

## Program Guide



## Protect *My Family*

Accident, Critical Illness, Cancer,  
Accidental Death & Dismemberment,  
Hospital Indemnity, Funeral Expense  
and Bereavement Counseling

**SMART<sup>SM</sup> Accident Plus products are underwritten by one of the following, depending on the state:**

Life of the South Insurance Company, Southern Financial Life Insurance Company, Bankers Life of Louisiana, and Response Indemnity of California.







# Protect What You Love.

Accident Insurance

More than 62% of all personal bankruptcies are caused by the cost of overwhelming medical expenses.<sup>1</sup>

**Missing work due to an accident can put your family at serious financial risk.** A new study done by Harvard University suggests that more than 62% of all personal bankruptcies are caused by the cost of overwhelming medical expenses.<sup>1</sup>

SMART<sup>SM</sup> Accident Plus allows you to select the coverage you need, with benefit amounts in increments of \$5,000 up to \$10,000. You choose! We recognize that you and your family have unique needs working within your budget. That is why we offer this affordable coverage in such a flexible manner.

Due to changes in medical insurance legislation, many employers and individuals are choosing medical insurance plans with higher deductibles and co-payments. With this type of plan, there are major trade offs. The price you pay for a lower premium is shouldering more of your out-of-pocket health care costs.

With SMART<sup>SM</sup> Accident Plus, you can lower your out-of-pocket medical expenses in the event of a covered accident or critical illness.

**Peace of mind is invaluable, and SMART Accident Plus is an affordable way to protect your family.**

# Flexible, affordable coverage.

## You choose from 2 benefit amounts.

| Accident Benefits                                                              |                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Benefit Amounts<br>(Each Calendar Year)                                        | \$5,000 or \$10,000                                                                                                                                                                                                                 |
| Covered Expenses                                                               | Ambulance benefits, emergency care, in-patient hospital and follow-up care. Also covers drug benefit costs while in a facility, fracture benefits, major diagnostic exams, x-ray benefits, physical therapy and prosthetic devices. |
| Family Coverage Options                                                        | Spouse and/or children may be included in the policy.                                                                                                                                                                               |
| How to Qualify for Policy                                                      | Age 64 and under. Driving record may be reviewed.                                                                                                                                                                                   |
| Coordination of Benefits                                                       | This plan does not coordinate with other health insurance coverage. Benefits are paid in addition to those received from other insurance policies.*                                                                                 |
| Deductible<br>(Amount of covered medical costs you are responsible for paying) | Five options for 5k benefit amount: \$0, \$250, \$500, \$750 or \$1,000<br>Calendar Year Deductible<br>Three options for 10k benefit amount: \$500, \$750 or \$1,000<br>Calendar Year Deductible                                    |

\*Current or future Medicaid Eligibility may affect benefits provided by the policy.

# The unexpected happens.

## Timely coverage when you need it the most.

- Benefits paid regardless of other coverage you may have. \*
- Help reduce the burden of out-of-pocket expenses associated with co-pays and other expenses not covered by your primary medical plan.
- Reimbursement for a wide variety of costs associated with unexpected, covered accidents.
- Reduce the out-of-pocket expense of emergency room visits, ambulance costs, and major diagnostic exams.
- Additional coverage can include Critical Illness, Cancer Only Critical Illness, Accidental Death & Dismemberment, Hospitalization, and Funeral & Bereavement Insurance.

\* Current or future Medicaid Eligibility may affect benefits provided by the policy.

Recommended Additional  
Protection





# Optional Coverage

## Critical Illness & Cancer

If you were to suffer from a heart attack, stroke, or be diagnosed with cancer,\*\* would your family be able to handle the financial burden?

