



Accident and Sickness Protector

Combined Insurance's Accident and Sickness Protector — a good decision

This accident and sickness coverage provides cash benefits to help you and your loved ones when needed most.

Just consider that
in 2022 1 out of 5
people sought medical
attention for an injury.¹



Protection that works for you

The Accident & Sickness Protector covers you on or off the job, 24 hours a day, 365 days a year. You are the owner of this policy — even if you change employers you can keep your coverage without interruption. Claims are payable to you and are paid in addition to any other insurance you might have.

Specified indemnity benefits payable for a covered Accident or Sickness include:

	INSURED CHOICE PLAN (PLAN II)	SPOUSE/CHILD CHOICE PLAN (PLAN II)
Hospital Confinement (per day)	\$165	\$165 / \$82.50
Optional Riders Available		
Outpatient Surgery		
Major	\$1,000	\$1,000 / \$500
Minor	\$100	\$100 / \$50
Intensive Care (per day)	\$1.250	\$1.250 / \$625
Emergency Room (per visit; max. 4 visits/year)	\$200	\$200 / \$100

¹ National Safety Council, InjuryFacts.nsc.org, 2024



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Limitations and Exclusions

Accident and Sickness Policy coverage exclusions

Benefits will not be payable if loss is directly caused by or results from any of the following:

1. Intentionally self-inflicted injuries;
2. Normal pregnancy or childbirth, except for Complications of Pregnancy; or
3. Cosmetic surgery, except that cosmetic surgery shall not include reconstructive surgery when such service is incidental to or follows surgery resulting from trauma, infection, or other diseases of the involved part, and reconstructive surgery because of congenital disease or anomaly of a covered dependent child which has resulted in a functional defect.

Optional riders

The outpatient surgery (Form Series 42906), intensive care (Form Series 42905) and emergency room (Form Series 42907) riders are available for an additional premium.

Spouse (Rider Form No. 42908-NY) and Child (Rider Form No. 42909-210) coverage are also available for an additional premium.

Pre-existing conditions limitation

Loss caused by a pre-existing condition is not covered unless such loss begins 12 months or more from the issue date of the policy.

Pre-existing condition means a sickness or disease which:

1. Required medical advice or treatment in the 12 months before the issue date of the policy; or
2. Symptoms existed within the 12 months before the issue date for which a reasonably prudent person would have sought medical advice or treatment.

This is very important

If a covered individual is a Medicaid recipient, policy benefits may be assigned and payable to your state Medicaid agency. Also, benefit payments you receive may count as income for medicaid eligibility purposes.

Very Important

This is a supplement to health insurance and is not a substitute for Major Medical or other minimum essential coverage.

Notice of Claim / Proof of Loss

Written proof of loss must be given to Combined within 90 days after such loss. If it was not reasonably possible to give written proof within 90 days, the proof required must be given no later than 1 year from the time specified unless the claimant was legally incapacitated.

This document contains a brief description of Accident & Sickness Hospital Indemnity Policy (Form Series 42904), Intensive Care Rider (Form Series 42905), Outpatient Surgery Rider (Form Series 42906) and Emergency Room Rider (Form Series 42907). See the policy and riders for complete details of benefits, exclusions and limitations.