

## **Accidental Injuries and Death**

can occur in the home, on the job, and to your children

**Accident Risk Factors Include:** 



Work



Travel



**Drowning** 



Home



Slips/Falls



Fire/Burn



School



**Poison** 



**Sports** 

The bad news is accidents can be expensive, totaling more than \$1 trillion in the United States. Most people are surprised that their largest expenses during accidents are often not their medical expenses — it's the indirect costs their health insurance doesn't cover.

## **Two Types of Costs:**

#### **Direct Costs**

- Doctor Bills
- Hospital Charges
- Medical Expenses

#### **Indirect Costs**

- Lost Income and Savings
- Living Expenses
- Insurance Limitations
- Travel for Best Treatment
- In-Home Care
- Child Care

While your expenses go up, your income and savings often go down, forcing you to rely on:

- Savings and Investments
- Selling Assets
- Retirement Funds
- College Funds

# \$208 billion

**\$827** billion

### InjurCare Plus Series 6

- Pays benefits directly to you;
   you decide how to spend them
- Pays in addition to any other insurance you own
- This policy's benefits are never reduced
- Premiums don't increase with age or due to claims
- Guaranteed renewable for life only you can cancel
- Policy has no cap on total amount of benefits you receive or the number of claims you can have

BASE 1	STANDARD 2	InjurCare Plus Series 6 – Benefits	PREFERRED 4	ELITE 8
\$50	\$100	<ul> <li>Emergency Treatment Benefit (payable only 3 times per calendar year per person)</li> <li>For emergency treatment within 14 days after a covered accident, charges up to</li> <li>Payable if treatment is received in an Emergency Room, or one of the following:         X-ray, digital motion x-ray, needle aspiration, laceration or puncture wound repair, administration of prescription medicine, tetanus shot, antivenom therapy, treatment for poisoning, repair of damaged tooth, removal of a foreign object from eye, casts, splints, braces, crutches or 2nd or 3rd degree burn treatment</li> </ul>	\$200	\$400
\$50	\$100	Significant Diagnostic Scan Benefit (Maximum per covered accident)  • For the following, received in a doctor's office or hospital within 30 days after an accident:  MRI, Ultrasound, CT/CAT Scan (Computerized Tomography), EEG (Electroencephalogram)	\$200	\$400
\$100	\$200	Hospitalization Benefit (Up to 180 days per covered accident)  • For each day of inpatient hospitalization	\$400	\$800
\$400	\$800	Hospitalization Plus Benefit (Payable once per calendar year, per covered person, per accident)  • Upon inpatient hospitalization	\$1,600	\$3,200
\$50	\$100	Observation Room Benefit (Not payable any day the Hospitalization Benefit is paid) • For each day you are charged for one or more hours in an observation room	\$200	\$400
\$150 \$300	\$300 \$600	Ambulance Benefits (For transportation to a hospital within 48 hours after a covered accident)  • Ground Ambulance  • Air Ambulance	\$600 \$1,200	\$1,200 \$2,400
\$1,250 \$500 \$350	\$2,500 \$1,000 \$700	Fracture Benefit (Complete list of fractures and benefit amounts are shown in the policy) For fractures treated by a physician within 30 days after a covered accident  • Thigh fracture  • Upper Arm fracture  • Wrist / Ankle fracture  (If more than one bone is fractured, amount paid is for the fracture with the highest benefit amount. Chip fractures pay 10%. Stress fractures pay 20%.)	\$5,000 \$2,000 \$1,400	\$10,000 \$4,000 \$2,800
\$800 \$320	\$1,600 \$640	<ul> <li>Dislocation Benefit (Complete list of dislocations and benefit amounts are shown in the policy)</li> <li>For diagnosis and treatment by a physician within 90 days after a covered accident</li> <li>Hip dislocation (with anesthesia)</li> <li>Shoulder dislocation (with anesthesia)</li> <li>(Subsequent dislocations of the same joint will not be covered. If 2 or more joints are dislocated in the same accident, we will only pay for the joint involved with the highest benefit amount.)</li> </ul>	\$3,200 \$1,280	\$6,400 \$2,560
\$200	\$400	<ul> <li>Surgery Benefit</li> <li>For surgery by a physician within one year of the covered accident         (Treatment must be received within 90 days of the accident and benefit is limited to the following surgeries: torn, severed, or ruptured tendons or ligaments; ruptured disc; and torn cartilage)</li> </ul>	\$800	\$1,600
\$25	\$50	Physical Therapy Benefit (Maximum 12 days per covered accident)  • For each day, within 90 days after a covered accident or discharge date, whichever is later	\$100	\$200
\$50	\$100	Concussion Benefit (Not payable when the Coma Benefit is paid for the same covered accident)  • For a concussion diagnosed by a physician within 7 days after a covered accident	\$200	\$400
\$500	\$1,000	Coma Benefit (Payable for loss of consciousness for 24 hours or more) • For a coma diagnosed by a physician within 7 days after a covered accident	\$2,000	\$4,000
\$2,500 \$5,000	\$5,000 \$10,000	<ul> <li>Dismemberment Benefit (This benefit is reduced by any Fracture Benefit paid for the same accident)</li> <li>Pays if an accident causes the dismemberment of a hand, foot or eye within one year</li> <li>Single</li> <li>Multiple (If you later die from the same accident, Accidental Death Benefit is reduced by amount paid for this benefit)</li> </ul>	\$10,000 \$20,000	\$20,000 \$40,000
\$5,000	\$10,000	<ul> <li>Accidental Death Benefit</li> <li>Pays if you are injured in an accident and the injury causes you to die within 90 days after the accident (This benefit is reduced by any Fracture or Dismemberment benefits paid for the same accident)</li> </ul>	\$20,000	\$40,000
\$25	\$50	Family Lodging Benefit (For Single Parent, Couple and Family policies only)  • For each day, up to 60 days, while a covered person is hospitalized due to an accident, up to	\$100	\$200
up to \$2,500	up to \$5,000	Family Education Benefit (For Single Parent and Family policies only)  • Pays when the Accidental Death Benefit is paid for the policyowner or covered spouse for surviving children's tuition at an accredited institution of post-secondary education. Not payable for any child after that child attains age 25.  (Up to \$4,000, \$2,000, \$1,000 or \$500 per calendar year, for up to 5 children)	up to \$10,000	up to \$20,000