- Every year, about 785,000 Americans have a first coronary attack. Another 470,000 who have already had one or more coronary attacks have another attack. <sup>2</sup>
- Stroke is a leading cause of death in the United States. Over 800,000 people die in the U.S each year from cardiovascular disease and strokes. <sup>2</sup>
- Compared to the general population, bankruptcy rates are nearly twice as high among cancer patients one year after diagnosis. <sup>4</sup>

\*\*Invasive cancer, or cancer that requires an invasive surgery.

| Critical Illness                                                   |                                                                                                                                                     |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Covered Critical Illness                                           | Heart Attack, Stroke, Invasive Cancer                                                                                                               |
| Benefit Amounts<br>(Benefits are Payable per Lifetime per Insured) | Five Options: \$5,000, \$10,000, \$15,000, \$20,000 or \$25,000                                                                                     |
| Family Coverage Options                                            | Spouse and/or children may be included in the policy.                                                                                               |
| How to Qualify for Policy                                          | Brief Medical Questionnaire.                                                                                                                        |
| Coordination of Benefits                                           | This plan does not coordinate with other health insurance coverage. Benefits are paid in addition to those received from other insurance policies.* |
| Deductible                                                         | No deductible. Receive a lump sum if you are diagnosed with a covered critical illness.                                                             |

\* Current or future Medicaid Eligibility may affect benefits provided by the policy.

## Critical Illness – Cancer Only

|                                  |                                                                                                                                                      |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Covered Critical Illness</b>  | Invasive Cancer                                                                                                                                      |
| <b>Benefit Amounts</b>           | Five Options: \$5000, \$10,000, \$15,000, \$20,000 or \$25,000                                                                                       |
| <b>Family Coverage Options</b>   | Spouse and/or children may be included in the policy.                                                                                                |
| <b>How to Qualify for Policy</b> | Brief Medical Questionnaire.                                                                                                                         |
| <b>Coordination of Benefits</b>  | This plan does not coordinate with other health insurance coverage. Benefits are paid in addition to those received from other insurance policies. * |
| <b>Deductible</b>                | No deductible. Receive a lump sum if you are diagnosed with a covered invasive cancer.                                                               |

\* Current or future Medicaid Eligibility may affect benefits provided by the policy.

Recovery after a critical illness can be a long road. Coverage gives you peace of mind, reducing your burden so you can focus on what's important.

**Cancer is one of the most financially devastating diseases.**

The American Cancer Society estimates that the 2010 total cost of cancer in the U.S. rose to \$263.8 billion.<sup>3</sup> A new study by the Fred Hutchinson Cancer Research Center shows a close link between cancer diagnosis and personal bankruptcy.<sup>4</sup> Compared to the general population, bankruptcy rates are nearly twice as high among cancer patients one year after diagnosis.<sup>4</sup>

Of the bankruptcies caused by a cancer, a surprising 78% reported having some form of health insurance. This disproves the myth that medical bills only really affect the uninsured.<sup>4</sup>

According to Duke University Medical Center, the average out-of-pocket cost for cancer patients is currently \$1,266 per month. Medical bills for these patients can quickly wipe out retirement accounts, college savings funds, and home equity.<sup>5</sup>

Cancer Only Critical Illness is an affordable addition to your policy that can give you the financial help you need to reduce your burden and focus on what's important - getting healthy for your family.

**Recommended Additional  
Protection**





## Accidental Death & Dismemberment

### Comprehensive Accidental Death and Dismemberment (AD&D) Coverage.

No one likes to think about the worst, but this affordable coverage is an intelligent way for you and your family to be ready for the unexpected. This coverage makes an excellent supplement to traditional life insurance and can help bridge the gap between expenses and lost income. If you were involved in an accident that left you unable to provide for your family, AD&D provides a lump sum benefit due to various types of bodily injuries or loss of life.

| Accidental Death & Dismemberment Coverage              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Accidental Death & Dismemberment Benefit Amount        | Minimum \$25,000 to maximum \$100,000. Available in increments of \$25,000.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Accidental Death Benefit for Loss of Life              | Pays 100% of the Accidental Death & Dismemberment Benefit Amount for accidental death occurring in Policy Month 7 or later. No benefit for Accidental Death occurring in Policy Month 1 through 6.                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Accidental Dismemberment Benefit due to dismemberment. | <ul style="list-style-type: none"><li>• Pays 100% of the Accidental Death &amp; Dismemberment Amount for accidental dismemberment occurring in Policy Month 7 or later. No benefit for accidental dismemberment occurring in Policy Month 1 through 6.</li><li>• Both Hands or Both Feet</li><li>• Sight in Both Eyes</li><li>• One Hand and One Foot</li><li>• One Hand and the Sight in One Eye</li><li>• One Foot and the Sight of One Eye</li></ul> <p>Pays 50% of the Accidental Death Benefit for the loss of:</p> <ul style="list-style-type: none"><li>• One Hand or One Foot</li><li>• The Sight of One Eye</li></ul> |
|                                                        | Primary and Spouse, 18-64   Children, 0-17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Premium Rate Bands                                     | Ages: 18-24   25-39   40-54   55-64                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Renewability                                           | Guaranteed Renewable to age 65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Benefit Payment Conditions                             | <p>Will pay the applicable benefit amount if the insured’s loss occurs within 90 days of the date of the accidental injury that causes the loss.</p> <p>If more than one loss is sustained by an insured person as a result of the same accident, only one amount, the largest, will be paid.</p>                                                                                                                                                                                                                                                                                                                              |
| Common Carrier Benefit                                 | If riding as a fare-paying passenger in or on a licensed public conveyance operated by a common carrier for the regular transport of passengers, the benefit amount will be doubled.                                                                                                                                                                                                                                                                                                                                                                                                                                           |



