



If they need you, you need a Champion

Good things in life happen every day, and unfortunately, accidents happen too. You need a champion to defend and protect everything you value—your family, your goals, your dreams, your independence—in essence, your life.



Taylor & Sons Insurance
School & Municipality Program
Toll Free: (877) 365-2341



First Accident Benefit pays you \$100 quickly.



Sports Package pays 25% higher benefits.

No one plans on getting injured ... but just in case, we've got you covered.

You do everything you can to stay active and healthy, but accidents happen every day, including sports-related accidents. An injury that hurts an arm or a leg can hurt your finances too. That's where Accident Champion can help.

Accident Champion **pays cash benefits directly to you** or anyone you choose regardless of any other coverage you have. And Accident Champion pays extra benefits for injuries resulting from participating in organized sports. Let Accident Champion help take care of your bills so you can take care of yourself and your family.

Accident Champion Benefits **always** include:

First Accident

Pays you \$100 soon after you report your first claim for covered benefits!

If you get injured, we can begin processing your claim right over the phone so you can get cash fast.

Sports Package

Your benefits **increase 25%**, up to \$1,000 per person per year, for injuries resulting from participating in organized sports! Playing sports can lead to injuries and unwelcome expenses. We'll increase your benefits to help pay those expenses.

Rehabilitation Package

We pay cash benefits for Admission, Daily Confinement and Recovery!

Whether you are released to a Rehabilitation Center following a hospital stay or you recover at home, we pay a daily recovery benefit to help with your transition.

Here's How Accident Champion Benefits Work:

Accident Champion helps pay for the unexpected costs of an accidental injury by providing benefits for initial care, injuries, treatment, facility care and follow-up care.

If you get injured at soccer practice and break your leg, here's how benefits may stack up:

DIAMOND PLAN	
First Accident	\$ 100
Ambulance	\$ 200
ER Visit	\$ 125
X-Ray	\$ 40
Fracture	\$ 1,000
Crutches	\$ 100
Physical Therapy	\$ 500
Follow-up Visits	\$ 150
Subtotal	\$ 2,215
PLUS Sports Package	\$ 554
Total Payment	\$ 2,769

The Sports Package increases the total benefit payment by **25%**

BENEFITS INCREASE \$554

This claim scenario is hypothetical and is offered solely to illustrate the types of situation that may result in a claim. This scenario is not based on an actual claim and should not be compared to an actual claim. Whether or to what extent a particular loss is covered depends on the facts and circumstances of the loss, the terms and conditions of the policy as issued and applicable law. Refer to the certificate of insurance for details.



Schedule of Benefits 24-hour coverage

GOLD/PLATINUM/DIAMOND PLANS

Initial Care

	GOLD	PLATINUM	DIAMOND
Ambulance			
<i>Ground</i>	\$120	\$200	\$200
<i>Air</i>	\$1,000	\$2,000	\$2,000
Emergency Room	\$75	\$100	\$125
Initial Doctor's Office Visit	\$25	\$50	\$50
Urgent Care	\$50	\$75	\$100
Emergency Dental			
<i>Crown</i>	\$200	\$300	\$400
<i>Extraction</i>	\$50	\$75	\$100

Hospital and Rehabilitation

Hospital Admission	\$500	\$1,000	\$1,250
ICU Admission	\$1,000	\$2,000	\$2,500
Rehabilitation Admission	\$500	\$1,000	\$1,250
Hospital Confinement			
<i>Per day, up to 365 days</i>	\$150	\$225	\$250
ICU Confinement			
<i>Per day, up to 30 days</i>	\$300	\$450	\$500
Rehabilitation Confinement			
<i>Per day, up to 30 days</i>	\$90	\$135	\$150
Recovery			
<i>Per day, up to seven days</i>	\$50	\$75	\$100

Follow-up Care & Treatment

Abdominal or Thoracic Surgery	\$750	\$1,500	\$1,500
Appliances	\$75	\$100	\$100
Blood, Plasma, Platelets	\$200	\$300	\$300
Chiropractic Care			
<i>Per visit, up to three visits</i>	\$25	\$25	\$25
Concussion	\$60	\$100	\$100
Follow-up Treatment			
<i>Per visit, up to three visits</i>	\$25	\$50	\$50
Lodging			
<i>For treatment 100 miles or more away, per night, up to 30 nights</i>	\$100	\$125	\$150
Major Diagnostic Exam (CT, MRI, etc.)	\$100	\$150	\$200
Organ Loss	\$2,500	\$2,500	\$2,500
Outpatient Surgery Facility	\$25	\$25	\$25
Physical Therapy			
<i>Per visit, up to six visits Gold; up to 10 visits Platinum & Diamond</i>	\$25	\$50	\$50
Prosthetics	\$500	\$1,000	\$1,500
Tendon, Ligament, Rotator Cuff Surgery	\$400	\$500	\$750
Transportation			
<i>For treatment 100 miles or more away, per trip up to three trips</i>	\$300	\$500	\$600
X-ray	\$20	\$30	\$40