#### **Accidental Deaths**

- An accidental-injury-related death occurs once every 3 minutes.
- Accidents are the leading cause of death for all Americans between the ages of 1 and 44.

Source: The National Safety Council, Injury Facts, 2017

#### **Accidental Injuries**

- On average, this year there will be 5,390 disabling injuries every hour.
- Nearly 3 out of 4 accidental injuries occur outside of work.

#### Children

- Accidents are the number 1 killer of children in the United States.
- Causes include:
  - Motor vehicle Poisoning
  - Suffocation

Three examples of what can happen...

**No Claim** 

\$25,000

\$25,000

-0-

Fire/Burns

**Large Claim** 

\$25,000

-\$65,000

-0-

– Drowning – Falls

**Small Claim** 

\$25,000

-\$5,000

\$20,000

#### Issue Age 55 & Under

#### **Cash Value Benefit**

- You are paid if you have claims or if you stay well!
- Your Cash Value Benefit begins building after only four years in the plan. The longer you keep the plan, the more your benefit will grow!
- We RETURN YOUR PREMIUMS, less any claims paid after 25 years!

#### Safe Living Benefit\*

This benefit begins on the Cash Value maturity date and will be paid at the end of each new completed policy year, less any claims paid from that year.

#### Issue Age 56 to 80

#### Safe Living Benefit<sup>\*</sup>

This benefit begins on the effective date and will be paid at the end of each new completed policy year, less any claims paid from that year.

^up to \$320 for Elite – \$160 for Preferred – \$80 for Standard – \$40 for Base

#### Benefit Builder

**Premiums Paid** 

**Less Claims Paid** 

Return

At the end of each of the first 10 years the policy remains in force, we will increase the amount of each benefit by 10% for all benefits except the Emergency Treatment and Safe Living Benefits.

#### **Limitations and Exclusions**

We will not pay benefits for an accidental injury or death contributed to, caused by, or resulting from:

- Your participating in war or any act of war, declared or not.
- Your committing or attempting to commit suicide, regardless of mental capacity.
- Your injuring or attempting to injure yourself or a covered spouse or child intentionally, regardless of mental capacity.
- Your having any disease or bodily/mental illness or degenerative condition. We also will not pay benefits for any related medical/surgical treatment or diagnostic procedures for such illness.
- Your riding in or driving any motor-driven vehicle in an organized race, stunt show or speed test, or while testing any vehicle on any race course or speedway.
- Your operating, learning to operate, serving as a crew member on, or jumping from any aircraft, including those which are not motor-driven.
- Your being legally intoxicated or being under the influence of any narcotic or other illegal substance, unless such narcotic or substance is taken on the advice of a physician and according to the physician's instructions. Having a blood alcohol level that exceeds the level permitted by the laws of the state where the accident occurs which pertain to driving a motor vehicle will be presumptive proof of intoxication.
- Your participating or attempting to participate in a felony or working at an illegal job.
- Your participating in professional or semi-professional sports.
- Your participating for money in a rodeo event.

This is a solicitation for insurance. The benefits described in this brochure are contained in policy series A10POL-TN. This brochure is not an insurance contract. The policy explains the rights and obligations of both Family Heritage and the insured. It is important to read your policy carefully. Please see your Globe Life Family Heritage Division agent for cost and complete details. Underwritten by Family Heritage Life Insurance Company of America, a Globe Life company.



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A (Excellent)
Financial Strength Rating (as of 7/21)\*

<sup>\*</sup>up to \$320 for Elite - \$160 for Preferred - \$80 for Standard - \$40 for Base