VOLUNTARY BENEFITS AT THE WORKPLACE

Accident Insurance

ILLINOIS MUTUAL®

Personal Coverage Plan for

Your Selected Voluntary Accident Insurance Plan

Who will be covered under your plan?

- ☐ Employee Only
- ☐ Employee and Spouse Only
- ☐ Employee and Children Only
- ☐ Employee, Spouse and Children

Coverage option*

- ☐ 24-Hour Coverage
- ☐ Off-the-Job

	Weekly Cost
Selected benefit level* ☐ Economy ☐ Standard ☐ Preferred ☐ Premium	$
Selected optional riders*	
☐ **Off Job Disability Rider** - 6 Month Benefit (employee only)	$
☐ **Off Job Disability Rider** - 12 Month Benefit (employee only)	$
☐ **Sickness Hospital Confinement Rider** ($_____/day) _____$50 _____$100 _____$150 _____$200	$
☐ **Wellness Benefit Rider** ($_____/year) _____$50 _____$100 _____$150 _____$200	$
☐ **Catastrophic Accident Rider** ($100,000 employee, $50,000 spouse, $25,000 child)	$
Total Weekly Premium Amount:	$
Date of First Payroll Deduction**	

*Available on a case basis

**If coverage applied for is approved by Illinois Mutual

Sample Weekly Premium for 24-Hour Standard Plan*

*Premium and benefits may vary by state

Accident Insurance

It's not possible to forecast an accident. You simply can't predict if climbing the ladder to change a light bulb will send you to the emergency room or your next drive to the supermarket will leave you injured. But as all families know, **an unexpected accident can throw everyone into a tailspin.** Even though you can't prevent accidents from happening, **you can ensure you are financially prepared when they do.**

When an accident occurs, ambulance transportation, diagnostic exams, surgery and follow-up doctor's visits leave you to pay insurance deductibles, co-payments and out-of-pocket expenses. **Accident Insurance from Illinois Mutual can cover these out-of-pocket expenses by providing you a cash benefit.**

Coverage Options*

24-Hour Coverage provides coverage for accidents that occur both on-the-job and off-the-job, 24 hours a day and 7 days a week.

Off-the-Job Coverage provides coverage for accidents that occur off-the-job only.

Benefits that Work for You

- Affordable premiums to fit your budget
- No medical exams required
- Convenient payroll deduction
- Portable coverage that you own and can continue even if you leave your job.
- Fast claims service
- Guaranteed renewable coverage. Regardless of claims history, your coverage can't be canceled.

*Available on a case basis and selected by employer.

In 2005, the ***average cost per disabling injury was $52,900.***

– National Safety Council

Coverage Eligibility

- **Employees** age 18 to 69 who are actively at work for a minimum of 20 hours per week.
- **Spouses** age 18 to 69 are eligible to apply if they are not disabled.
- **Dependent children** age 14 days to 18 or to age 24 if a full-time student.

Getting the Payments You Need

Illinois Mutual's Accident Insurance provides a benefit paid directly to you if you have an accident that results in emergency care, hospital care or major injuries. Our claims process provides the quick turn-around time you can rely on.

POLICY BENEFITS	Economy	Standard	Preferred	Premium
EMERGENCY CARE				
Ground Ambulance Transportation	$240	$300	$390	$450
Air Ambulance Transportation	$480	$600	$780	$900
Emergency Room Treatment	$160	$200	$260	$300
Initial Doctor Visit	$40	$50	$65	$75
Follow-up Doctor Treatment	$40	$50	$65	$75
Major Diagnostic Exams	$120	$150	$195	$225
Surgery				
Open abdominal, thoracic	$800	$1,000	$1,300	$1,500
Exploratory or without repair	$80	$100	$130	$150
Prosthetic Device				
One prescribed prosthetic device/artificial limb	$400	$500	$650	$750
Two or more prosthetic devices	$800	$1,000	$1,300	$1,500
Burn				
2nd degree burns covering at least 36% of the body	$600	$750	$975	$1,125
3rd degree burns covering between 9 and 35 square inches of the body	$1,200	$1,500	$1,950	$2,250
3rd degree burns covering at least 35 square inches of the body	$8,000	$10,000	$13,000	$15,000
Skin grafts	25% of burn benefit			
Emergency Dental Work				
Broken teeth repaired with crown(s)	$120	$150	$195	$225
Broken teeth resulting in extraction	$40	$50	$65	$75
Eye Injury	$160	$200	$260	$300
Lacerations				
Single laceration less than 2 inches	$40	$50	$65	$75
At least 2 inches but not more than 6 inches (total of all lacerations)	$160	$200	$260	$300
Over 6 inches (total of all lacerations)	$320	$400	$520	$600
Laceration(s) not requiring stitches, staples or glue	$20	$25	$32.50	$37.50
Torn Knee Cartilage Exams				
Exploratory surgery without repair or if cartilage is only shaved	$80	$100	$130	$150
Surgical repair	$400	$500	$650	$750
Ruptured Disc	$320	$400	$520	$600
Concussion	$80	$100	$130	$150
Tendon/Ligament/Rotator Cuff				
Surgical repair of one tendon/ligament	$320	$400	$520	$600
Surgical Repair of more than one	$480	$600	$780	$900
Exploratory surgery to help diagnosis	$80	$100	$130	$150

