

# **Detailed Product Overview**

Be ready when the unexpected hits. NCD AccidentPrime can supplement your existing coverage or stand alone. Either way, it pays you directly for covered accident expenses, with no need to involve any other insurance. Focus on healing, not the bill.

# 24-Hour Coverage. No Deductibles. No Waiting Periods.

# Accident Medical Expense (AME) Coverage

**AME Benefit** 

Maximum Benefit of \$7,500 per Covered Person per Accident subject to a \$0 Deductible per Covered Person per Accident

The AME benefits are per covered person per accident. First treatment must be within 90 days of the accidental injury, and emergency care must be within 72 hours of the accident. Medical expenses must be incurred within 52 weeks of the accidental Injury.

# Accidental Death & Dismemberment Coverage

Accidental Death Benefit	Principal Sum: \$10,000		
	Member Tier Selected	% Spouse/ Domestic Partner	% Children
	Spouse/Domestic Partner only	100%	0%
	Dependent Child(ren) only:	0%	100%
	Spouse/Domestic Partner and Dependent Child(ren):	100%	100%
Accidental Dismemberment Benefit	<ul> <li>Both Hands or Both feet: 100%</li> <li>One Hand and One Foot: 100%</li> <li>One Hand or One Foot plus the loss of Sight of One Eye: 100%</li> <li>Sight of Both Eyes: 100%</li> <li>Speech and Hearing in Both Ears: 100%</li> <li>Speech or Hearing in Both Ears: 50%</li> <li>One Hand; One Foot; or Sight of One Eye: 50%</li> <li>Thumb and Index Finger of the Same Hand: 25%</li> <li>Hearing in One Ear: 25%</li> </ul>		
Accidental Plegia (Paralysis) Benefit	<ul> <li>Quadriplegia (total paralysis of All Four Limbs): 100%</li> <li>Triplegia (total paralysis of Three Limbs): 75%</li> <li>Paraplegia (total paralysis of Both Lower Limbs: 75%</li> <li>Hemiplegia (total paralysis of Upper and Lower Limbs on One Side of the Body): 50%</li> <li>Uniplegia (total paralysis of One Limb): 25%</li> </ul>		

# Additional BenefitsEmergencyTransportation BenefitIf transportation by Ambulance to a Hospital or Satellite Emergency Center occurs within 24 hours of an Accident, an Emergency Transportation Benefit of \$500 is payable. This benefit is available once per Accident per Covered Person, with a maximum of 2 benefits per calendar year.Emergency Treatment BenefitIf a Covered Person sustains an Injury and receives Medically Necessary Emergency Treatment within 24 hours of the Accident, we'll provide an additional cash benefit of \$300. This benefit is payable once per Accident, per Covered Person, with a maximum of 2 benefits per calendar year.

The Accident Medical Expense and Accidental Death and Dismemberment benefits described above are underwritten by Zurich American Insurance Company, 1299 Zurich Way, Schaumburg, IL 60196, 1-800-987-3373 (NAIC # 16535). This document provides a general description of certain provisions and features of this insurance program for informational purposes only and does not revise or amend the applicable policies. In the event of a discrepancy between this document and your certificate of insurance or the group policy, the terms of the group policy shall apply. All benefits are subject to the terms and conditions of the group policy. Please refer to your Certificate of Insurance for a detailed description of the insurance coverage, including the exclusions, limitations, reductions and termination.

Coverage may not be available in all states or certain terms, conditions and exclusions may be different where required by state law. Coverage terminates at age 65. This insurance provides limited benefits. Limited benefits plans are insurance products with reduced benefits and are not intended to be an alternative, it is intended to help supplement Comprehensive coverage. This insurance does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential benefits as set forth under the Patient Protection and Affordable Care Act. For a full list of exclusions, see page 3.

# National Wellness & Fitness Association

Your NWFA membership gives you exclusive access to valuable discounts on wellness services, lab work, imaging, and emergency travel assistance.

NFWA Benefits		
Complementary and Alternative Medicine	20% off select Complementary and Alternative Medicine services, including acupuncture, chiropractic care, massage, nutritional counseling, meditation, and naturopathy.	
Emergency Travel Assistance*	For trips under 90 days and over 100 miles from home, which includes medical evacuation, referrals, repatriation, and legal support.	
Imaging Discounts	Discounted rates on medical imaging and gastroenterology services like MRI, CT, colonoscopy and more.	

<sup>\*</sup>Emergency travel assistance not available to members in CT, FL, NY.

Certain restrictions and exclusions may apply. Using a non-participating location may result in a member being turned away or billed. Please see full membership agreement for complete details and instructions on how to access these services. The services described above are not insurance and are not provided by Zurich American Insurance Company.

# **Accident Insurance Limitations and Exclusions**



### General Exclusions

This section applies to all Hazards, Coverages and Benefits unless otherwise stated.

