



# Accidents happen.

A simple accident like a broken bone or a torn muscle can cost thousands.

**Up to \$1 Million  
of Coverage**

**Teladoc**<sup>®</sup>  
HEALTH

**Your Anytime, Anywhere  
Healthcare Benefit**

Support for a wide range of everyday conditions, from cold and flu to a rash or sunburn.

# Why Group Comprehensive Accident Medical Insurance?



Accidents happen, and this plan can help with reimbursing some of the costs you incur so you can focus on getting care. CAM can help you pay for the treatment you need resulting from injuries or accidents.



Next day coverage is available. Don't be without accident coverage!

## What is Teladoc HEALTH?

Your anytime, anywhere healthcare benefit. Access convenient, low-cost, high-quality virtual care for a broad range of everyday healthcare issues.

- Access to qualified, board-certified clinicians anytime, anywhere. Our clinicians diagnose, treat and even prescribe medicine if needed.
- Support for a wide range of everyday conditions, from cold and flu to a rash or sunburn.
- Don't wait weeks for a dermatology appointment. Start a virtual consult anytime with one of our U.S. board-certified dermatologists. In 24 hours or less, you'll get a diagnosis, customized treatment plan and prescriptions if needed.\*
- Mental Health appointments: Have real conversations and see progress with a therapist or psychiatrist of your choice. Available 7 days a week from the privacy of your own home.\*



## What CAM Covers

CAM is an economical and smart way to help protect your family from today's high costs of an accident.

- Freedom to choose your own doctors and hospitals (4 visits per year)
- \$500,000, or \$1,000,000 annual maximum options
- Deductible options of \$1,000, and \$1,500
- Coinsurance Options of 80%/20% and 70%/30%
- Next day coverage available
- Guaranteed Issue for eligible members:  
No exams or medical questions

### That's great! But what if I don't qualify?

No worries! To qualify, there are no medical questions or exams.

Coverage is **guaranteed issue** for eligible members as long as you and/or your spouse are under the age of 65.

This is a brief description of coverage provided under Group Accident, Form GAC-30000, and subject to the terms, conditions, limitations, and exclusion of the Policy. Please see the Policy and Certificate for complete details. Coverage may vary or may not be available in all states.

Insurance benefits are underwritten by United States Fire Insurance Company. C&F and Crum & Forster are registered trademarks of United States Fire Insurance Company. The Crum & Forster group of companies is rated A (Excellent) by AM Best Company 2023.

# How to Get CAM

Helping to protect your family is easy. Coverage can begin as soon as 12:01 a.m. the next day (for eligible members) once application is processed and payment is posted.



**1** Select Plan/Rate  
*Online or Over the Phone*



**2** Complete Application  
*Takes 5 Minutes to Enroll*



**3** Post Payment  
*Print & Access Your Policy Instantly*

# Who We Are



The founding principle and mission of the AUIC is to provide continuing education and professional services and products within the entrepreneurial community. AUIC provides its members with educational content, professional educational blogs and roundtable discussions in specific group chat rooms.



With a proud history going back to 1822, Crum & Forster provides market-leading specialty and standard commercial lines insurance products. Their diversified product offerings include multiline solutions for select industry groups and a broad breadth of specialty products to meet the coverage needs of their business partners. Crum & Forster has an "A" (Excellent) rating from A.M. Best.



CAM is administered by InsuranceTPA.com, a licensed third party administrator serving all 50 states. Focused on education, retention, and efficiency, InsuranceTPA.com provides unparalleled billing and customer service. Their mission is to make plans simple for their members to understand, purchase, and manage.

Your initial payment and subsequent monthly payments will be automatically debited (on or immediately following the payment due dates) from your bank account or credit card that is identified on the Electronic Payment Authorization form. If you wish to discontinue coverage, simply mail or fax your written request for termination and we will discontinue future automatic electronic debits. NOTE: 5 days advance written and signed notice from the Primary Insured is required to ensure future credit card debits are discontinued.

ELIGIBILITY: To qualify, there are no medical questions or exams. Coverage is guaranteed issue as long as you and/or your spouse are under the age of 65.

# Limitations and Exclusions

THIS IS A LIMITED BENEFIT POLICY. The insurance described in this document provides limited benefits. Limited benefits plans are insurance products with reduced benefits intended to supplement comprehensive health insurance plans. This insurance is not an alternative to comprehensive coverage. It does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential benefits as set forth under the Patient Protection and Affordable Care Act. Please keep this summary as a brief description of the important features of the plan. It is not a contract of insurance. This plan includes both insurance and non-insurance benefits. The terms and conditions of coverage are set forth in the Plan. For a detailed plan description, exclusions, and limitations please view the plan on file with the Plan Administrator. The Policy contains a complete description of all of the terms, conditions, and exclusions of the insurance plan as underwritten by United States Fire Insurance Company. The Policy will prevail in the event of any discrepancy between this Brochure and the Policy. Coverage may vary or may not be available in all states. You'll find complete coverage details in the Certificate(s) of Insurance. Group Accident Insurance is underwritten by United States Fire Insurance Company, Eatontown, NJ. The insurance described in this document provides limited benefits. Limited benefit plans are insurance products with reduced benefits intended to help supplement comprehensive health insurance plans. The insurance coverage is not an alternative to comprehensive coverage. It does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance.

