

ACCIDENT FIELD REFERENCE MANUAL





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About USAble Life

USAble Life is an independent insurance company headquartered in Little Rock, Arkansas. Our focus is on specialty insurance programs that support our Blue Cross partners' primary business of health insurance by providing products and services that complement the health and financial security of Blue Cross members.

Contact information

GBO Customer Service: 1-800-882-2824

Website: <u>www.arkbluecross.com</u> or <u>USAbleLife.com</u> Claim and change forms: <u>YourDocumentCenter.com</u>

Correspondence address: USAble Life, P.O. Box 1650, Little Rock, AR 72203-1650

Supplemental features

USAble Life's Accident, Critical Illness, and Hospital Confinement plans offer a variety of options that can play a valuable role in an overall financial security program. This product suite is available exclusively to producers of Arkansas Blue Cross and Blue Shield at www.arkbluecross.com.

Some highlights of the suite include:

- Coverage is available to the applicant and their dependents
- Cash benefits are paid directly to the policyholder or beneficiary to use as they choose
- Policy is guaranteed renewable as long as premiums are paid
- Rates don't increase due to age (policyholder is locked into age at effective date)
- Pays in addition to other insurance the policyholder may have
- Policy includes a 30-day 'free look' period, during which the policyholder can cancel and receive a refund

Product information

Highlights

- Pays cash that can be used to help cover medical and non-medical expenses associated with an accidental injury
- 24 hour coverage that pays for accidents that occur on or off the job

Plan design

During enrollment, the applicant/policyholder chooses a plan that will apply to covered persons on the policy.

| | | PLAN 1 | PLAN 2 |
|------------|---|-------------------------|---------------------------|
| A | PHYSICIAN FOLLOW-UP PER VISIT | UP TO \$20 | UP TO \$30 |
| T RECOVERY | PHYSICAL THERAPY PER SESSION | \$20 | \$30 |
| E | MEDICAL APPLIANCE | \$70 | \$105 |
| 蒉 | TRANSPORTATION | \$300 | \$450 |
| ~ | FAMILY LODGING PER NIGHT | UP TO \$70 | UP TO \$105 |
| | PROSTHETIC DEVICE OR ARTIFICIAL LIMB 1 DEVICE OR LIMB/ 2+ DEVICES OR LIMBS | \$350/\$700 | \$525/\$1,050 |
| AE . | AMBULANCE GROUND/AIR | \$100/\$750 | \$150/\$1,125 |
| A C | HOSPITAL ADMISSION | \$1,250 | \$1,500 |
| S . | HOSPITAL CONFINEMENT PER DAY STANDARD/INTENSIVE CARE UNIT | \$195/\$300 | \$325/\$500 |
| _ | BL00D/PLASMA | \$100 | \$150 |
| E | BURNS | - | \$750 |
| Ē | TENDON/LIGAMENT | - | \$300 |
| Ĕ | EYE INJURY | - | UP TO \$150 |
| 喜 | TORN KNEE CARTILAGE/RUPTURED DISC | - | UP TO \$310 |
| æ | FRACTURES/DISLOCATED JOINT | - | UP TO \$1,250 |
| | TORN ROTATOR CUFF | - | \$310 |
| | INTERNAL INJURIES | - | \$630 |
| | CONCUSSION | - | \$30 |
| | LACERATIONS | - | UP TO \$250 |
| | MAJOR DIAGNOSTIC EXAM | \$100 | \$150 |
| | EMERGENCY TREATMENT INDIVIDUAL/SPOUSE/CHILD | UP TO \$70/\$70/\$40 | UP TO \$105/\$105/\$60 |
| | EMERGENCY DENTAL WORK (BROKEN TOOTH) CROWN/EXTRACTION | \$100/\$30 | \$150/\$45 |

