



Everyone deserves  
 a better Tomorrow.

AccidentAdvance® is accident  
 insurance with benefits for  
 unexpected injuries.

George enrolls himself, his wife and his kids in the accident insurance offered at the car dealership where he works, joking that his wife is such a klutz that they'll get plenty of use out of it. A few weeks later, he drops a cinder block on his foot while working in his garage, breaking a bone. He ends up with a cast, crutches and a joke his wife will never let him live down.

**Get benefits to spend on what you need.**

George's health insurance pays for many of his medical expenses, but he still has copays and a high deductible. He doesn't make commissions for sales on the days he misses work, and visiting the orthopedic specialist's office 50 miles away costs a lot in gas.

Because he has accident insurance, he has help recovering financially without dipping into their family savings or using a credit card. Accident insurance benefits are paid directly to the insured, letting him use them where and how they're most needed.

**Get the benefits that fit your needs.**

George gets specific amounts for his emergency care (including X-rays and physician care received within 96 hours of the accident), for follow-up visits and for his physical therapy while recovering. He would have gotten additional help had he needed an ambulance, initial hospitalization or intensive care. See this brochure for in-depth information about what benefits are paid for specific injuries or procedures.

**Help protect yourself and your family.**

George liked the ability to add his wife and kids to his policy. Because kids can be especially accident-prone, a family accident policy provides extra peace of mind. Employees and their spouses can be insured after reaching age 18, and eligible dependent children can keep their insurance through age 25.

**Enjoy our hassle-free online claims process.**

Our easy-to-navigate website allows you to update your information, keep track of your policies, submit claims and more from your PC or mobile device.

**Up-to-date information regarding our compensation practices can be found in the Disclosure section of our website at [tebcs.com](http://tebcs.com).**

*This is a brief summary of AccidentAdvance® accident insurance. Policy form series CPACC100 and CCACC100. Forms and form numbers may vary. This insurance may not be available in all jurisdictions. Limitations and exclusion apply. Refer to the policy, certificate and riders for complete details.*

Product Highlights
Pays benefits directly to you
Family options available
Payroll-deducted premiums

# PRODUCT DETAILS

Plan 1  
24 Hour

Module 1 Accident Emergency Treatment		8.00 Units	
<b>Accident Emergency Treatment Benefit</b> For physician treatment and X-rays in a hospital or doctor's office within 96 hours of the accident.		\$200	
<b>Major Diagnostic Examination Benefit</b> For one CT Scan, MRI, or EEG completed within 90 days of the accident.		\$320	
<b>Dislocation Benefit</b> Payable for joint dislocation reduced under general anesthesia. Dislocation reduced without general anesthesia paid at 25% of the joint's benefit amount. Multiple reduced dislocations are paid at 1 1/2 times the highest benefit amount. No other amount will be paid under this benefit.	<b>Dislocated Joint</b>	<b>Reduction</b>	
		<b>Open</b>	<b>Closed</b>
	Hip	<b>\$6,400</b>	<b>\$2,160</b>
	Knee or Shoulder	<b>\$2,160</b>	<b>\$880</b>
	Collar Bone	<b>\$3,440</b>	<b>\$640</b>
	Ankle or Foot (except toes)	<b>\$2,160</b>	<b>\$640</b>
	Lower Jaw	<b>\$2,160</b>	<b>\$1,120</b>
	Wrist or Elbow	<b>\$1,760</b>	<b>\$880</b>
Toe or Finger	<b>\$480</b>	<b>\$240</b>	
<b>Fractures Benefit</b> For repair of a fracture sustained in an accident. A chip fracture is paid at 10% of the fracture's benefit amount. Multiple repaired fractures are paid at 1 1/2 times the highest benefit amount. No other amount will be paid under this benefit.	<b>Fractured Bone</b>	<b>Reduction</b>	
		<b>Open</b>	<b>Closed</b>
	Coccyx	<b>\$1,120</b>	<b>\$560</b>
	Hand (except fingers), Foot (except toes/heel), Wrist, Shoulder Blade, Forearm, Ankle, Elbow, Kneecap, Sternum or Lower Jaw	<b>\$2,720</b>	<b>\$1,360</b>
	Hip	<b>\$8,000</b>	<b>\$2,720</b>
	Leg	<b>\$3,360</b>	<b>\$2,720</b>
	Nose, Heel or Fingers	<b>\$2,720</b>	<b>\$560</b>
	Ribs	<b>\$5,360</b>	<b>\$560</b>
	Skull	<b>\$4,320</b>	<b>\$1,600</b>
	Toes	<b>\$1,120</b>	<b>\$560</b>
	Upper Jaw, Upper Arm or Face (except Nose), Collar Bone	<b>\$3,200</b>	<b>\$1,360</b>
	Vertebrae, Pelvis	<b>\$1,360</b>	<b>\$1,360</b>
	Vertebral Processes	<b>\$5,360</b>	<b>\$800</b>

