

24-HOUR ACCIDENT INSURANCE

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



Plan II Schedule of Benefits

Benefit Amount Per Covered Person

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

Accident Specific Sum Injuries Benefit

Dislocations	Reduction	
	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 inches 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

Fractures	Reduction	
	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/Plasma	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
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.