



For Questions Call WPS at: 800-236-1448

24-HOUR ACCIDENT INSURANCE



24-Hour Accident

+ ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS



Underwritten by Guarantee Trust Life Insurance Company
ADH20-15

GUARANTEE TRUST LIFE INSURANCE COMPANY
1275 Milwaukee Avenue, Glenview, IL 60025
www.gtlic.com

15B998

+ THE BENEFITS OF HAVING ACCIDENT COVERAGE

An accident can happen when you or one of your family members least expect it! This 24-Hour Accident policy provides you with the comfort and the coverage you need for those unexpected expenses.

We have designed the 24-Hour Accident policy to help provide protection by choosing the option that may best suit your needs.



ACCIDENT COVERAGE OPTIONS **ISSUE AGES 18-69**

OPTION 1

- \$1,500 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$3,000 Accidental Death and Dismemberment

\$23.08
FAMILY

\$10.50
SINGLE

OPTION 2

- \$2,500 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$5,000 Accidental Death and Dismemberment

\$33.42
FAMILY

\$15.17
SINGLE

OPTION 3

- \$5,000 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$10,000 Accidental Death and Dismemberment

\$50.75
FAMILY

\$23.08
SINGLE

OPTION 4

- \$7,500 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$15,000 Accidental Death and Dismemberment

\$66.58
FAMILY

\$30.25
SINGLE

OPTION 5

- \$10,000 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$20,000 Accidental Death and Dismemberment

\$76.58
FAMILY

\$34.83
SINGLE

OPTION 6

- \$12,500 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$25,000 Accidental Death and Dismemberment

\$81.50
FAMILY

\$37.08
SINGLE

OPTION 7

- \$15,000 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$30,000 Accidental Death and Dismemberment

\$86.08
FAMILY

\$39.17
SINGLE

OPTION 8

- \$20,000 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$40,000 Accidental Death and Dismemberment

\$96.50
FAMILY

\$43.83
SINGLE

OPTION 9

- \$25,000 Accident Medical Coverage - \$250 Deductible
- \$4,000 Emergency Air Ambulance
- \$50,000 Accidental Death and Dismemberment

\$104.16
FAMILY

\$47.33
SINGLE

To calculate modes: Annual — multiply by 12; Semi-Annual — multiply by 6; Quarterly — multiply by 3.

+ BENEFIT

DESCRIPTIONS

ACCIDENT MEDICAL EXPENSE BENEFITS

Any Doctor, Emergency Room, Clinic or Hospital

Medical Services means the Medically Necessary cost for: A treatment, drug, device, procedure, supply or service that is necessary and appropriate for the diagnosis to treatment of an Injury in accordance with generally accepted standards of medical practice in the United States at the time it is provided. When specifically applied to Hospital confinement, it means that the diagnosis or treatment of symptoms or a condition cannot be safely provided on an outpatient basis. Benefits are excess of other coverage. Total medical expense benefits for a single Accident shall not exceed the maximum benefit amount per Injury shown in your policy.

\$4,000 EMERGENCY AIR AMBULANCE

In the event a Covered Person suffers from a covered Injury that requires emergency air Ambulance service we will reimburse the Covered Person up to the maximum amount of \$4,000.

ACCIDENTAL DEATH & DISMEMBERMENT

If a Covered Person's Injury results in a Covered Bodily Injury, as defined in your policy, within one year after the Accident causing the Covered Bodily Injury, we will pay the benefit amounts as shown on your policy's benefits schedule page for covered bodily injury loss.

AD&D benefits reduce by 50% on or after a Covered Person's 70th birthday.



THE POLICY DOES NOT PROVIDE BENEFITS FOR:

- Treatment, services or supplies which:
 - Are not Medically Necessary;
 - Are not prescribed by a Doctor as necessary to treat an Injury;
 - Are determined to be Experimental/Investigational in nature;
 - Are received without charge or legal obligation to pay;
 - Are received from persons employed or retained by any Family Member, unless otherwise specified; or
 - Are not specifically listed as Covered Charges in the Policy.
- Injury by acts of war, whether declared or not.
- Injury received while traveling or flying by air, except as a fare-paying passenger and not as a pilot or crew member, on a regularly scheduled commercial airline.
- Dental treatment, except as specifically stated.
- Injury sustained while committing or attempting to commit a felony.
- Injury sustained while voluntarily participating in a riot or civil commotion or disturbance of any kind.
- Prescription Drugs except as specifically stated.
- Treatment of Sickness, disease or infections, except pyogenic infections or bacterial infections that result from the accidental ingestion of contaminated substances.
- Suicide or attempted suicide while sane.
- Intentionally self-inflicted Injury, violating or attempting to violate any duly enacted law.
- Loss occurring while the Covered Person is incarcerated if the incarceration is during a period of legal incarceration in a penal or correctional institution of more than seven (7) days or during a period of legal detainment of more than seven (7) days.
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state in which the Injury occurs.
- Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Doctor.
- Injury sustained while participating in or practicing for any professional, intercollegiate or club sports activity, except as specifically provided.
- Injury which occurs while a Covered Person is on active duty service in any armed forces. Reserve or National Guard active duty for training is not excluded unless it extends beyond 31 days.

- Injury sustained flying in an ultra light, hang gliding, parachuting or bungee-cord jumping, by flight in a space craft or any craft designed for navigation above or beyond the earth's atmosphere.
- Injury sustained while driving or riding on vehicles for off-road use including but not limited to all-terrain vehicles (ATVs).
- Injury sustained where a Covered Person is the operator and does not possess a current and valid motor vehicle operator's license, except in a Driver's Education Program.
- Treatment in any Veteran's Administration or federal Hospital, except if there is a legal obligation to pay.
- Cosmetic surgery, except for reconstructive surgery on an injured part of the body.
- Covered Charges incurred outside of the United States or its possessions unless such loss is incurred while the covered person is on a trip of not more than 60 days.
- Loss resulting from competing in motor sports races or competitions.
- Loss resulting from competing in water sports races or competitions.
- Loss resulting from testing cars/trucks on any racetrack or speedway.
- Loss resulting from handling, storing or transporting explosives.
- Loss resulting from scaling up cliffs or mountain walls.
- Loss resulting from spelunking (exploring caves).
- Handling or working with dangerous animals.
- Repetitive motion injuries, strains, hernia, tendonitis, bursitis and heat exhaustion not related to a specific injury.

Please refer to your policy and its Schedule of Benefits for details regarding the benefits periods and benefits paid. There you will also find the Accident Medical Expenses Benefits paid per injury and benefits paid for a Covered Bodily Injury. These consist of Doctors' visits, Ambulance expense, dental treatment for injury to sound natural teeth and chiropractic treatment.

CLAIM PROVISIONS: Notice of Claim: Written notice of claim must be given to the Company or its authorized representative within 60 days after a covered loss starts, or as soon thereafter as is reasonably possible. Notice should include information sufficient to identify the Covered Person.

Insurance Underwritten by Guarantee Trust Life Insurance Company: Policy Form G1560. This brochure is an illustration, not a contract. For complete details of all provisions, please read your policy carefully.

Guarantee Trust Life Insurance Company and Wisconsin Physicians Service are separate legal entities and have sole financial responsibility for their own products.



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