**For both dislocations and fractures, 1 1/2 times the highest dislocation or fracture benefit amount is paid. No other dislocation or fracture benefit is paid.**

## PRODUCT DETAILS

Module 2 Follow-Up Visits and Physical Therapy		5.00 Units
<b>Accident Follow-Up Treatment Benefit</b> Maximum of three (3) follow-up visits per accident. Original treatment must have been within 96 hours of the accident. Treatment must be provided by a physician in their office or in a hospital on an outpatient basis; begin within 30 days of, and be completed within the 6 months following the later of: the accident; discharge from the hospital from a covered confinement; or discharge from an extended care facility.		\$50
<b>Physical Therapy Benefit</b> For treatments by a licensed physical therapist under a physician's advice that begin within 120 days of the accident and are completed within 1 year of the accident, not to exceed 10 treatments per accident.		\$50
Module 3 Initial Accident Hospitalization		2.00 Units
<b>Initial Accident Hospitalization Benefit</b> Payable once for the first hospital admission due to an accident. Benefit is payable once for the first Intensive Care Unit admission due to an accident. The ICU benefit is paid even if admitted to the hospital initially and then transferred to ICU later during the same hospitalization.		\$600
<b>Ambulance Benefit</b> For transportation to the nearest hospital for treatment within 96 hours of the accident by a licensed ambulance service.	Ground Ambulance	\$120
	Air Ambulance	\$600

## PRODUCT DETAILS

Rates					
Coverage	Rate Frequency	Employee	Employee and Child(ren)	Employee and Spouse	Employee, Spouse and Child(ren)
Plan I 24 Hour	Semi-Monthly	\$5.00	\$6.54	\$7.64	\$9.48

## LIMITATIONS AND EXCLUSIONS

We will not pay benefits for losses caused by or as a result of a covered person:

- Driving any taxi for wage, compensation or profit;
- Mountaineering, parachuting or hang gliding;
- Voluntarily taking, administering, absorbing or inhaling poison, gas or fumes;
- Alcoholism or drug addiction;
- Participating in any sport or sporting activity for wage, compensation, profit, or racing any type of vehicle in an organized event;
- Traveling in or descending from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline (other than a charter airline) on a regularly scheduled passenger trip;
- War, or any act of war, whether declared or undeclared;
- Participating in any activity or event, including the operation of a vehicle, while intoxicated or under the influence according to the laws of the jurisdiction in which the accident occurred;
- Participating in a riot, civil commotion, civil disobedience or unlawful assembly;
- Committing, attempting to commit, or taking part in a felony or assault or engaging in an illegal occupation;
- Intentionally self-inflicting bodily injury or attempting suicide while sane or insane;
- Any loss incurred while on active duty status in the armed forces. If you notify us of such active duty, we will refund any premiums paid for any period for which no coverage is provided as a result of this exception.
- Driving any taxi for wage, compensation or profit;
- Mountaineering, parachuting or hang gliding;
- Voluntarily taking, administering, absorbing or inhaling poison, gas or fumes;
- Participating in any sport or sporting activity for wage, compensation, profit, or racing any type of vehicle in an organized event;
- Traveling in or descending from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline (other than a charter airline) on a regularly scheduled passenger trip;
- War, or any act of war, whether declared or undeclared;
- Intentionally self-inflicting bodily injury or attempting suicide while sane or insane;
- Any loss incurred while on active duty status in the armed forces. If you notify us of such active duty, we will refund any premiums paid for any period for which no coverage is provided as a result of this exception.

### Termination of Insurance

Subject to the Portability Option, insurance coverage on the employee will end on the earliest of:

- the date of his or her death;
- the date he or she ceases to be eligible for coverage;
- the last date for which premium payment has been made to us, subject to the grace period;
- the date he or she terminates employment;
- the date the group master policy terminates;
- the date he or she sends us a written notice to cancel coverage.