| | | INDIVIDUAL/SPOUSE | CHILD (REN) |
|--------------|--|-----------------------------|-------------|
| _ | ACCIDENTAL DEATH MUST OCCUR WITHIN 90 DAYS OF CO | VERED ACCIDENT | |
| SE SE | COVERED ACCIDENT | \$100,000 | \$32,500 |
| MBB | COMMON CARRIER ACCIDENT | \$375,000 | \$65,000 |
| DISMEMBERMEN | ACCIDENTAL DISMEMBERMENT MUST OCCUR WITHIN | 90 DAYS OF COVERED ACCIDENT | |
| .z | LOSS OF 1 MEMBER A MEMBER IS A HAND, FOOT, EYESIGHT, SPEECH OR HEARING | \$100,000 | \$32,500 |
| LOEATH | LOSS OF 2 MEMBERS A MEMBER IS A HAND, FOOT, EYESIGHT, SPEECH OR HEARING | \$25,000 | \$9,500 |
| ACCIDENTAL | LOSS OF 1 OR MORE FINGERS OR TOES* | \$5,000 | \$1,500 |
| | LOSS/TREATMENT | | |
| | PARALYSIS- QUADRIPLEGIA | \$32,500 | \$32,500 |
| PTIONAL | PARALYSIS- PARAPLEGIA | \$16,250 | \$16,250 |
| 0 | сома | \$32,500 | \$32,500 |
| | | | |

Coverage tiers

During enrollment, the applicant/policyholder chooses the coverage tier.

- Individual
- Individual + Spouse
- Individual + Child
- Family

Effective dates

Benefits are effective on the first of the month following application (same month if applying on the first of the month).

Primary and spouse eligibility requirements

- 1) Age 18 64 on effective date
- 2) Arkansas resident and U.S. citizen (or have been issued a permanent residency visa and have lived in the U.S. for the last six months)

Child eligibility requirements

- Unmarried natural child, stepchild, or legally adopted child (or placed for adoption)
- Birth 22 years on effective date

Exclusions and limitations

This policy pays only for loss resulting from a Covered Accident as defined in this policy. It does not cover injury incurred as a result of the covered person:

- 1) Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces
- 2) Intentionally self-inflicting bodily injury or attempting suicide, while sane or insane
- 3) Participating in any form of flight aviation other than as a fare-paying passenger in a fully licensed/passenger-carrying aircraft
- 4) Participating in, or attempting to participate in, an illegal activity that is defined as a felony as defined by the law of the jurisdiction in which the activity takes place, whether charged or not; or being incarcerated in any type of penal institution
- 5) Participating in any activity or event, including the operation of a vehicle, while under the influence of a narcotic (unless administered by a physician and taken according to the physician's instructions) or while intoxicated. "Intoxicated" means that condition as defined by the laws of the jurisdiction in which the accident occurred. Conviction is not necessary for a determination of being intoxicated
- 6) Driving any commercial passenger-carrying or cargo vehicle, except school buses, for wage, compensation, or profit
- 7) Mountaineering using ropes and/or other equipment, parachuting, or hang gliding
- 8) Having cosmetic surgery or other elective procedures that are not medically necessary or having dental treatment except as a result of injury
- 9) Participating in any sport or activity for wage, compensation, or profit; or racing any type vehicle in an organized event
- 10) Having any sickness or declining process caused by a sickness, including physical or mental infirmity or infection (except bacterial infection from a covered accidental injury)

Termination

Primary/policyholder: Coverage does not terminate due to age. No benefits are payable after the termination of this policy except for covered losses incurred before such termination. Provided, if the insured person is totally disabled or confined to a hospital due to a condition covered by this policy at the time of termination, benefits shall continue during the term of such total disability or hospital confinement. See "Extension of Benefits" below.

Extension of benefits: If an insured person is totally disabled or confined to a hospital due to a covered condition on their termination date, the coverage provided for that insured person by this policy and any attached riders will be extended. During the extended coverage period, the applicable policy and rider provisions, exclusions, exceptions, and limitations will be the same as would have applied had coverage not terminated for such insured person. This extension is limited to confinement and/or expenses incurred:

- 1) For the injury or sickness which caused the total disability or hospital confinement;
- 2) During the uninterrupted continuance of the total disability or hospital confinement and shall be limited to the policy benefit period or payment of the maximum benefits.

For this provision, total disability means the complete incapacity of the insured person, as the result of the covered injury or sickness:

- 1) To engage in any occupation for pay or profit for which he or she is or may become reasonably qualified by training, education, experience, age, and physical and mental capacity; or
- 2) If not employed, to engage in the normal activities of a person of the same age and sex who is free of any physical or mental disease or disorder; and
- 3) Which requires the regular care of a physician.

