

# **Accident Insurance**

Premier Plan



If you are in an accident, your focus should be on recovery, not how you're going to pay your bills. Colonial Life accident insurance can pay benefits directly to you to use however you like — from medical costs to everyday expenses.

# Our coverage includes:

- Benefits payable directly to you
- No medical questions to qualify for coverage
- Coverage for simple and complex injuries
- Benefits payable regardless of other insurance
- · Worldwide coverage
- Works alongside your Health Savings Account (HSA)

## BENEFITS STORY

# Jacob was running on the playground when he tripped and injured his hand.

With Colonial Life accident benefits, Jacob's parents were able to pay the annual deductible and co-payments.

			JACOB'S ACCIDENT BENEFITS	
<del>(1)</del>	Jacob went to an urgent care facility and received immediate care.		Accident emergency treatment	\$150
	The doctor ordered an X-ray and discovered Jacob had fractured his hand.		X-ray     Fracture (hand)	\$40 \$425
Ph.	The doctor also found that Jacob had a cut on his hand.		Laceration (no stitches)	\$30
	Jacob was discharged with a splint.		Medical equipment (splint)	\$30
	Over the next several weeks, Jacob had three follow-up appointments with his doctor.		Accident follow-up treatment (3 visits)	\$195
For illustrative purposes only for covered accidents. Benefit amounts may vary and may not cover all expenses.		Total	\$870	

#### **BENEFITS STORY**

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

Olivia's accident benefits helped cover her annual deductible and co-payments.

		OLIVIA'S ACCIDENT BENEFITS	
<del>+</del>	Olivia arrived by ambulance at the nearest emergency room and received immediate care.	Ambulance     Accident emergency treatment     Injury due to auto accident	\$300 \$150 \$250
	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 a brain injury.	<ul><li>X-ray</li><li>Medical imaging (CT)</li><li>Thigh fracture — femur (surgical)</li></ul>	\$40 \$250 \$6,000
(g)	Olivia was admitted to the hospital for surgery on her leg. She was confined for three days.	<ul><li> Hospital admission</li><li> Surgery (exploratory/arthroscopic)</li><li> Hospital confinement (3 days)</li></ul>	\$1,500 \$300 \$900
Ooge	Olivia had eight sessions of physical therapy to help regain the strength in her leg.	<ul><li>Physical therapy (8 days)</li><li>Medical equipment (crutches)</li></ul>	\$320 \$150
	Over the next several weeks, she had six follow-up appointments with her doctor.	Accident follow-up treatment (6 visits)	\$390
For illustrative purposes only for covered accidents. Benefit amounts may vary and may not cover all expenses.		Total	\$10,550

# **Summary of benefits**

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

# **Initial care**

Accident emergency treatment\$150  Hospital emergency room, urgent care facility or physician's office
Accidental injury due to an automobile accident 1 \$250
Air ambulance <sup>2</sup> \$2,000
Ambulance – ground or water <sup>2</sup> \$300
Observation room
X-ray\$40
Common accidental injuries
Burn
Burn – skin graft50% of applicable burn benefit
Coma\$15,000 (lasting for seven or more consecutive days)
Concussion\$200

# Dislocation — separated joint

• Non-surgical – repair
<ul> <li>Incomplete dislocation – or dislocation</li> </ul>
without anesthesia
• Surgical – repair\$250-\$5,000 Examples: elbow: \$1,200   ankle: \$2,500   hip: \$5,000
Emergency dental work
Eye injury — with surgical repair or
removal of a foreign object\$400
Fracture - complete
• Non-surgical – repair
• Chip fracture
(payable as a % of the applicable fracture benefit)
• Surgical – repair



Hearing-loss injuries <sup>3</sup>
Knee cartilage – torn – with surgical repair \$750
Laceration\$30-\$600 (based on repair and length)
Ruptured disc — with surgical repair\$1,250
Tendon/ligament/rotator cuff — with surgical repair
• One
• Two or more
Hospital care
Hospital admission
Hospital confinement\$300 per day
(up to 365 days)
Hospital sub-acute intensive care
unit confinement\$400 per day (up to 30 days)
Intensive care unit admission\$2,500
Intensive care unit confinement \$500 per day (up to 15 days)
Surgical care
Blood/plasma/platelets – transfusion
Surgery
(based on type of repair and surgery)
Transportation and lodging
Transportation for hospital confinement \$700 per round trip

