

GROUP ACCIDENT MEDICAL EXPENSE INSURANCE



Help protect your family from the out-of-pocket costs of an accident

Our Accident Insurance plan complements your group health insurance and helps cover unexpected expenses that result from all kinds of accidents, even sports-related and household ones.

The cash payment can be used any way you want: to meet out-of-pocket medical costs like deductibles/co-pays, and non-medical costs like childcare.

Value of Accident Insurance

- Pays benefits for a covered accident or injury
- Spouse and children coverage available
- Benefits are paid directly to you, regardless of other health insurance
- Provides an extensive range of benefits
- Benefits are portable, take it with you if you leave or change jobs



500,000

estimated number of children, under age 14, sustaining playground injuries annually.

<https://bit.ly/3uSo5ep>

How can Accident Insurance help?



How does Accident Insurance work?

Even with the best major medical insurance, after an accident you may be left with paying your deductible, copay or a percentage of the total bill called co-insurance. With Atlantic American Employee Benefits' Accident Insurance, you can receive a cash payment when you have a covered accident or injury.



You accidentally get injured, leading to medical treatment and several out-of pocket expenses.



With approval of your claim, Atlantic American Employee Benefits provides a lump sum benefit based on the type of injury you sustain or the type of treatment you need.



Use benefits to pay any bills you choose, from deductibles, copays and coinsurance to childcare and nutritional supplements. You can even use it for personal fitness or rehabilitative training not covered by your medical insurance.

How would you pay for charges from having an accident?

You are not alone when you have Atlantic American Employee Benefits' protection. Care is important. And so is your Atlantic American Employee Benefits' Accident Insurance.

Common charges associated with an accident:

- Urgent care
- X-ray
- Treatment for fractures, sprains, strains
- Physician office follow-up visit
- Childcare while recovering

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Coverage details

Atlantic American Employee Benefits' Group Accident Insurance plan includes the benefits listed below. Each benefit is subject to conditions for payment as detailed in the certificate.



PLAN INFORMATION

Available To	Employee: 16-70 Spouse: 16-65 Dependent(s): through age 25
Coverage Type	24-Hour
Spouse Coverage* (excluding Wellness Benefit)	100%
Dependent Coverage* (excluding Wellness Benefit)	100%
ADDITIONAL PLAN DETAILS	
Employee Termination Age	None
Portability	Included
Waiver of Premium	Excluded
Waiting Period	None

All benefit amounts are Guarantee Issue

* Employee coverage is required in order to elect spouse and/or dependent coverage.

One Third
of non-fatal U.S. injuries
are related to falls

<https://bit.ly/3uEhAPz>



375,797
bicycle and accessories
related injuries in 2021

<https://bit.ly/34lx5OI>



GROUP ACCIDENT MEDICAL EXPENSE INSURANCE, (CONT'D.)

ACCIDENT MEDICAL EXPENSE		PLAN 2
Accident Medical Expense - Max. per Plan Year		\$3,000
Emergency Room Deductible		\$0
ACCIDENTAL DEATH AND DISMEMBERMENT		
Accidental Death		
Insured		\$10,000
Spouse		\$10,000
Dependent Child(ren)		\$10,000
BENEFIT BOOSTERS & MISC. BENEFITS		
Wellness Screening Benefit ¹		\$50
Individual Limit		1 per Year
Family Limit		6 per Year

¹ Benefits payable once per accident.

Rates

MONTHLY PREMIUM RATES				
	EMPLOYEE	EMPLOYEE & SPOUSE	EMPLOYEE & CHILDREN	FAMILY
PLAN 2	\$22.48	\$36.33	\$46.22	\$66.00

Benefit Details

ACCIDENT BENEFIT

ACCIDENT MEDICAL EXPENSE – Subject to [the Emergency Room Deductible and] the Accident Medical Expense Benefit Maximum per Plan Year shown in the Schedule of Benefits, We will pay Eligible Expenses for Treatments and/or services described below that are incurred as the result of a Covered Accident:

1. Hospital or Intensive Care Unit Confinement;
2. Emergency Room, Urgent Care Facility, or Physician's Office visits;
3. Surgery, including Physician's fees for Surgery and General Anesthesia. For General Anesthesia, We will pay a maximum of 25% of the fee charged by the Physician for the Surgery; or, a maximum of 50% of the fee charged by the Physician for the Surgery if the General Anesthesia is administered by the attending Physician or an assistant, or if the Hospital charges for a nurse anesthetist or an anesthesiologist;
4. X-Rays and Lab Tests;
5. Physical Therapy or Occupational Therapy up to one (1) visit per day;

6. Transportation in an ambulance;
7. Home Health Care;
8. Hospice Care;
9. Medical Appliances prescribed by a Physician; and
10. Prosthetic devices prescribed by a Physician.