A loss will not be a Covered Loss if it is caused by, contributed to, or results from:

1. suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury including, but not limited to, any attempt to restrict the flow of oxygen to the brain for purposes of autoeroticism or auto-erotic asphyxiation;

2. War or any Act of War, whether declared or undeclared;

3. involvement in any type of active military service, including Reserve or National Guard active duty which extends beyond thirtyone (31) consecutive days. This exclusion does not apply to the first thirty-one (31) consecutive days of active military service;

4. illness or disease, regardless of how contracted; medical or surgical treatment of illness or disease; or complications following the surgical treatment of illness or disease; except for Accidental ingestion of contaminated foods;

5. participation in any felony or an illegal occupation;

6. parasailing, bungee jumping, heli-skiing, scuba diving or any other activity that would reasonably be deemed extrahazardous;

7. being legally intoxicated while operating a motorized vehicle.

a. a Covered Person will be conclusively presumed to be legally intoxicated if the level of alcohol in his or her blood exceeds the amount at which a person is presumed, under the law of the locale in which the Accident occurred, to be intoxicated, if operating a motorized vehicle.

b. an autopsy report from a licensed medical examiner, law enforcement officer reports, or similar items will be considered proof of the Covered Person's intoxication;

8. being under the influence of any prescription drug, controlled substance, or hallucinogen, unless such prescription drug, controlled substance, or hallucinogen was prescribed by a Physician and taken in accordance with the prescribed dosage and in accordance with drug interaction warnings;

9. a cardiovascular event or stroke caused by exertion prior to or at the same time as an Accident;

10. alcoholism, drug addiction or the use of any drug or narcotic except as prescribed by a licensed medical provider operating within his or her scope of authority.

For purposes of the Accident Medical Expense benefit only, the following additional exclusions apply:

We will not cover the following:

l. cosmetic, plastic or restorative surgery unless Medically Necessary for the treatment of the Injury;

2. any medical expenses related to pregnancy unless Medically Necessary for the treatment of the Injury;

3. Injury for which the Covered Person is entitled to benefits under Workers Compensation Benefits, Employer Liability Law, or other similar law:

4. travel outside of the United States of America;

5. personal comfort or convenience items, such as but not limited to Hospital telephone charges, television rental, or guest meals;

6. treatment by any person Related to the Covered Person;

7. expenses incurred for dental care, treatment, repair or replacement of Sound Natural Teeth unless Medically Necessary for the treatment of the Injury;

8. expenses incurred for eye examinations, eye glasses, contact lenses or hearing aids or the fitting, repair or replacement of these items unless Medically Necessary for the treatment of the Injury;

9. routine physical examinations and related medical services, or elective treatment or surgery, or experimental or investigative treatments or procedures;

10. a Medical Repatriation;

11. expenses incurred for psychological or psychiatric counseling of any kind or any expense for treatment of mental or nervous diseases or disorders;

12. expenses which the Covered Person is not legally obligated to pay;

13. expenses for Custodial Services or services provided by a private duty nurse unless such expenses are incurred as a result of an Injury;

14. expenses related to the repair or replacement of existing artificial limbs, eyes, or other prosthetic appliances, or rental of existing medical equipment unless for the purpose of modifying the item because the Injury has caused further impairment in the underlying bodily condition;

15. treatment involving conditions caused by repetitive motion injuries or cumulative trauma and not a result of an Injury;

16. treatment of Osgood-Schlatter's Disease.

## **General Limitations**

This section applies to all Hazards, Coverages and Benefits unless otherwise stated

Limitation on Multiple Covered Losses. If a Covered Person suffers more than one Covered Loss as a result of the same Accident, We will pay only one benefit, the largest benefit.

Limitation on Multiple Coverages and Benefits. If a Covered Person suffers a Covered Loss which is payable under more than one benefit as a result of the same Accident, the most We will pay for these benefits in total is the Covered Person's Principal Sum.

Limitation on Multiple Hazards. If a Covered Person suffers a Covered Loss under more than one Hazard, We will pay only one benefit, the largest benefit.

# Disclaimers

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NCD is not a subsidiary or affiliate of Zurich, and use of NCD's products and services are independent of and not included within the Accident Medical Policy or any other Zurich product or services. Zurich expressly disclaims any and all damages and other costs that may arise related to the use of or reliance upon the product, services, representation or warranties may by or on behalf of NCD.

General Disclaimer: This insurance provides limited benefits. Limited benefits plans are insurance products with reduced benefits and are not intended to be an alternative, it is intended to help supplement Comprehensive coverage. This insurance does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential benefits as set forth under the Patient Protection and Affordable Care Act. Notwithstanding any other terms under this policy, we shall not provide coverage, nor will we make any payments or provide any service or benefit to any insured, beneficiary, or third party who may have any rights under this policy to the extent that such coverage, payment, service, benefit, or any business or activity of the insured would violate any applicable trade or economic sanctions law or regulation. Coverage may not be available in all states or certain terms, conditions and exclusions may be different where required by state law. Benefits decrease at age 65. Coverage terminates at age 75.

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