ACCIDENT INSURANCE

Accidents happen! You see and hear about them all the time, especially if you or your friends have children. According to the 2012 National Safety Council Injury Facts Report:

- 1 out of 8 people each year seek medical attention for an injury.
- The average household cost associated with lost wages, medical and other injury related expenses is $6,200.
- There are over 42 million visits each year to hospital emergency rooms for treatment of an injury.
- 53% of all injuries occur in or around the home.
- 40% of injuries are related to sports and leisure activities.
- 9 out of 10 deaths and about 70% of injuries occur off-the-job.

Additionally, even with the best medical insurance, there are going to be out-of-pocket costs. Medical treatment co payments, expenses not covered by the major medical plan, and with the cost of fuel increasing, the direct travel costs getting to and from the hospital or doctors office have to be considered.

ACCIDENT BENEFIT HIGHLIGHTS

Initial Care

Ambulance Ground	$100
Ambulance Air	$500
Emergency Room*	$50
Initial Doctor's Visit*	$50

* *Optional Riders available to increase these amounts.*

Accident Hospital Care

Surgery *(Abdominal or Thoracic)*	$1,000
Blood/Plasma/Platelets	$300
Skin Grafts	25% of Burn Benefit
Hospital Admission	$1,000 *($2,000 if immediately admitted to Intensive Care)*
Hospital Confinement	$240/day up to 365 days *($165/day if outside metro area)*
ICU	$500/day *(30 days)*

Transportation/Lodging

Transportation	$300/round trip
Lodging	$100/night *(30 days)*

Follow-Up Care

Follow-Up Treatment	$50
Medical Appliances	$100
Physical Therapy	$25/day *(6 days)*
Major Diag. Exams/Medical Imaging (CT, MRI, EEG)	$150/year
Prosthetic Device	$500 to $1,000
Rehabilitation Unit	$150/day *(30 days)*

Accidental Death & Dismemberment

Accidental Death:	Insured	$50,000
	Spouse	$50,000
	Children	$10,000
Dismemberment:		$1,500 - $30,000
Common Carrier Accidental Death:		Double the above amounts
Catastrophic Accident:	Insured	$100,000
	Spouse	$100,000
	Children	$50,000

Payable after a 365 day elimination period and benefit reduces by 50% beginning at age 70.

Common Injuries

Burns Schedule	$750 - $10,000
Concussion	$100
Emergency Dental Work	$50 - $150
Eye Injury	$200
Torn Knee Cartilage	$750
Laceration Schedule	$25 - $400
Ruptured Disc	$400
Tendon/Ligament/Rotator Cuff	$150 - $900
Dislocation Schedule	$50 - $8,000
Fracture Schedule	$25 - $10,000

This brochure provides a general description of the important features of Policy Form WS-ACC 8/08 NY.

This brochure is not the insurance contract and only the actual policy provisions will control. Before purchasing coverage, refer to the Policy or Disclosure Statement for state-specific description of benefit provisions, exclusions and limitations.

Policy Exclusions - what we will not pay for

EXCLUSIONS – WHAT WE WILL NOT PAY FOR:

1. Benefits will not be paid for services rendered by a member of the Immediate Family of an Insured Person.

2. We will not pay benefits for an accident or sickness that is caused by or occurs as a result of an Insured Person(s):

   a. being intoxicated or under the influence of any narcotic unless administered on the advice of a Physician and taken according to the Physician's instructions *(the term intoxicated refers to that condition as defined by the law of the jurisdiction in which the accident occurred)*; or due to alcoholism;

   b. participating in an illegal activity that is defined as a felony *("felony" is as defined by law of the jurisdiction in which the activity takes place)*;

   c. intentionally self-inflicting a bodily injury or attempting suicide;

   d. having cosmetic surgery, except that cosmetic surgery shall not include reconstructive surgery when such service is incidental to or follows surgery because of congenital disease or anomaly of a covered dependent child which has resulted in a functional defect;

   e. having dental treatment, except for such care or treatment due to accidental Injury to sound natural teeth within 12 months of the accident and except for dental care or treatment necessary due to congenital disease or anomaly; or

   f. being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary hereto. (If You are a member of a reserve component of the armed forces of the United States, including the National Guard, You may continue or suspend this Policy during a period of active duty. The period of active duty should be no longer than five years. When You notify Us to suspend this Policy, We will refund any premium paid for the coverage after the date We receive notice. We will reinstate this Policy when Your active duty ends without evidence of insurability when We receive (1) Your written request to reinstate this Policy, and (2) the premium for the period from the date Your active service ends to the next premium due date. The reinstated Policy will contain no new exclusions or waiting periods and will be effective as of the date Your active duty ends. If We do not receive both Your written request and the required premium within sixty (60) days after Your active duty ends,You may still apply for reinstatement. In this case, You must comply with the Reinstatement provision).

If off-the-job coverage is selected, this exclusion also applies:

   g. incurring an injury while the Insured Person is working for pay or profit.

Effective Date of Coverage

Coverage becomes effective at 11:59 PM on the date of the signed application.

Guaranteed Renewable

Coverage is guaranteed renewable for life as long as premiums are paid.

NOTICE

This policy provides insurance only for ACCIDENTS. It does not provide basic hospital, basic medical or major medical insurance, as defined by the New York State Insurance Department. The expected benefit ratio for this policy is 50%. This ratio is the portion of future premiums which the company expects to return as benefits, when averaged over all people with this policy.

All benefits are subject to limitations as explained in the policy. They are payable once per covered accident and treatment and/or loss must occur within 90 days of the covered accident unless noted otherwise.