## Hospital Indemnity

### Hospital Indemnity

Hospital expenses add up. If you suffer an accidental injury that requires you to be confined to a hospital as an inpatient, the Hospital Indemnity Benefit will provide you and your family with needed coverage to ease the financial burden.

| Hospital Indemnity       |                                                                                                                                                     |
|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Benefit Amounts          | Two Options: \$100 or \$250 per day                                                                                                                 |
| Maximum Benefits         | Coverage up to 90 days                                                                                                                              |
| Family Coverage Options  | Spouse and/or children may be included in the policy.                                                                                               |
| Coordination of Benefits | This plan does not coordinate with other health insurance coverage. Benefits are paid in addition to those received from other insurance policies.* |

\* Current or future Medicaid Eligibility may affect benefits provided by the policy.



## Funeral Expense and Bereavement Counseling

### Funeral Expense and Bereavement Coverage

The loss of a loved one because of an accident can be the hardest thing anyone ever has to endure. Along with the emotional burden, funeral expenses can add up to thousands of dollars. Payment for final expenses tends to be due immediately - adding more stress to your loved ones in an already difficult situation. Funeral Expense and Bereavement Counseling provides up to \$2,000 to cover funeral expenses and compassionate counseling for your grieving family.

| Funeral Expense and Bereavement Counseling |                                                      |
|--------------------------------------------|------------------------------------------------------|
| Benefit Amounts                            | \$2,000                                              |
| Maximum Benefits                           | Up to \$250 for family members listed on the policy. |

Additional Accident Insurance  
Information





# SMART<sup>SM</sup> Accident Plus.

## Affordable peace of mind you and your family deserve.

We hope you found this Program Guide useful. We understand that the benefits offered in this program are ones you or your loved ones hope you will never need. With this accident insurance you can have the peace of mind that we can be there in your time of need to use. No one likes to think about the worst, but it is important to plan for the unexpected.

We have thoughtfully put together this package in order to provide you with options for affordable, flexible coverage that fits the unique needs of your family. We understand that not every family is the same and coverage of this nature is not one-size-fits-all. That's why the accident plan can be purchased alone, or with additional, optional coverages as outlined in this guide. If in the process of reviewing this Program Guide you need clarity on any of the information you can reach our licensed agents, not telemarketers, for a respectful consultation.

Our brand promise is to ensure you and your family have **peace of mind - there is help when they need it most.** Our claims process is easy and hassle-free, and we are there to help you receive your benefits when you need them. We recognize that our promise does not end with your enrollment into SMART<sup>SM</sup> Accident Plus. Our promise is that you have affordable peace of mind and coverage when you need it the most.

#### References

1. "Medical Bankruptcy in the United States, 2007: Results of a National Study by Elizabeth Warren of Harvard Law School," *The American Journal of Medicine*, August 2009
2. Center for Disease Control and Prevention
3. The American Cancer Society
4. Fred Hutchinson Cancer Research Center
5. Duke University Medical Center



## Renewability

Coverage can be continued for each insured person until the policy anniversary on or following the insured person's 65th birthday, subject to the policy's termination and insured child provisions, by paying all premiums when they are due. We will not add any restrictive riders or endorsements while this policy is in force. We reserve the right to change the premium charged for this policy. Any change in premium will be made on a class basis only, as we determine, and will be based on the insured person's age on the effective date. No change in premium will become effective until 45 days after we deliver to you, or mail to your last known address, a written notice of premium change. Premiums may not be changed more often than once every 12 months.