Spouse coverage: Spouse coverage will terminate on the next premium due date following the death of the policyholder or the date of the divorce decree. In these situations, USAble Life will renew the policy with the spouse as the primary insured as long as the spouse remains eligible for coverage and makes timely premium payments.

Child coverage: Coverage for each dependent child will terminate on the next premium due date following the earlier of (a) their 23rd birthday; (b) marriage; or (c) their termination of dependency upon you for support and maintenance.

Coordination of benefits

RTLACC -AR FRM - 0619

Accident benefits do not coordinate with any other insurance the policyholder may have.

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Underwriting

Driver's license history

During the enrollment process, a question regarding driver's license suspension or revocation to confirm the applicant's eligibility for Accident insurance will be asked.

If any applicants have had their driver's license suspended or revoked within 5 years, the entire application will be declined.

Underwriting process

During the enrollment process, the applicant will answer knockout questions on the ABCBS portal. The automated underwriting assessment reviews and analyzes the applicants' responses to these health questions. The underwriting assessment will produce an instant decision.

The applicant should be advised before answering the questions to be as accurate as possible in their answers, as incorrect answers could lead to denial of a claim or rescission of coverage.

- 1. Within the past 5 years, has any applicant had their driver's license suspended or revoked?
- 2. Is any applicant unable to engage in their regular and customary activities due to an injury or sickness?

Claims

Claims forms and correspondence

Claims forms are available through any of the channels below:

Online: <u>YourDocumentCenter.com</u>
 Customer Service: 1-800-370-5856

Proof of loss

Written proof of loss must be given to USAble Life within 90 days after such loss. If it was not reasonably possible to give written proof in the time required, USAble Life will not reduce or deny the claim for this reason if the proof is filed as soon as reasonably possible. In any event, the proof required must be given no later than one year from the time specified unless the claimant was legally incapacitated.

Payment of claims

All benefits will be paid to the policyholder. Any benefits unpaid at the policyholder's death will be paid to the designated beneficiary. If there is no named beneficiary living at the policyholder's death, USAble Life may pay any amount due to one of the following classes of survivors: (1) spouse; (2) surviving children in equal shares; (3) mother and/or father; (4) brother and/or sister; or (5) policyholder's estate. At our option, an amount up to the maximum allowable by the state laws of the covered person's state of residence may be paid to any person who incurred funeral or other expenses related to the last illness or death of the covered person.

Administration

Licensing and appointment

To sell these products in the state of Arkansas, the producer must be licensed in Arkansas and appointed with USAble Life. Please contact <u>licensing@usablelife.com</u> for appointment information.

Commissions

GBO pays commissions on behalf of USAble Life. ABCBS managers have access to agent commission information on the portal.

Taxability

Benefits may (or may not) be taxable as income to the recipients. A tax advisor should be consulted regarding tax impacts.

Effective Date

Benefits are effective on the first of the following month after enrollment. All subsequent charges are 7 days in advance of the next coverage period.

Billing

Premium payments: Ongoing premium payments are paid to GBO via monthly bank draft or credit/debit card, and no billing statement will be mailed.

Example:

Enrollment date: 6.6.19 Effective date: 7.1.19

- First charge on 6.6.19
- Second charge on 7.24.19
- Third charge on 8.24.19
- Ftc.

Payment information must be submitted during the enrollment process.

Grace period: A 31-day grace period will apply to the payment of premiums, during which the policy will stay in force. After the end of the grace period, the policy is terminated.

For billing questions, contact GBO at 1-800-882-2824.

Policy Issuance

Policies are issued at the time of enrollment and can be accessed through the GBO portal.

Policy maintenance

Increases and changes in coverage

To increase or make a change to existing coverage, the policyholder should contact GBO and initiate the request or download the form and submit the change.

Beneficiary changes

A beneficiary can be designated during the enrollment process on ABCBS portal. To change an existing beneficiary designation, the policyholder should contact GBO and initiate the request or download the form and submit the change.

Replacement

Current policyholders should contact USAble Life directly to replace an existing USAble Life policy.

