

## UNINSURABLE OCCUPATIONS & ACTIVITIES

- Professional Athletes
- Rodeo Riders
- Window Washers
- Loggers
- Miners
- Quarry Workers
- Crop Dusters
- Migrant Workers
- Commercial Fishermen
- Oil Field Workers
- Federal Employees
- Taxi Drivers
- Policemen
- Firemen
- Security Guards
- Entertainers
- Highway Workers

## EFFECTIVE DATE

The insurance applied for shall not take effect until your application is approved, the policy is issued, and the required premium has been paid.

### ACCIDENT PLANS - STAND ALONE

If the application is received in the Home Office on or before the 15th of the month, the effective date of the policy will be the 1st of the following month. If the application is received in the Home Office after the 15th of the month, the effective date of the policy will be the 15th of the following month, subject to underwriting approval.

### ACCIDENT PLANS - WITH OTHER COVERAGE

If the application for Accident Coverage is sold in combination with other coverage, we will use the effective date of the other coverage for both plans subject to underwriting approval.

## INJURY FACTS\*

- Number of emergency department visits for injuries: 41.0 million
- Number of visits (to physician offices, hospital outpatient and emergency departments) for injuries: 80.1 million
- 120,859 death by unintentional injury

\* National Center for Health Statistics - 2012, Center for Disease Control and Prevention.

## CONDITIONAL RECEIPT

Received from \_\_\_\_\_ for Accident Insurance in the amount of \$ \_\_\_\_\_ for \_\_\_\_\_ months premium.

\_\_\_\_\_  
AGENT SIGNATURE

\_\_\_\_\_  
AGENT NAME (PRINT)

\_\_\_\_\_  
DATE

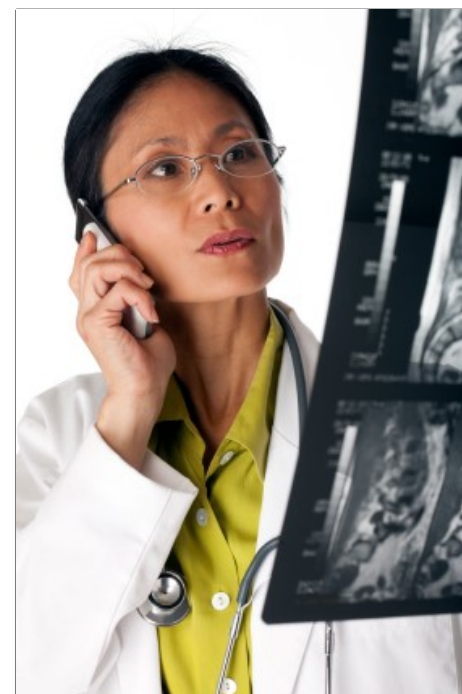
**IMPORTANT NOTICE:** This receipt is void if it is not signed by the Agent, has been modified, or if the payment is made by a check that is not honored when presented for payment.

**PREMIUM CHECKS MUST BE MADE PAYABLE TO PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY. DO NOT MAKE CHECK PAYABLE TO THE AGENT OR LEAVE PAYEE BLANK.**

*Benefits and availability vary by state*

Underwritten By:  
Philadelphia American Life  
Insurance Company  
P.O. Box 4884  
Houston, TX 77210-4848  
1-800-552-7879  
Policy form H-0089

# Enhanced 24 Hour ACCIDENT EXPENSE INSURANCE PLAN



## WORLDWIDE PROTECTION



POLICY FORM H-0089 R

## Accidents happen when you least expect them:

- at home,
- at work,
- while playing or
- while traveling.

*You can't plan on them, but you can plan for them.*

## Philadelphia American Life's Enhanced 24 -Hour Accident Plan More Protection When You Need It Most.

### ENHANCED ACCIDENT PLAN FEATURES

- 1 or 2 units of coverage is available
- Issue ages 0-75
- Guaranteed renewable to age 80
- \$50,000 or 100,000 of Accidental Death Benefit
- Pays in addition to any other insurance
- Individual, Individual & Spouse, Single Parent, Family, and Children Only Plans are available
- Optional Accident Disability Income Benefit for the Primary Insured

### BENEFIT FEATURES

BENEFIT	1 UNIT	2 UNITS
<b>ACCIDENTAL INJURY BENEFIT</b> This benefit pays the actual charges for medical treatment due to accidental injury up to the amount shown per unit. Covered expenses include physician's fees, surgery, x-rays, fracture reduction and dislocations or other emergency first-aid expenses. <b>All covered expenses must be incurred within 21 days of the accident causing injury.</b> If the expenses are incurred at a hospital emergency room, a \$50 deductible will apply for each accidental injury.	\$2,000	\$4,000
<b>ACCIDENTAL DEATH BENEFIT</b> This benefit pays a fixed amount per unit if an insured suffers a fatality as a result of an accident.	\$50,000	\$100,000
<b>GROUND OR AIR AMBULANCE</b> This benefit pays the actual charges for ground or air ambulance transportation due to an accidental injury, up to the amount shown per unit.	\$5,000	\$10,000
<b>HOSPITAL INCOME BENEFIT</b> If an insured is hospitalized for an accidental injury, we will pay a fixed amount per day, beginning the first day of confinement, subject to the number of units purchased. Payment will be made up to 30 days per hospital confinement resulting from any one accidental injury.	\$150	\$300
<b>DISMEMBERMENT BENEFITS</b> This benefit pays a fixed amount per unit if the Primary Insured suffers any of the following dismemberments as a result of accidental injury. Benefits are for the Primary Insured only.		
<b>Loss of Finger or Toe</b>		
Single Loss Benefit	\$500	\$1,000
Multiple Loss Benefit	\$1,000	\$2,000
<b>Loss of Hand, Arm, Foot, Leg</b>		
Single Loss Benefit	\$5,000	\$10,000
Multiple Loss Benefit	\$10,000	\$20,000
<b>Loss of Sight</b>		
Single Loss Benefit (One Eye)	\$5,000	\$10,000
Multiple Loss Benefit (Both Eyes)	\$10,000	\$20,000

### MONTHLY BANK DRAFT RATES

24 Hour Accident Expense	1 UNIT	2 UNITS
INSURED	\$23.00	\$31.05
INSURED & SPOUSE	\$44.28	\$56.93
INSURED & CHILDREN	\$53.48	\$69.00
FAMILY	\$74.75	\$94.88
CHILD ONLY (per child)	\$16.10	\$20.13

### ISSUE AGES

	AGES
Accident Plan	0-75*
Optional Accident Disability Rider	18-64

### OPTIONAL BENEFITS

ACCIDENT DISABILITY INCOME BENEFIT	1 UNIT	2 UNITS
If the Primary Insured incurs an accident disability, we will pay a monthly disability benefit, on a weekly basis, beginning the thirty first day, up to a maximum benefit period of 12 months or 24 months. This benefit applies only to the Primary Insured and pays up to 60% of the insured's gross monthly income.	\$1,000	\$2,000

### MONTHLY BANK DRAFT RATES

Accident Disability Income Rider	1 UNIT	2 UNITS
Type 1 12 months	\$10.35	\$20.70
Type 1 24 months	\$13.23	\$26.45
Type 2 12 months	\$19.55	\$39.10
Type 2 24 months	\$26.45	\$52.90

### Rates may change by class

Modal Factors:  
Annual = 10.87 x MBD; Semi-Annual = 5.76 x MBD; Quarterly = 2.93 x MBD

\*Age 65 & over are eligible for 1 unit only