Injuries

	GOLD	PLATINUM	DIAMOND
Burns			
<i>Level 1</i>	\$750	\$1,000	\$1,000
<i>Level 2</i>	\$1,500	\$2,000	\$2,000
<i>Level 3</i>	\$7,500	\$10,000	\$10,000
Skin Graft	25% of the burn benefit		
Coma	\$7,500	\$10,000	\$12,500
Dislocations			
<i>Open reduction, up to ...</i>	\$3,600	\$4,400	\$4,800
<i>Closed reduction, up to ...</i>	\$1,800	\$2,200	\$2,400
Eye	\$200	\$250	\$300
Fractures			
<i>Open reduction, up to ...</i>	\$5,000	\$6,000	\$7,000
<i>Closed reduction, up to ...</i>	\$2,500	\$3,000	\$3,500
Herniated Disc	\$400	\$500	\$750
Knee Cartilage - Torn	\$400	\$500	\$750
Lacerations	\$20-\$300	\$30-\$400	\$30-\$500
Loss of Hands, Feet or Sight	\$10,000	\$14,000	\$20,000
Loss of Fingers or Toes	\$1,200	\$1,500	\$2,000

Additional Benefits

First Accident			
<i>Once per policy</i>	\$100	\$100	\$100
Accidental Death			
<i>Employee & Spouse</i>	\$20,000	\$20,000	\$20,000
<i>Child</i>	\$4,000	\$4,000	\$4,000
Catastrophic Accident			
<i>Prior to Age 70</i>			
<i>Employee & Spouse</i>	\$25,000	\$25,000	\$25,000
<i>Child</i>	\$12,500	\$12,500	\$12,500
<i>On or after Age 70</i>	50%	50%	50%
Family Care			
<i>For each child in a child care center: Per day, up to 30 days</i>	\$25	\$25	\$25
Sports Package Benefits are 25% higher			
<i>when accident is due to organized sports.</i>			
<i>Up to \$1,000 per person per year</i>			
Wellness			
<i>Per person, once per year</i>	\$25	\$25	\$50

Monthly Premium

	GOLD	PLATINUM	DIAMOND
Employee	\$9.96	\$13.82	\$16.60
Employee + Spouse	\$18.16	\$25.26	\$30.38
Employee + Child(ren)	\$18.94	\$26.68	\$32.06
Family	\$27.12	\$38.12	\$45.84

Benefits may vary by state. Benefits are paid once per accident unless otherwise noted.

How does **ACCIDENT CHAMPION** help?

You do everything you can to keep your family safe, but accidents happen, and when they do, it's good to know we've got you covered. Let Accident Champion help take care of your bills, so you can take care of your family.



Features

Date of Application Coverage

Coverage becomes effective as soon as your application is signed, you have authorized payment and the Initial Eligibility requirements are met.

Guaranteed Issue

No medical history is required for coverage to be issued.

Guaranteed Renewable

Your coverage cannot be cancelled as long as your premiums are paid as due.

Fully Portable

You can keep your coverage even if you change jobs or retire.

HSA Compatible

Initial Eligibility

Employee

- Actively employed working at least 17.5 hours per week
- Ages 18 and up

Spouse

- Ages 18 and up

Dependent children/grandchildren

- Ages 0 to 26
- No student status required
- Coverage will continue for incapacitated dependent children regardless of age.

Facts

Nearly 40 million emergency room visits each year are due to injuries¹

23.9 million adults ages 18-64 receive medical consultation for injuries each year.¹

Sports and leisure injuries accounted for the **majority of all** injuries among children.¹

¹ National Safety Council, Injury Facts, 2016 Edition

Exclusions & Limitations

This is Accident-Only Insurance. No benefits will be paid for an injury that is caused by, contributed to, or occurs as a result of a covered person's:

- Being intoxicated, or under the influence of alcohol or any narcotic or other prescription drug unless administered on the advice of a Physician and taken according to the Physician's instructions (the term "intoxicated" means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction in which the accident occurred);
- Participating in an illegal activity or attempting to commit or actually committing a felony ("felony" is as defined by the law of the jurisdiction in which the activity takes place);
- Committing or attempting to commit suicide or intentionally injuring himself or herself;
- Having dental treatment, except for such care or treatment due to injury to sound natural teeth within twelve (12) months of the Covered Accident;
- Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary thereto; or
- Participation in any contest using any type of motorized vehicle.

Accident Benefits Summary

Name:

Type of Coverage

Payroll Deduction

Employee

Employee + Spouse

Employee + Child(ren)

Family

\$

If you have questions about this product or want to initiate the filing or processing of a claim, call **1-800-544-9382**.

This is a supplement to health insurance and is not a substitute for major medical insurance. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

This document is a brief description of Certificate Form No. C14059R. Benefits, rates, exclusions and limitations may vary by state. Refer to your certificate of insurance for specific details.