POLICY BENEFITS	Economy	Standard	Preferred	Premium
Dislocation				
Hip	$1,600	$2,000	$2,600	$3,000
Knee	$800	$1,000	$1,300	$1,500
Ankle or Foot	$640	$800	$1,040	$1,200
Shoulder	$240	$300	$390	$450
Elbow	$240	$300	$390	$450
Wrist	$240	$300	$390	$450
Toe or Finger	$80	$100	$130	$150
Hand	$240	$300	$390	$450
Lower Jaw	$240	$300	$390	$450
Collar Bone	$240	$300	$390	$450
Fracture				
Hip	$1,200	$1,500	$1,950	$2,250
Leg	$640	$800	$1,040	$1,200
Ankle	$240	$300	$390	$450
Kneecap	$240	$300	$390	$450
Foot (excluding toes/heel)	$240	$300	$390	$450
Upper Arm	$280	$350	$455	$525
Forearm, hand, wrist (excluding fingers)	$240	$300	$390	$450
Finger, toe	$40	$50	$65	$75
Vertebrae (body of)	$640	$800	$1,040	$1,200
Vertebral Process	$240	$300	$390	$450
Pelvis (excluding coccyx)	$640	$800	$1,040	$1,200
Coccyx	$160	$200	$260	$300
Face (excluding nose)	$280	$350	$455	$525
Nose	$80	$100	$130	$150
Upper Jaw	$280	$350	$455	$525
Lower Jaw	$240	$300	$390	$450
Collar bone	$240	$300	$390	$450
Rib or Ribs	$200	$250	$325	$375
Skull				
Depressed	$2,000	$2,500	$3,250	$3,750
Simple	$800	$1,000	$1,300	$1,500
Sternum	$240	$300	$390	$450
Shoulder Blade	$240	$300	$390	$450
Blood/Plasma/Platelets	$240	$300	$390	$450
Medical Equipment	$80	$100	$130	$150
Physical Therapy	$20	$25	$32.50	$37.50

POLICY BENEFITS	Economy	Standard	Preferred	Premium
HOSPITAL CARE				
Hospital Admission	$800	$1,000	$1,300	$1,500
Hospital Confinement	$200	$250	$325	$375
ICU Confinement	$400	$500	$650	$750
Transportation	$240	$300	$390	$450
Family Lodging	$80	$100	$130	$150
MAJOR INJURIES				
Accidental Death				
Main Insured				
Common-Carrier Accidents	$80,000	$100,000	$130,000	$150,000
Other Accidents	$40,000	$50,000	$65,000	$75,000
Spouse				
Common-Carrier Accidents	$20,000	$25,000	$32,500	$37,500
Other Accidents	$10,000	$12,500	$16,250	$18,750
Child				
Common-Carrier Accidents	$8,000	$10,000	$13,000	$15,000
Other Accidents	$4,000	$5,000	$6,500	$7,500
Accidental Dismemberment				
Loss of both hands, feet, sight in both eyes, or any combination of one of these	$12,000	$15,000	$19,500	$22,500
Loss of one hand, foot, or sight in one eye	$6,000	$7,500	$9,750	$11,250
Two or more fingers or toes	$1,200	$1,500	$1,950	$2,250
One finger or toe	$360	$750	$975	$1,125
Note: Loss of sight must be permanent				
Paralysis				
Quadriplegia	$24,000	$30,000	$39,000	$45,000
Paraplegia	$12,000	$15,000	$19,500	$22,500
Coma	$8,000	$10,000	$13,000	$15,000

Illinois Mutual, headquartered in Peoria, Illinois, is a premier provider of life insurance, disability insurance and annuity products. Founded in 1910, the Company conducts business in 47 states through more than 17,500 independent agents. Through a conservative, yet progressive financial investment approach, and consistent management of all aspects of the Company, Illinois Mutual has more than $1.2 billion in admitted assets, indicating its financial strength, while AM Best recently reaffirmed Illinois Mutual's A- Excellent rating.

This brochure provides general information regarding Illinois Mutual Accident Insurance. Refer to the policy for a complete description of benefits, limitations and exclusions. Coverage may vary by state.

This Policy does not provide benefits for Injuries resulting from:
(1) War or act of war, whether declared or undeclared;
(2) Riding in or driving any motor-driven vehicle in a race, stunt show or speed test;
(3) Operating, learning to operate, serving as a crew member of or jumping or falling from any aircraft, including those which are not motor-driven. This does not include flying as a fare paying passenger;
(4) Engaging in hang-gliding, bungee jumping, parachuting, sailgliding, parasailing or parakiting or any similar activities;
(5) Participating or attempting to participate in an illegal activity and/or being incarcerated in a penal institution;
(6) Committing or trying to commit suicide or injuring yourself intentionally, whether you are sane or not;
(7) Addiction to alcohol or drugs, except for drugs taken as prescribed by your physician;
(8) Practicing for or participating in any semi-professional or professional competitive athletic contest for which you receive any type of compensation or remuneration;
(9) Having any sickness or declining process caused by a sickness, including physical or mental infirmity. We also will not pay benefits to diagnose or treat the sickness. Sickness means any illness, infection, or disease which is not caused by an injury.

ILLINOIS MUTUAL®
300 S.W. Adams Street Peoria, IL 61634
Phone 309.674.8255
www.IllinoisMutual.com

Form 8003