Rates

Accident monthly rates are included below.

| | | PLAN 1 | PLAN 2 | OPTIONAL AD&D |
|---------|-----------------------|---------|---------|---------------|
| S | INDIVIDUAL | \$9.38 | \$17.12 | \$5.20 |
| Y RATES | INDIVIDUAL + SPOUSE | \$12.46 | \$22.72 | \$6.60 |
| MONTHLY | INDIVIDUAL + CHILDREN | \$13.40 | \$24.42 | \$7.20 |
| MO | INDIVIDUAL + FAMILY | \$16.52 | \$30.04 | \$8.60 |

USAble Life may change the premium rate, but only if the rate is changed for all like policies in Arkansas.

Policy definitions

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|-------------------------------|---|
| Term | Policy definition |
| Ambulance | Benefit is payable for ground or air ambulance transportation if a licensed professional ambulance company transports the insured person to or from a hospital or between medical facilities due to a covered accident and within 30 days of the covered accident. Pays for air ambulance transportation to or from a hospital or between medical facilities within 72 hours of the accident. USAble Life will pay this amount once per accident. |
| Blood and Blood Plasma | Benefit is payable for transfusions of whole blood and blood products, which are limited to red blood cells, platelets, fresh frozen plasma, cryoprecipitate, and leukocytes including the processing, typing, cross-matching, and administration of the blood or blood products if given within 30 days of the accident. USAble Life will pay this amount once per covered accident. |
| Burns | Benefit is payable for treatment of a second-degree burn which covers at least 36% of the body surface or for a third-degree burn which covers at least nine square inches of the body surface. Treatment must be received within 72 hours after the accident. This benefit is paid once per accident. |
| Common Carrier Accident | The insured person is injured in a covered accident while a fare-paying passenger on a common carrier. Common carrier vehicles are limited to commercial airplanes, trains, buses, trolleys, subways, ferries, and boats that operate on a regularly scheduled basis between predetermined points or cities. Taxis and privately chartered vehicles are not considered common carrier vehicles. |
| Confined or Confinement | Medically necessary care as a resident bed patient in a hospital because of a covered accident. It must be for at least 12 hours in the same facility. A physician must recommend and supervise the confinement. Confinement does not mean care as an outpatient or in an emergency or observation room. |
| Concussion | Benefit is payable for treatment for a concussion sustained in a covered accident. Concussion must result in electroencephalogram abnormality within 30 days after the accident. |
| Covered Accident | Accidental bodily injury which: 1) is sustained on or after the effective date of coverage 2) is the direct cause of the loss independent of sickness, disease, bodily infirmity, or any other cause 3) occurs while the policy is in force |
| Dislocation (separated joint) | Pays the benefit amount shown below for a dislocation (completely separated joint) diagnosed by a physician within 30 days after the accident. It can be corrected by open (surgical) or closed (non-surgical) reduction and without anesthesia by a physician. |

If the insured person receives more than one dislocation in a covered accident, USAble Life will pay for all dislocations. However, USAble Life will pay no more than 150% of the amount for the joint involved that has the highest benefit amount. If the insured person receives a fracture and a dislocation in the same accident, USAble Life will pay for both. However, USAble Life will pay no more than 150% of the amount for the bone or joint involved which has the highest benefit amount. If a physician diagnoses the dislocation as an incomplete dislocation, USAble Life will pay 25% of the amount shown for the joint involved. An incomplete dislocation is a dislocation in which the joint is not completely separated. Loss Open Closed Without Anesthesia qiH \$1,250 \$310 \$80 \$30 Knee \$310 \$120 \$30 Shoulder \$310 \$120 Collar Bone \$500 \$100 \$30 Ankle or Foot \$310 \$100 \$30 Lower Jaw \$310 \$160 \$40 Wrist \$250 \$120 \$30 \$250 \$30 **Elbow** \$120 \$30 \$10 Toe or Finger \$60 The date shown on the Policy Schedule for all covered persons accepted for coverage at the time of issue provided the application has been accepted and approved by USAble Life, the policy has been issued and the full first premium has been paid; or the date shown by endorsement for all covered persons added to coverage after the policy has **Effective Date** been issued. The effective date is assigned by USAble Life in accordance with our policy dating rules in effect at the time this policy is issued. The coverage provided by this policy will not be effective unless there has been no change since the date of the application and the effective date of the policy in the health of any proposed covered person listed on the application. **Emergency** Dental Benefit is payable for treatment begun within 30 days after the accident, limited to one Work benefit per person per accident.

