

GROUP ACCIDENT INSURANCE AFTER CARE BENEFITS – HIGH

	BENEFIT AMOUNT
<p>APPLIANCES (within 6 months after the accident) Payable if, as a result of an injury received in a covered accident, a doctor advises the insured to use a listed medical appliance as an aid in personal locomotion.</p> <p>Cane, Ankle Brace</p> <p>Walking Boot, Walker, Crutches, Leg Brace, Cervical Collar</p> <p>Wheelchair, Knee Scooter, Body Jacket, Back Brace</p>	<p>\$40</p> <p>\$100</p> <p>\$400</p>
<p>ACCIDENT FOLLOW-UP TREATMENT (maximum of 6 per accident, within 6 months after the accident provided initial treatment is within 7 days of the accident or as soon as reasonably possible) Payable for doctor-prescribed follow-up treatment for injuries received in a covered accident.</p>	<p>\$50</p>
<p>POST-TRAUMATIC STRESS DISORDER (PTSD) (once per accident, within 6 months after the accident) Payable if the insured is diagnosed with PTSD, a mental health condition triggered by a covered accident. An insured must meet the diagnostic criteria for PTSD, stipulated in the Diagnostic and Statistical Manual of Mental Disorders IV (DSM IV-TR).</p>	<p>\$200</p>
<p>REHABILITATION UNIT (maximum of 31 days per confinement, no more than 62 days total per calendar year for each insured) Payable for each day that, due to a covered accidental injury, an insured receives treatment as an inpatient at a rehabilitation facility. For this benefit to be payable, the insured must be transferred to the rehabilitation facility for treatment following an inpatient hospital confinement. We will not pay the rehabilitation facility benefit for the same days that the hospital confinement benefit is paid. We will pay the highest eligible benefit.</p>	<p>\$100 per day</p>
<p>THERAPY (maximum of 10 per accident, beginning within 90 days after the accident provided initial treatment is within 7 days after the accident or as soon as reasonably possible) Payable if because of injuries received in a covered accident, an insured has doctor-prescribed therapy treatment in one of the following categories: physical therapy, occupational therapy, or speech therapy. We will not pay this benefit for the same visit that the Accident Follow-up Treatment Benefit is paid.</p>	<p>\$50</p>

Underwritten by Continental American Insurance Company (CAIC)
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EXCLUSIONS

For a complete list of exclusions please refer to the Initial Accident Treatment insert.

DEFINITIONS

Rehabilitation Facility is a unit or facility providing coordinated multidisciplinary physical restorative services. These services must be provided to inpatients under a doctor's direction. The doctor must be knowledgeable and experienced in rehabilitative medicine. Beds must be set up in a unit or facility specifically designated and staffed for this service. This is not a facility for the treatment of alcoholism or drug addiction.

Please refer to the Initial Accident Treatment insert for other definitions applicable to this coverage.

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