(up to three round trips, 50+ miles from home)

(up to 30 days)

Lodging – companion . . . . . . . . . . . . . \$150 per day

# Follow-up care

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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)
Medical equipment
• Tier 1\$30
Arm sling, cane, medical ring cushion, neck brace
or wrist/ankle splint
• Tier 2\$150
Bedside commode, cold therapy system (cryotherapy),
crutches, leg brace, shower chair, walker or walking boot
• Tier 3
Back brace, body jacket, continuous passive movement (CPM),
halo, electric scooter, hospital bed (including rental), knee
scooter, stair lift chair or wheelchair
Medical imaging study — CT, CAT scan, EEG,
EMG, MR or MRI\$250
(one per calendar year)
Pain management for epidural anesthesia — non-surgical $\dots$ \$150
Post-traumatic stress disorder (PTSD) \$200
Prosthetic device/artificial limb
• One
• More than one\$2,000
• Repair/replacement <sup>4</sup>
Rehabilitation unit confinement\$200 per day
(up to 15 days, not to exceed 30 days per calendar year)
Therapy – occupational, physical or speech \$40 per day
(up to 10 days)
Accidental dismemberment
Accidental dismemberment \$600 <sup>5</sup> – \$30,000
• 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\$25,000°
Total and irrecoverable loss, loss of use or paralysis – 180-day
elimination period
<ul> <li>Loss of both hands, arms, feet, legs or the sight of both eyes;</li> </ul>
or any combination; or
<ul> <li>Loss of hearing in both ears, or loss of ability to speak</li> </ul>
Accidental death
Accidental death
Accidental death
• Named insured, spouse \$50,000
• Child
Accidental death common carrier
Examples of common carriers are mass transit trains, buses and
planes.
• Named insured, spouse\$200,000
• Child\$45,000
- Ollina



# For more information, contact your Colonial Life benefits counselor.

- Requires transportation by a licensed professional Air Ambulance or Ambulance (Ground or Water).
- 2 In Nevada, air ambulance or ambulance: We will pay this benefit directly to the provider unless the air ambulance or ambulance bill shows that all charges have been paid in full.
- 3 One benefit for each injured ear per covered person per lifetime.
- 4 One repair or replacement per prosthetic device/artificial limb per covered person per lifetime.
- 5 In Maine, minimum benefit for full dismemberment of finger or toe is \$1,000.
- 6 Payable once per lifetime per covered person.

#### HEALTH SAVINGS ACCOUNT (HSA) COMPATIBLE

This plan is compatible with HSA guidelines and any other HSA plan in which a covered family member may participate. It may also be offered to employees who do not have HSAs.

## THIS POLICY PROVIDES LIMITED BENEFITS.

This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this coverage.

#### **EXCLUSIONS**

We will not pay benefits for losses that are caused by, contributed to by or occur as the result of a covered person's felonies or illegal occupations, hazardous avocations, racing, semi-professional or professional sports, sickness, suicide or injuries which any covered

person intentionally does to himself, war or armed conflict. In addition, we will not pay Accidental Dismemberment Due to Catastrophic Accident benefits for injuries a child sustains during birth, or for injuries that are the result of intoxication or use of narcotics.

## STATE VARIATIONS FOR EXCLUSIONS AND LIMITATIONS

IL: Not applicable to "hazardous avocations, racing, semi-professional or professional sports."

MT: Not applicable to "suicide or injuries which you intentionally do to yourself and injuries a child sustains during birth."

NV: Not applicable to "intoxicants and narcotics."

**OK:** Not applicable to "hazardous avocations, racing and semi-professional or professional sports." For Accidental Dismemberment Due to Catastrophic Accidents, replace "injuries a child sustains during birth, or for injuries that are the result of intoxication" with "alcoholism or drug addiction, or narcotics."

**UT:** Also includes "aviation." Not applicable to "hazardous avocations, racing, semi-professional or professional sports."