Emergency Treatment

covered person.

Pays the actual charges, up to the benefit amount for treatment in an emergency room, physician's office, or standalone emergency center within 72 hours of the accident. This

benefit is payable once per 24-hour period and only once per covered accident per

| | laceration which is no | t repaired | with stitches | s, staples, or | reign body from the eye or for a glue, the maximum benefit paid id the Follow-Up Physician Visit |
|------------------------------|---|------------|---------------|-------------------|--|
| Eye Injury | Benefit is payable if the insured person sustains an eye injury requiring surgery or removal of a foreign object within 30 days of the accident. USAble Life will pay this amount for each covered accident. An examination with anesthesia will not be considered surgery. | | | | |
| Family Lodging | Benefit is payable per night for a single motel/hotel room for a member of the immediate family to accompany the covered person if treatment of injuries sustained in a covered accident requires non-local hospital confinement. The hospital and motel/hotel must be more than 100 miles from the residence of the covered person. This benefit is payable up to 30 days per accident and only during the time the injured covered person is confined in the hospital. | | | | |
| Follow-up Physician Visit | Pays actual charges up to the benefit amount for each follow-up visit for injuries sustained in a covered accident. The benefit is limited to one visit per day and a maximum of six visits per accident per person. Treatment must be over and above emergency treatment administered in the first 72 hours following the accident and must begin within 30 days of the covered accident or discharge from the hospital. Treatment must be furnished by a physician in a physician's office or in a hospital on an outpatient basis. This benefit is not payable for the same visit that the Physical Therapy benefit is paid. | | | | |
| | | nysician w | ithin 14 days | s after the acc | a bone which can be seen by X- cident. The fracture must require hysician. |
| | If the insured person receives more than one fracture in a covered accident, and require open or closed reduction, USAble Life will pay for all fractures. However, Usable Life will pay no more than 150% of the amount for the bone involved, which has highest benefit amount. | | | | all fractures. However, USAble |
| Fracture (broken bone) | If a physician diagnoses the fracture as a chip fracture, USAble Life will pay the amount shown for the bone involved. A chip fracture is a fracture in which a piece of the bone is broken off near a joint at a place where a ligament is usually attached. | | | | |
| bone) | If the insured person receives a fracture and a dislocation in the same accident, USAble Life will pay for both. However, USAble Life will pay no more than 150% of the amoun for the bone or joint involved that has the highest benefit amount. | | | | |
| | Loss | Open | Closed | Chip Fractures | |
| | Hip | \$1,250 | \$630 | \$80 | |
| | Leg | \$630 | \$320 | \$40 | |

| Hand (excluding fingers) | #210 | #1/0 | ф2 0 | |
|----------------------------|-------------|-------------|-------------|--|
| | \$310 | \$160 | \$20 | |
| Foot (excluding toes/heel) | | | | |
| | \$310 | \$160 | \$20 | |
| Wrist | \$310 | \$160 | \$20 | |
| Elbow | \$310 | \$160 | \$20 | |
| Shoulder blade | \$310 | \$160 | \$20 | |
| Forearm | \$310 | \$160 | \$20 | |
| Ankle or kneecap | \$310 | \$160 | \$20 | |
| Sternum or lower jaw | \$310 | \$160 | \$20 | |
| Vertebrae (body of) | \$630 | \$320 | \$40 | |
| Pelvis (excluding coccyx) | \$630 | \$320 | \$40 | |
| Upper jaw | \$370 | \$180 | \$24 | |
| Upper arm | \$370 | \$180 | \$24 | |
| Face (excluding nose) | \$370 | \$180 | \$24 | |
| Rib or ribs | | | | |
| TAID OF TIDS | \$630 | \$70 | \$40 | |
| Nose, heel, or fingers | 4042 | 470 | 400 | |
| | \$310 | \$70 | \$20 | |
| Соссух | \$130 | \$70 | \$8 | |
| Toes | \$130 | \$70 | \$8 | |

