she got into a car accident.



AMBULANCE AND EMERGENCY ROOM VISIT

Olivia arrived by ambulance to the nearest emergency room and received immediate care.



DIAGNOSTIC PROCEDURES

The doctor ordered an X-ray and discovered Olivia had fractured her thigh (femur). He also ordered a CT scan of her head to check for brain injury.



HOSPITAL ADMISSION, CONFINEMENT AND SURGERY

Olivia was admitted to the hospital for surgery on her leg. She was confined for three days.



PHYSICAL THERAPY

Olivia had eight sessions of physical therapy to help regain the strength in her leg.



DOCTOR'S OFFICE VISITS

Over the next several weeks, she had six follow-up appointments with her doctor.

OLIVIA'S BENEFITS	
Olivia's accident benefits helped cover her annual deductible and co-payments.	
Ambulance	\$250
Accidental injury due to an automobile accident	\$250
Accident emergency treatment	\$125
X-ray	\$40
Medical imaging study (CT)	\$250
Hospital admission	\$1,250
Hospital confinement (3 days)	\$900
Thigh fracture - femur (surgical)	\$5,600
Surgery (exploratory/arthroscopic)	\$350
Medical equipment (crutches)	\$125
Accident follow-up treatment (6 visits)	\$330
Physical therapy (8 days)	\$360
Total: \$9,830	

Benefits are per covered person per covered accident unless stated otherwise.

INITIAL CARE

Accident emergency treatment	\$125
Hospital emergency room, urgent care facility or physician's office	
Accidental injury due to an automobile accident	\$250
Air ambulance	\$2,400
Ambulance – ground or water	\$250
Observation room (up to two days per calendar year)	\$175 per day
X-ray	\$40

COMMON ACCIDENTAL INJURIES

Burn (based on size and degree)	\$1,000 – \$15,000
Burn – skin graft	50% of applicable burn benefit
Coma (lasting for seven or more consecutive days)	\$15,000
Concussion	\$200
Dislocation – separated joint	
■ Non-surgical – repair	\$125 – \$2,750
■ Incomplete dislocation – or dislocation without anesthesia	25% of benefit
Examples: elbow: \$600 ankle: \$1,250 knee: \$1,375 hip: \$2,750	
■ Surgical – repair	\$250 – \$5,500
Examples: elbow: \$1,200 ankle: \$2,500 knee: \$2,750 hip: \$5,500	
Emergency dental work	\$125 – \$350
Dental extraction or dental crown, denture or implant	
Eye injury – with surgical repair or removal of a foreign object	\$350
Fracture – complete	
■ Non-surgical – repair	\$300 – \$3,750
■ Chip fracture	25% of benefit
Examples: hand: \$475 foot: \$475 collarbone: \$775 leg: \$1,250	
■ Surgical – repair	\$600 – \$7,500
Examples: hand: \$950 foot: \$950 collarbone: \$1,550 leg: \$2,500	
Hearing-loss injuries ¹	\$140
Knee cartilage – torn (with surgical repair)	\$800
Laceration (based on repair and length)	\$30 – \$750
Ruptured disc (with surgical repair)	\$950
Tendon/ligament/rotator cuff (with surgical repair)	
■ One	\$800
■ Two or more	\$1,600

HOSPITAL CARE

Hospital admission	\$1,250
Hospital confinement (up to 365 days)	\$300 per day
Hospital sub-acute intensive care unit confinement (up to 30 days)	\$400 per day
Intensive care unit admission	\$2,500
Intensive care unit confinement (up to 15 days)	\$550 per day

SURGICAL CARE

Blood/plasma/platelets – transfusion	\$400
Surgery (based on type of repair and surgery)	\$250 – \$1,900

For illustrative purposes only.

Benefit amounts may vary and may not cover all expenses. The policy has exclusions and limitations.

TRANSPORTATION & LODGING

Transportation for hospital confinement (up to three round trips, 50+ miles from home)	\$700 per round trip
Lodging – companion (up to 30 days)	\$150 per day

FOLLOW-UP CARE

Accident follow-up treatment – including transportation/telemedicine (up to six benefits per covered person per covered accident and up to 12 benefits per covered person per calendar year)	\$55
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Medical equipment

■ Tier 1 (Arm sling, cane, medical ring cushion, neck brace or wrist/ankle splint)	\$40
■ Tier 2 (Bedside commode, cold therapy system (cryotherapy), crutches, leg brace, shower chair, walker or walking boot)	\$125
■ Tier 3 (Back brace, body jacket, continuous passive movement (CPM), halo, electric scooter, hospital bed (including rental), knee scooter, stair lift chair, wheelchair)	\$250

Medical imaging study – CT, CAT scan, EEG, EMG, MR or MRI (one per calendar year)	\$250
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Pain management for epidural anesthesia – non-surgical	\$125
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Post-traumatic stress disorder (PTSD)	\$250
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Prosthetic device/artificial limb

■ One	\$950	■ More than one	\$1,900
■ Repair/replacement ²			\$475/\$950

Rehabilitation unit confinement (up to 15 days, not to exceed 30 days per calendar year)	\$175 per day
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Therapy – occupational, physical or speech (up to ten days)	\$45 per day
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ACCIDENTAL DISMEMBERMENT

Accidental dismemberment	\$600 – \$25,000
■ Loss, loss of use or paralysis – hand, arm, foot, leg, sight of eye	
■ Loss, loss of use – finger, toe, partial dismemberment of finger or toe	

Accidental dismemberment due to a catastrophic accident

Named insured, spouse or child	\$30,000 ³
■ Total and irrecoverable loss, loss of use or paralysis – 180-day elimination period	
■ Both hands, arms, feet, legs or the sight of both eyes; or any combination; or	
■ Loss of hearing in both ears, or loss of ability to speak	

ACCIDENTAL DEATH

Accidental death

■ Named insured, spouse	\$40,000
■ Child	\$10,000

Accidental death common carrier

Examples of common carriers are mass transit trains, buses and planes

■ Named insured, spouse	\$160,000
■ Child	\$30,000



For more information,
talk with your
benefits counselor.