

Foundations Accident Plan Benefits

Medical bills from an injury can quickly eat a hole in anyone's paycheck. If you've ever seen an itemized medical bill, you know that treatment can involve multiple services and there is a cost for each service.

Foundations Accident pays benefits to help cover the cost of treating accident-related injuries. The plans pay benefits directly to you and can be used to supplement any other coverage you may have.



PRESIDENTIAL LIFE
INSURANCE

Hospital, Surgery and Rehabilitation

Hospital Admission Max 2 per year	\$1,5000
Hospital Confinement 365 days maximum per accident	\$225
Hospital Intensive Care Unit Admission Max 2 per year	\$2,000
Hospital Intensive Care Unit Confinement 30 days maximum per accident	\$600
Hospital Observation Unit 1 days maximum per accident	\$300
Exploratory Surgery 1 per accident	\$150
Anesthesia 1 administration per accident	\$25

Accidents and Injuries

Animal Bite 1 shot per Accident	\$70
Burn 1 Maximum treatments per Accident	up to \$7,500
Burn Skin Graft 1 skin graft per Accident	40% of Burn Benefit
Coma 1 per accident	\$10,000
Concussion 1 per accident	\$300
Dislocation (<i>doubles for open reduction</i>) 1 per accident	up to \$4,000
Emergency Dental Work 1 repair per accident	\$300
Eye Injury 1 surgeries or removal of foreign objects per accident	\$75
Fracture (<i>doubles for open reduction</i>) 1 per accident	up to \$5,250
Gunshot 1 maximum treatments per accident	\$1,500
Knife Wound 1 maximum treatments per accident	50%
Ear Injuries 1 ear lifetime limit	Up to \$200
Laceration 1 treatment per accident	up to \$600

Paralysis 1 per accident	up to \$12,500
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Treatment and Follow-up Care

Accident Emergency Initial Treatment Maximum 2	\$75
Accident Follow-Up Doctor Visit Maximum 2	\$75
Ambulatory Surgical Center	\$150
Blood/Plasma/Platelets 3 transfusions per Accident	20%
Chiropractic Treatment and Alternative Therapy 6 visits per accident	\$25
Outpatient X-ray, Echocardiography and Cardiovascular Ultrasound Max 1 total Outpatient	\$200
Outpatient Advanced Studies (CAT, CT, MRA, PET, MRI) ¹ Max 1 total Outpatient	\$200
Outpatient Injection Max 1	\$200
Outpatient Prescription Drugs 2 prescriptions per accident	\$40
Pain Management 1 injection per accident	\$30
Therapy: Occupational, Physical or Speech Max 3	\$25

Additional Benefits

Appliance: Major (Minor is 1/2 Major) 1 per Accident	\$75
Lodging for Companion 30 days per accident	\$125
Modification of Residence or Automobile 1 per accident	\$1,250
Organized Sporting Activity <i>*Percentage of Accident Maximum during 12-month period</i>	25%*
Prosthetic Device/Artificial Limb 1 devices per accident	\$1,000
Service Dog	\$200

Transportation

Ambulance - Air 1 per Accident	\$2,000
Ambulance - Ground or Water 1 per Accident	\$150
Transportation 3 trips per accident	\$250

OPTIONAL BENEFITS

Sports Package: Increases benefits by 25%
Selected: Yes No
Applies to injuries received while participating
in organized sports.

Accident Emergency Room Benefit __1__ visits per accident	\$100
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OPTIONAL RIDERS

Wellness and Preventive Care Rider \$__50__
Waiting period: __1__ days
__0__ maximum days per calendar year

Monthly Premium

Employee/Member:	\$18.15
Employee/Member/Children:	\$33.32
Employee/Member/Spouse:	\$46.01
Employee/Member/Family:	\$65.57

Turn Over for More Benefits and Optional Riders.

Death and Dismemberment

Accidental Death	\$25,000
Accidental Death – Common Carrier	\$50,000
Accidental Dismemberment 1 per lifetime	\$25,000

THE CERTIFICATE PROVIDES LIMITED BENEFITS. Benefits depend upon the plan selected and the premium will vary by plan. Policy form PLIC_ACC-0623 is not available in all states and benefits may vary by state. This plan has specific terms and conditions relating to coverage, including limitations and exclusions. The definitions of all plan benefits are defined in the certificate.

¹ Advanced studies tests consist of the following: Magnetic Resonance Imaging (MRI); Magnetic Resonance Angiography (MRA); Computed Axial Tomography (CAT Scans); Positron Emission Tomography (PET Scans); and Computed Tomography (CT scans).

SEE CERTIFICATE FOR A COMPLETE LIST OF BENEFITS.



EXCLUSIONS AND LIMITATIONS

PRE-EXISTING CONDITION LIMITATION:

No benefits are payable for the first 12 months for Pre-Existing Conditions under the Sickness and Accidental Disability Income Benefit Rider.

Pre-existing Condition means a condition not otherwise excluded by name or specific description:

1. For which medical advice, testing, care, treatment or medication was given or was recommended by, or received from a Doctor within 12 months before the Rider Effective Date; or
2. That would have caused a reasonably prudent person to seek medical diagnosis or treatment within 12 months before the Rider Effective Date.

A pregnancy that was conceived prior to the Rider Effective Date is also considered a Pre-existing Condition.

EXCLUSIONS:

We will not pay benefits for losses that are caused by, contributed to or occur as a result of any of the following:

1. Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury or any act of autoeroticism, while sane or insane;
2. Travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Covered Person is:
 - a. Riding as a passenger in any aircraft not intended or licensed for the transportation of passengers;
 - b. Performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft; or
 - c. Riding as a passenger in an aircraft owned, leased or operated by the Covered Person's employer;
3. Declared or undeclared war or any act of declared or undeclared war. Loss as a result of acts of terrorism or nuclear release committed by individuals or groups will not be excluded from coverage unless the Covered Person who suffered the loss committed the act of terrorism or nuclear release;
4. Full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Covered Person is not covered due to his/her active duty status will be refunded. Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded.);
5. The Covered Person's being intoxicated (defined as blood alcohol concentration equal to or in excess of .08 gms/dl blood alcohol). This applies whether the Covered Person is charged with any violation in connection with a loss and there is no need to prove a loss was caused, contributed to or resulted from the excessive blood alcohol concentration;
6. The Covered Person's: (a) voluntary use of illegal drugs; (b) intentional taking of over the counter medication not in accordance with recommended dosage and warning instructions; and (c) intentional misuse of Prescription Drugs;
7. The Covered Person's commission of or attempt to commit a felony;
8. The Covered Person being engaged in an illegal occupation;
9. Services and supplies which are not Medically Necessary to treat a covered loss (other than as stated in the Wellness and Preventive Care benefit);
10. Services and supplies which are received without charge or legal obligation to pay or would not normally be paid in the absence of insurance;
11. Occupational Injuries if "Off-job" only is selected;
12. The diagnosis or treatment of sickness or having any sickness, including physical or mental infirmity and any treatment for allergic reactions;
13. Dental care, except as provided under the Emergency Dental Work benefit;
14. Participating in hazardous occupations or other activity including participating, instructing, demonstrating, guiding or accompanying others in the following: professional or semi-professional sports, for which the Covered Person receives any type of compensation or remuneration; parachute jumping; hot-air ballooning; hang-gliding; bungee jumping; sail gliding; parasailing; and parakiting;
15. Bacterial infection not occurring along with or as a result of an Injury.