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. Applicable to policy form IAC4000 (including state abbreviations where used, for example: IAC4000-TX). For cost and complete details of the coverage, call or write your Colonial Life benefits counselor or the company.



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# Colonial Life

# **Accident Insurance**

Sickness Hospital Confinement with Sickness Hospital Admission Rider



These benefits can help with medical costs related to a hospital stay for a covered sickness, including costs that your health insurance may not cover, such as co-pays and deductibles.

## Sickness hospital admission .....\$

Payable once per covered person for a covered sickness.

Re-confinement for the same or related condition within 90 days of discharge is considered a continuation of a previous confinement.

## Daily sickness hospital confinement ......\$100 per day

Up to 30 days per covered person per confinement for a covered sickness. Re-confinement for the same or related condition within 90 days of discharge is considered a continuation of a previous confinement.

## Health savings account (HSA) compatible

This plan is compatible with HSA guidelines and any other HSA plan in which a covered family member may participate. It may also be offered to employees who do not have HSAs.



To learn more, talk with your Colonial Life benefits counselor.

#### THIS POLICY PROVIDES LIMITED BENEFITS.

This insurance is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this coverage.

#### **EXCLUSIONS AND LIMITATIONS**

We will not pay benefits for losses that are caused by, contributed to by or occur as the result of accidental Injuries, alcoholism or drug addiction, cosmetic surgery, dental procedures, elective procedures, felonies or illegal occupations, psychiatric or psychological conditions, suicide or injuries which you intentionally do to yourself, war or armed conflict, or well baby care.

#### PRE-EXISTING CONDITION LIMITATION

Pre-existing condition means a sickness or physical condition, whether diagnosed or not, for which a covered person was treated, had medical testing, received medical advice, or had taken medication within 12 months before the rider coverage effective date shown on the rider schedule. After this rider has been in force for 12 months from the rider coverage effective date shown on the rider schedule, we will pay benefits as stated in the rider for any loss as the result of a pre-existing condition not excluded by name or specific description if the covered loss began at least 12 months after the rider coverage effective date.

#### STATE VARIATIONS FOR EXCLUSIONS AND LIMITATIONS

AK: Replace "alcoholism or drug addiction" with "intoxicants or narcotics."

DE: Replace "alcoholism or drug addiction" with "substance abuse."

FL: Replace "psychiatric or psychological conditions" with "mental or nervous disorders."

IL: Pre-existing Condition Limitation definition also includes "produced symptoms."

KY: Replace "alcoholism or drug addiction" with "intoxicants, narcotics, and hallucinogenics."

LA: Replace "alcoholism or drug addiction" with "intoxicants and narcotics."

ME: Pre-existing Condition Limitation definition does not include "had taken medication."

MO: Replace "alcoholism or drug addiction" with "substance abuse."

MT: Pre-existing Condition Limitation definition does not include "whether diagnosed or not" or "had medical testing."

**NC:** Pre-existing Conditions Limitation definition also includes "If a covered person is 65 or older when this policy is issued, pre-existing conditions for that covered person will include only conditions specifically eliminated by rider."

**OK:** Replace "psychiatric or psychological conditions" with "mental or emotional conditions."

SC: Replace "psychiatric or psychological conditions" with "mental or emotional disorders."

SD: Not applicable to "alcoholism or drug addiction."

UT: Replace "psychiatric or psychological conditions" with "mental or nervous disorders."

VT: Not applicable to "alcoholism or drug abuse, psychiatric or psychological conditions, well baby care," or the limitation for giving birth within the first nine months after the rider coverage effective date.

## ADDITIONAL DISCLOSURES FOR THE STATE OF KENTUCKY

Giving Birth Limitation - We will not pay benefits for hospital admission due to covered sickness and hospital confinement (daily) due to covered sickness due to any covered person's giving birth within the first nine (9) months after the rider coverage effective date shown on the rider schedule. Complications of pregnancy are subject to the pre-existing condition limitation period shown on the rider schedule and are administered consistently with any other sickness.

#### Premium

Your premium can be changed only if we change it on all riders of this kind in force in the state where the rider was issued.