| | Vertebral process | \$630 | \$100 | \$40 | |
|----------------------|--|--|--|--|--|
| | Skull | 7 2 2 2 | , , , , | 7 10 | |
| | Depressed | \$940 | \$940 | \$940 | |
| | Simple | \$310 | \$310 | \$310 | |
| Hospital | hospital by the respon to provide first level tre a charge is made. Org clinical laboratory, di emergency, medical, institution must provi licensed graduate reg more physicians. It mu records. Not included in the ter or used principally (a) clinic, continued or ex | sible state eatment of ganized far and surgioned 24-houst maintant of the trutended control of the state of the trutended control of the state of th | e agency. It raise agency. It raise and in acilities inclu X-ray, and ical services our nursing arse on duty in on its preral is an institue atment or care hospital | must have org jured persons de emergenc surgical ser must be prov services by or or call and be nises the pation ution or part of care of drug a or rehabilitati | ch is licensed or approved as a panized facilities on its premises on an inpatient basis for which y services, admission services, vices. Treatment facilities for vided within the institution. The or under the supervision of a expervised by a staff of one or ent's written history and medical fan institution which is licensed ddicts or alcoholics; or (b) as a on facility, convalescent home, aged; or (c) as a stand-alone |
| Hospital Admission | Benefit is payable if the insured person is admitted to a hospital and confined because of injuries received in a covered accident. The insured person must become confined as a resident bed patient to a hospital within 30 days after the accident. This benefit is payable once per hospital confinement and only once per calendar year per covered person. | | | | |
| | Benefit is payable per day for up to 365 days of confinement if the insured person is confined in a hospital or a sub-acute intensive care unit because of injuries received in a covered accident within 30 days of the accident. USAble Life will pay benefits for only one hospital confinement at a time even if is caused by more than one accident. | | | | |
| Hospital Confinement | confined again within treat this confinement | 90 days for as a cor n the per | or the same a ntinuation of iods of hosp | accident or re the prior con | acute intensive care unit and is lated condition, USAble Life will finement. If more than 90 days ent, USAble Life will treat this |
| | USAble Life will not pa Unit Confinement ben | | | | and the Hospital Intensive Care will be paid. |

| | If the insured person is confined in a hospital intensive care unit for more than 15 days, the Hospital Confinement benefit will begin on the 16th day. The total amount payable per covered accident will not exceed 365 days for Hospital Confinement and 15 days for Hospital Intensive Care Unit Confinement. |
|---------------------------------------|---|
| | Benefit is payable per day for up to 15 days of confinement in a Hospital Intensive Care Unit. The confinement in a hospital intensive care unit must begin within 30 days after the accident. Only one payment amount under this benefit or the Hospital Confinement benefit will be paid per day of confinement; the larger benefit will be paid. |
| | If the insured person is confined in a hospital intensive care unit and becomes confined to a hospital intensive care unit again within 90 days for the same accident or related condition, USAble Life will treat this confinement as a continuation of the prior confinement. If more than 90 days have passed between the periods of confinement in a hospital intensive care unit, USAble Life will treat this confinement as a new confinement. |
| Hospital Intensive Care Unit (ICU) | A Hospital Intensive Care Unit is a place which (a) is a specifically designated area of the hospital that provides the highest level of medical care and is restricted to patients who are critically ill or injured and who require intensive, comprehensive observation and care; (b) is separate and apart from the surgical recovery room and from rooms, beds, and wards customarily used for patient confinement; (c) is permanently equipped with special lifesaving equipment for the care of the critically ill or injured; (d) is under constant and continuous observation by a specially trained nursing staff assigned exclusively to the unit on a 24 hour basis; and (e) has a physician assigned to the unit on a full-time basis. |
| | Notwithstanding the above, an intensive care unit is not any of the following step down units: (a) a progressive care unit, (b) an intermediate care unit, (c) a private monitored room, (d) a sub-acute intensive care unit, (e) an observation unit, (f) a telemetry unit, or (g) any facility not meeting the definition of a hospital intensive care unit as defined above. |
| Internal Injuries | Benefit is payable for internal injuries resulting in open abdominal, hernia, or thoracic surgery within 30 days after the accident. |
| Injury | Only accidental bodily injury which: 1) is sustained on or after the effective date of coverage 2) is the direct cause of the loss independent of sickness, disease, bodily infirmity, or any other cause 3) occurs while the policy is in force All injuries sustained in any one accident and all complications and recurrence of |
| | complications are considered to be a single "injury." |
| Knee Cartilage – Torn | Pays the benefit shown below if the insured person receives the treatment listed for a torn knee cartilage. The injury must be treated by a physician within 60 days of the accident, and a physician must repair it through surgery within one year after the accident. Only one payment amount under this benefit will be paid. |