The insurance coverage on a dependent will cease on the earliest of:

- the date of the employee's death;
- the date the employee's coverage terminates;
- the last date for which premium payment has been made to us, subject to the grace period;
- the date the dependent no longer meets the definition of dependent;
- the date the certificate is modified so as to exclude dependent coverage;
- the date the employee sends us a written notice to cancel coverage on a dependent.

### Extension of Benefits

Whenever termination of coverage under this section occurs due to termination of employment, such termination will be without prejudice to:

## LIMITATIONS AND EXCLUSIONS

- any hospital confinement which began while coverage was in force; or
- any covered treatment or service for which benefits would be provided and which began while coverage was in force; provided, however that the covered person is and continues to be hospital confined or receiving treatment.

Such Extension of Benefits will continue for up to the earlier of:

- 30 days; or
- the date on which the covered person is no longer hospitalized or receiving treatment.

### **Portability Option**

If an employee loses eligibility for this insurance for any reason other than nonpayment of premiums, coverage can be continued by paying the premiums directly to us within 31 days after termination. We will bill the employee directly once we receive notification to continue coverage.

### **Termination of the Group Master Policy**

The policyholder may end the policy on any premium due date by submitting a 60-day advance written notice. A group will not be continued if it drops below the minimum required participation. The group master policy will be terminated and coverage of all remaining insureds will end, subject to the Portability Option.

### **Other Insurance with Us**

An individual can only have one accident policy or certificate with us. An individual can only have one disability income policy, certificate, or rider with us. If a person already has accident insurance with us, such person is not eligible to apply for this coverage. If a person already has disability income insurance with us, such person is not eligible to apply for the disability income riders.

# DISCLOSURES

## GROUP BENEFITS DISCLOSURE POLICY

Transamerica Employee Benefits (TEB) is a unit of Transamerica Life Insurance Company and Transamerica Financial Life Insurance Company. TEB markets and administers voluntary insurance benefits through licensed insurance agents. These agents are typically appointed to sell our products, and products of other providers, and receive various forms of compensation from us for the services provided. We believe our compensation arrangements with our agents are conducted with honesty, fairness and integrity. In addition, we realize that having trusted relationships between our agents and our customers is essential to all involved. To ensure this trust continues and to address any concerns within the industry, we have outlined our policy on agent compensation disclosure.

TEB's policy supports transparency and full disclosure of agent compensation to our customers and prospective customers. In addition, we have put controls in place to facilitate this disclosure and obligate our agents to disclose compensation information to customers: 1) when asked by a customer; 2) when receiving both a fee from the customer and compensation from TEB; and 3) when otherwise required by law. Agents must comply with all applicable laws in the sale of TEB products, including any pertaining to the disclosure of compensation information.

TEB's Group Benefits Compensation Disclosure Notice (below) describes the various means by which agents may be compensated for the sale of our products. It is the responsibility of your agent to share specific information with you about his or her compensation arrangements with TEB. Accordingly, please direct any compensation disclosure questions directly to your agent.

## COMPENSATION DISCLOSURE NOTICE TO ALL POLICYHOLDERS

Agents who sell and service our products are paid a commission. It varies by the type of insurance policy sold and the state where the policy was sold, and is based on a percentage of the premium received in the first year, and at policy renewal. Agents may receive advances or loans against anticipated commissions for cases sold or to be sold. These advances may or may not require the payment of interest, depending upon the agent's total business and historical experience with TEB.

Agents may receive other compensation from TEB in the form of cash or non-cash awards or prizes, based upon a variety of factors that may include the level of premium written or earned, persistency and growth of premium, or other performance measures. Agents who manage, supervise or recruit other agents or wholesale our products and services to other agents, may receive commission overrides on business that results from their efforts.

Some of our agents may receive additional payments for providing services in connection with the administration of our products. Fees for such services may be calculated on a per policy or per certificate basis or upon the premium volume associated with a specific case. TEB may additionally reimburse these agents/administrators for certain expenses, such as the cost of mailings.

Agents may occasionally obtain exclusive rights to market TEB products or services to agents, employers, employees, or members of associations or unions. Certain groups or associations may also agree to endorse TEB's products to their members. TEB may pay a fee for these exclusive marketing rights or endorsements. See your proposed plan documents or policy certificate package for more information on any such arrangements.

Up to date information regarding our compensation practices can be found in the Disclosures section of our website at: [www.tebcs.com](http://www.tebcs.com).