## Exclusions

**Accident Coverage and Accidental Death & Dismemberment Coverage** No benefits will be paid under this policy if covered services provided are not related to a covered accident or any loss caused in whole or in part by, or resulting in whole or in part from the following:

- Any illness, loss or condition specifically excluded from the definition of any Accident.
- The Insured Person's suicide or attempt at suicide, or intentional self-inflicted injury, or any attempt at intentional self-inflicted injury while sane or insane;
- The Insured Person being under the influence of a stimulant (such as – amphetamines or nitrates), depressant, hallucinogen, narcotics; or any other drug intoxicant including those prescribed by a Physician that are misused by the Insured Person;
- The Insured Person's Commission of or attempt to commit an assault or felony;
- The Insured Person Engaging in an illegal activity or occupation;
- The Insured Person's Voluntary participation in any riot or civil insurrection;
- The Insured Person's participation in declared or undeclared war, or any act of declared or undeclared war;
- The Insured Person Operating, learning to operate, serving as a crew member of, or jumping, parachuting, or falling from an aircraft or hot air balloon, including those which are not motor driven;
- The Insured Person Engaging in hang gliding, bungee jumping, parachuting, sail gliding, parasailing, or para kiting or any similar activity;
- The Insured Person Riding in or driving any motor vehicle in a race, stunt show or speed test;
- The Insured Person Practicing for or participating in any semi-professional or professional competitive athletic contest for which such Insured Person receives any compensation or remuneration;
- The Insured Person Operating any type of land, water, or air vehicle while having a blood alcohol content at or above the level made illegal for operation of such vehicle by the jurisdiction where the Accidental Injury occurred.

## Critical Illness

**PREEXISTING CONDITION LIMITATION** We will pay NO benefits for critical Illness that are caused by a Preexisting Condition unless the critical illness commences after this Rider has been in force for 12 months from the Effective Date or most recent reinstatement date. We will not use the existence of a Preexisting Condition to deny benefits after this Rider has been in force for a period of 12 months following the date of application for this Rider.

For any Insured Person:

- (a) We will pay NO benefits for any critical illness that is Incurred or Manifests, whichever is applicable, and/or Diagnosed before the first 30 days after the date coverage on the Insured Person becomes effective under this Policy. However, an Insured Child born after the Effective Date of this Policy or any subsequent reinstatement will be covered from birth for the Critical Illnesses stated in the Policy Schedule.
- (b) We will pay NO benefits for any Critical Illness or any loss caused in whole or in part by, or resulting in whole or in part from:
- (i) any illness, loss, or condition specifically excluded from the definition of any Critical Illness; or
  - (ii) balloon angioplasty, laser relief of an obstruction, and/or other intra-arterial procedure

## Critical Illness - Cancer Only

**PREEXISTING CONDITION LIMITATION** We will pay NO benefits for critical Illness that are caused by a Preexisting Condition unless the critical illness commences after this Rider has been in force for 12 months from the Effective Date or most recent reinstatement date. We will not use the existence of a Preexisting Condition to deny benefits after this Rider has been in force for a period of 12 months following the date of application for this Rider.

For any Insured Person:

- (a) We will pay NO benefits for any Critical Illness that is Incurred or Manifests, whichever is applicable, and/or diagnosed before the first 30 days after the date coverage on the Insured Person becomes effective under this Policy. However, an Insured Child born after the Effective Date of this Policy or any subsequent reinstatement will be covered from birth for the Critical Illnesses stated in the Policy Schedule.
- (b) We will pay NO benefits for any Critical Illness or any loss caused in whole or in part by, or resulting in whole or in part from any illness, loss, or condition specifically excluded from the definition of any Critical Illness.

This Program Guide is intended to be used as a guide only and the content, or any written or oral statement contradicting, modifying, explaining or clarifying any provision of the information contained herein, is not intended to create, or shall create, any express or implied contractual obligations that are binding upon any party. This guide is intended to provide information about available policies and benefits that may or may not be available in all states. The information contained herein is subject to change without notice. Information contained herein is not meant as, nor should it take the place of, legal advice. This brochure is a summary only. Other terms, conditions, limitations or exclusions may apply.

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