#### Eliaibility

We will pay benefits as described in the policy for a covered sickness if any covered person is confined to a hospital due to a covered sickness if: the covered sickness occurs while this rider is in force; the covered sickness occurs on or after the rider coverage effective date as shown on the rider schedule; and the covered sickness is not excluded by name or specific description in this rider.

### Renewability

Your rider is guaranteed renewable for life for as long as you pay premiums when they are due or within the grace period, except that we may discontinue or terminate the rider if you have performed an act or practice that constitutes fraud or have made an intentional misrepresentation of material fact relating in any way to the policy or rider, including claims for benefits under the policy or rider.

## Termination of this Rider

This rider will terminate on the earliest of: the date the policy to which this rider is attached terminates; the date premium for this rider is not paid by the end of the grace period; or the date we receive your written request to terminate this rider.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. Applicable to policy form IAC4000 and rider form R-SHC4000 (including state abbreviations where used, for example: IAC4000-AL). For cost and complete details of coverage, call or write your Colonial Life benefits counselor or the company.

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# **Accident Insurance**

Wellbeing Assistance Standard Benefit



This benefit can help reduce the risk of serious illness through early detection of disease or other risk factors, giving you more protection from the unexpected.

## Wellbeing assistance standard .....\$\_

Payable once per covered person per calendar year; subject to a 30-day waiting period<sup>1</sup>

- Blood test for triglycerides
- Bone marrow testing
- · Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- · Carotid Doppler
- CEA (blood test for colon cancer)
- · Chest X-ray
- Colonoscopy
- Echocardiogram (ECHO)
- Electrocardiogram (EKG, ECG)
- Fasting blood glucose test
- Flexible sigmoidoscopy

- · Hemoccult stool analysis
- Mammography
- Pap smear<sup>2</sup>
- PSA (blood test for prostate cancer)
- Serum cholesterol test for HDL and LDL levels
- Serum protein electrophoresis (blood test for myeloma)
- Skin cancer biopsy
- Stress test on a bicycle or treadmill
- Thermography
- ThinPrep pap test<sup>2</sup>
- Virtual colonoscopy



To learn more, talk with your Colonial Life benefits counselor.

- 1 No waiting period in ID, MD, MO and VT.
- 2 In WV only, benefit is also payable for human papillomavirus screening test.

#### THIS POLICY PROVIDES LIMITED BENEFITS.

This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for this coverage.

### **EXCLUSIONS FOR ARIZONA**

We will not pay benefits for losses that are caused by, contributed to by or occur as the result of a covered person's felonies or illegal occupations, hazardous avocations, racing, semi-professional or professional sports, sickness, suicide or injuries which any covered person intentionally does to himself, war or armed conflict. In addition, we will not pay Accidental Dismemberment Due to Catastrophic Accident benefit for injuries a child sustains during birth, or for injuries that are the result of intoxication or use of narcotics.

## ADDITIONAL DISCLOSURES FOR KENTUCKY

**Waiting Period:** Waiting period means the first 30 days following each covered person's coverage effective date during which no benefits are payable.

**Eligibility for Benefits:** We will pay the benefits for a covered accident if any covered person sustains an injury as a result of a covered accident if:

- The covered accident occurs while the policy is in force;
- The covered accident occurs on or after the policy coverage effective date;
- The covered accident is on an accident type listed on the policy schedule; and
- The covered accident is not excluded by name or specific description in the policy.

What is not covered by this policy: We will not pay benefits for losses that are caused by, contributed to by or occurs as a result of the covered person's felonies or illegal occupations, hazardous avocations, racing, semi-professional or professional sports, sickness or injuries which any covered person intentionally does to himself, war or armed conflict. In addition, we also will not pay the Accidental Dismemberment due to Catastrophic Accident benefit for injuries that are caused by or are the result of birth or intoxicants, narcotics, and hallucinogencis.

**Noncancellable:** This policy is noncancellable. We have no right to change the premiums we charge on this policy. Any riders attached to this policy may be subject to a change in premium. The premium can be changed following the approval of the Commissioner of Insurance only if we change it on all riders of the same kind in force in the state where the policy was issued.

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. Applicable to policy form IAC4000 (including state abbreviations where used, for example: IAC4000-TX). For cost and complete details of coverage, call or write your Colonial Life benefits counselor or the company. An insurance producer may contact you.

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