| | Loss | Amount | | |
|--------------------------|---|-------------------|-------------------|--|
| | Exploratory surgery without repair | \$150 | | |
| | Surgical repair | \$310 | | |
| | Pays the benefit amount shown below if the insured person receives the treatment listed for a laceration (a cut) sustained in a covered accident. The injury must be repaired by a physician within 72 hours of the accident. | | | |
| 1 | Length of lacerations | Amount | | |
| Lacerations | Single laceration less than two inches | \$30 | | |
| | Total of all lacerations: | | | |
| | At least two inches but not more than six inches | \$130 | | |
| | Over six inches (total of all lacerations) | \$250 | | |
| | Laceration(s) not requiring stitches, staples, or glue | \$16 | | |
| Major Diagnostic Exam | Benefit is payable if the insured has one of the following covered accident due to injuries sustained in the tomography) scan, MRI (magnetic resonance imaging), or Payable once per accident. | accident: CT | (computerized | |
| | These exams must be performed in a hospital, physician center. | n's office, or am | bulatory surgical | |
| Medical Appliance | Benefit is payable for medical appliances if a physician prescribes the use of a medical appliance as an aid in personal locomotion or mobility (e.g., crutches and wheelchairs). Payable once per accident. | | | |
| Physical Therapy | Benefit is payable if the insured person requires physical therapy as a result of a covered accident. USAble Life will pay this amount per visit with a maximum of five visits per covered accident. This benefit is not payable for the same visit that the Follow-up Physician Visit benefit is paid. | | | |
| Prosthetic | Benefit is payable for the purchase of a prescribed prosthetic device or artificial limb within one year of the accident, to restore functional use as a result of injuries sustained in an accident; or USAble Life will pay if more than one device is prescribed. This benefit is payable only once per accident. | | | |
| Device/Artificial Limb | This benefit is not payable for hearing aids, dental aid cosmetic prosthesis, e.g., hair wigs. Payment will not be an artificial hip or knee. | | | |
| Ruptured Disc | Benefit is payable if the insured person receives the treatment listed for a ruptured disc. A ruptured disc is a herniated, ruptured, or prolapsed intervertebral disc that is diagnosed by myelography, computed tomography (CT), or magnetic resonance imaging (MRI). A physician must treat it within 60 days after the accident. It must be repaired through surgery by a physician within one year after the accident. | | | |
| Tendon/Ligament | Benefit is payable if the insured person receives one or more injured tendons or ligaments in a covered accident. The tendon or ligament must be torn, ruptured, or severed. A physician must repair it through surgery within one year after the accident. | | | |

| | If the insured person is in an accident and receives a fracture or a dislocation and tears, ruptures, or severs a tendon or ligament, USAble Life will pay only one benefit. USAble Life will pay the larger of either the Tendon/Ligament benefit, the Fracture benefit, or the Dislocation benefit. |
|-------------------|--|
| Torn Rotator Cuff | Benefit is payable for surgery to repair one or two rotator cuffs. A physician must repair the torn rotator cuff through surgery within 90 days after the accident. |
| Transportation | Benefit is payable per trip to the hospital if a covered person requires special treatment and confinement in a hospital located more than 100 miles from the person's residence or site of the accident for injuries sustained in a covered accident. This benefit will be paid only (a) for the person for whom the treatment is prescribed and [(b) if the treatment is for a dependent child and commercial travel is necessary, for the dependent child's parent or legal guardian who travels with the child. Only one person will be paid to travel with the dependent child.] The local attending physician must prescribe the treatment, and the treatment must not be available locally. This benefit is not payable for transportation by ambulance or air ambulance to the hospital. This benefit is payable for up to three trips per calendar year per person. |