

Schedule of Benefits - Non-New York (benefits may vary by state)

Accident Insurance - Provides 24-hour coverage or off-the-job only coverage (policy not available in all states)

Benefit	Amount	Benefit	Amount
Primary Insured		Dislocation (based on joint involved)	
Non-Common Carrier Accident	\$25,000	Open Reduction	\$100 to \$2,000
Common Carrier Accident	\$100,000	Closed Reduction	\$50 to \$1,000
Catastrophic Accident	\$20,000*	Emergency Dental Work	
Loss of Finger, Toe, Hand, Foot, Arm,		Broken teeth repaired with crown(s)	\$300
Leg or Sight of an Eye		Broken teeth resulting in extraction(s)	\$100
Loss of one hand, or one foot, or one		Emergency Room Treatment	\$150
arm, or one leg, or sight of one eye	\$10,000	Eye Injury	
Loss of one finger or toe	\$2,000	Surgical Repair	\$200
Spouse		Removal of Foreign Object	\$50
Non-Common Carrier Accident	\$25,000	Fracture (based on bone involved)	
Common Carrier Accident	\$100,000	Open Reduction	\$200 to \$1,500
Catastrophic Accident	\$10,000*	Closed Reduction	\$100 to \$1,500
Loss of Finger, Toe, Hand, Foot, Arm,		Hospital Admission	\$1,000
Leg or Sight of an Eye		Hospital Confinement Per Day	\$200
loss of one hand, or one foot, or one	\$5,000	Hospital ICU Admission	\$1,500
arm, or one leg, or sight of one eye		Hospital ICU Confinement Per Day	\$400
oss of one finger or toe	\$1,000	Initial Office Visit	\$2!
Children		Knee Cartilage (Torn)	
Non-Common Carrier Accident	\$5,000	With Surgical Repair	\$500
Common Carrier Accident	\$10,000	Exploratory Surgery or Debridement	\$150
Catastrophic Accident	\$10,000*	Laceration	
oss of Finger, Toe, Hand, Foot, Arm,		Treated without stitches, staples, glue	\$25
Leg or Sight of an Eye		Total not more than 3 inches long	
oss of one hand, or one foot, or one	\$5,000	(less than 7.6 centimeters) and repaired	
arm, or one leg, or sight of one eye		by stitches	\$50
oss of one finger or toe	\$1,000	Total is greater than 3 and not more	
Benefit for Catastrophic Accident decreases		than 5 inches long (7.6 to 12.5	
by 50% at age 70		centimeters) and repaired by stitches	\$200
Same for Insured, Spouse or Children		Total is over 5 inches long (12.5	
Accident Follow-Up	\$25	centimeters) and repaired by stitches	\$400
Air Ambulance	\$500	Lodging Per Day	\$100
Ambulance	\$150	Major Diagnostic Exam	\$150
Blood, Plasma, Platelets	\$200	Medical Appliances	\$100
Burns		Pain Management/Epidural	\$75
Flat amount for:		Paralysis	
2nd degree for 36% or more of body surface	\$500	Hemiplegia	\$4,000
3rd degree 9-34 sq. in. of body surface	\$1,000	Paraplegia	\$5,000
3rd degree 35 or more sq. in. of body surface	\$10,000	Quadriplegia	\$10,000
Coma	\$7,500	Physical Therapy Per Day	\$25
Concussion	\$50		•



Benefit	Amount			
Prosthetic Device/Artificial Limb				
One prosthetic device or artificial limb	\$500			
More than one device or artificial limb	\$750			
Rehabilitation Unit Per Day	\$100			
Ruptured Disc with Surgical Repair	\$500			
Skin Graft	50% of Burn Benefit			
Surgery				
Cranial	\$1,000			
Hernia with Surgical Repair	\$1,000			
Abdominal/Thoracic With Surgical Repair	\$1,000			
Abdominal/Thoracic Exploratory Surgery	\$150			
Miscellaneous Surgery with general				
anesthesia	\$250			
Miscellaneous Surgery with conscious				
sedation	\$100			
Tendon/Ligament/Rotator Cuff				
Surgical repair of one or more tendon,				
ligament or rotator cuff	\$500			
If exploratory arthroscopic surgery is				
performed and no repair is done	\$150			
Transportation \$35				
X-Ray				

Accident Policy Form AMIACCP-14 or state variations

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