Treatment and services must occur within 90 days of the Covered Accident. Once the Accident Medical Expense Benefit Maximum per Plan Year has been paid for an Insured, no further benefits will be payable for that Insured's Plan Year. The Accident Medical Expense Benefit Maximum per Plan Year for all covered Dependent children combined is equal to twice the amount for a single Dependent child.

ACCIDENTAL DEATH AND DISMEMBERMENT

ACCIDENTAL DEATH – We will pay the Accidental Death Benefit Amount shown in the Schedule of Benefits if an Insured dies as the result of a Covered Accident. The death must occur within 90 days after the Covered Accident.

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Importance of health and wellness checks

Health screenings are an important part of maintaining good health. Annual wellness visits, also called check-ups or physicals, typically include height and weight, blood pressure and pulse reading. Starting a dialogue about your health greatly improves the quality of your health care.



Tests covered by the screening benefit include:

- Routine physical exam
- Bone density screening
- Examination by a dentist or optometrist
- Stress test
- Epworth Sleepiness Scale for the purpose of diagnosing a sleeping disorder
- Hemoglobin A1c
- Baseline testing for concussions
- Weight reduction program
- Other medical tests used to evaluate risk or prevention of accidents

The benefit pays according to a fixed schedule—once per covered person, per calendar year and it pays in addition to other coverages.



670,000

In 2020, total deaths in the U.S. had hypertension as a primary or contributing cause.

<https://bit.ly/3x0coUN>

Limitations & Exclusions

GROUP ACCIDENT MEDICAL EXPENSE INSURANCE

EXCLUSIONS—We will not pay benefits for a claim that is caused by, contributed to by, or resulting from any of the following:

1. Voluntary intoxication (as defined by the law of the jurisdiction in which such intoxication occurred) or while under the influence of any narcotic, drug or controlled substance, unless administered by or taken according to the instructions of a Physician or Medical Professional;
2. Voluntary intoxication through use of poison, gas or fumes, whether by ingestion, injection, inhalation or absorption;
3. Committing or attempting to commit a felony, or active participation in a riot, insurrection, or terrorist activity;
4. Intentional self-harm or attempting or committing suicide, whether sane or not;
5. An Injury incurred while an Insured is an active member of the armed forces of any nation or authority;
6. An Injury that occurs while an Insured is engaged in an illegal occupation or activity, or legally incarcerated in a penal or correctional institution;
7. Cosmetic Surgery or other elective procedure that is not Medically Necessary, except for reconstructive surgery incidental to or following surgery for trauma to the affected body part;
8. Diagnosis or Treatment received outside the United States, its territories, or Canada;
9. Treatment provided at a facility, office, or other location owned or operated by an Insured or a Family Member;
10. Treatment of Mental or Nervous Disorder(s) that is not a direct result of trauma sustained by a Covered Accident;
11. Any bacterial infection (except pyogenic infections which shall occur with and through an accidental cut or wound);
12. Operating, learning to operate, serving as a crew member of any aircraft or hot air balloon, including those which are not motor-driven, unless flying as a fare paying passenger;
13. Travel or flight in any aircraft or hot air balloon, including those which are not motor-driven, if it is being used for testing or experimental purposes, used by or for any military authority, or used for travel beyond the earth's atmosphere;
14. Participation in any Organized Sport in a professional or semi-professional capacity;
15. Riding or driving an air, land, or water vehicle in any organized and scheduled race, speed, or endurance contest;
16. Participation in base jumping, bungee jumping, cliff jumping, kite surfing, kiteboarding, lugging, parachuting, paragliding, parakiting, parasailing, ski jumping, skydiving, spelunking, tricking, or wingsuit flying; or
17. An On the Job Injury.

Additionally, no benefits will be paid for an Injury that occurs prior to an Insured being covered under the Certificate.

Group Accident policy form series GACP21AAEB underwritten by Bankers Fidelity Life Insurance Company®. **This is not Workers' Compensation insurance nor a replacement for Workers' Compensation insurance.** Limitations and exclusions apply; the terms and conditions in the actual policy and certificate provisions control. Rates are subject to change. Refer to the specific policy and certificate for details. Application to determine eligibility may be required. The Policy, any optional Riders and the benefits therein are subject to availability and may vary by state. This is only a summary of products and services offered; actual offerings may vary by group size and other underwriting or legal considerations. This is a solicitation of insurance and an independent agent may call on you.

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Easy access to coverage and filing claims

MyCoverage is an easy-to-use website that allows you to view coverage and benefit information, file claims and download forms 24/7.

mycoverage.atlam.com