The certificate does not cover any loss resulting in whole or part from, or contributed to by, or as a natural or probable consequence of any of the following even if the immediate cause of the loss is an Accidental bodily Injury, unless otherwise covered under the certificate by Additional Benefits:

1. Suicide, self-destruction, attempted self-destruction or intentional self-inflicted Injury while sane.
2. War or any act of war, declared or undeclared.
3. An Accident which occurs while the Covered Person is on Active Duty Service in any Armed Forces, National Guard, military, naval or air service or organized reserve corps;
4. Injury sustained while in the service of the armed forces of any country. When the Covered Person enters the armed forces of any country, We will refund the unearned pro rata premium upon request;
5. Participation in a riot or insurrection;
6. Any Injury requiring treatment which arises out of, or in the course of fighting, brawling assault or battery.
7. Sickness, disease, bodily or mental infirmity or medical or surgical treatment thereof, bacterial or viral infection, regardless of how contracted. This does not include bacterial infection that is the natural and foreseeable result of an Accidental external bodily injury or accidental food poisoning.
8. Disease or disorder of the body or mind.
9. Mental or nervous disorders, except as specifically provided in the certificate.
10. Asphyxiation from voluntarily or involuntarily inhaling gas and not the result of the Covered Person's job.
11. Voluntarily taking any drug or narcotic unless the drug or narcotic is prescribed by a Physician and not taken in the dosage or for the purpose as prescribed by the Covered Person's Physician.
12. Intoxication or being under the influence of any drug or narcotic
13. Injury caused by, contributed to or resulting from the Covered Person's use of alcohol, illegal drugs or medicines that are not taken in the dosage or for the purpose as prescribed by the Covered Person's Physician.
14. Driving under the influence of a controlled substance unless administered on the advice of a Physician;
15. Driving while Intoxicated. "Intoxicated" will have the meaning determined by the laws in the jurisdiction of the geographical area where the loss occurs
16. Violation or in violation or attempt to violate any duly-enacted law or regulation, or commission or attempt to commit an assault or felony, or that occurs while engaged in an illegal occupation.
17. Conditions that are not caused by a Covered Accident.
18. Covered Expenses for which the Covered Person would not be responsible in the absence of the certificate.
19. Any treatment, service or supply not specifically covered by the certificate.
20. Loss resulting from participation in any activity not specifically covered by the certificate.
21. Charges which are in excess of Usual, Reasonable and Customary charges.
22. Expenses incurred for an Accident after the Benefit Period shown in the Schedule of Benefits;
23. Regular health check ups;
24. Services or treatment rendered by a Physician, Nurse or any other person who is employed or retained by the policyholder; or an Immediate Family member of the Covered Person.
25. Any loss for which benefits are paid under any Workers' Compensation Act
26. That part of medical expense payable by any automobile insurance policy without regard to fault. (Does not apply in any state where prohibited);
27. Treatment in any Veterans Administration or Federal Hospital, except if there is a legal obligation to pay.
28. Travel or activity outside the United States.
29. Participation in any motorized race or speed contest.
30. Aggravation or re-injury of a prior Injury that the Covered Person suffered prior to his or her coverage Effective Date, unless We receive a written medical release from the Covered Person's Physician.
31. Heart attack, stroke or other circulatory disease or disorder, whether or not known or diagnosed, unless the immediate cause of Loss is external trauma.
32. Treatment of a hernia whether or not caused by a Covered Accident.
33. Treatment of Osgood-Schlatter's disease, osteochondritis, appendicitis, osteomyelitis, cardiac disease or conditions, pathological or stress fractures, congenital weakness, whether or not caused by a Covered Accident.

# Limitations and Exclusions (Cont.)

34. Treatment of a detached retina unless caused by an Injury suffered from a Covered Accident.
35. Pregnancy, childbirth, miscarriage, abortion or any complications of any of these conditions.
36. Damage to or loss of dentures or bridges or damage to existing orthodontic equipment, except as specifically provided in the certificate.
37. Expense incurred for treatment of temporomandibular joint (TMJ) disorders involving the installation of crowns, pontics, bridges or abutments, or the installation, maintenance or removal of orthodontic or occlusal appliances or equilibration therapy; or craniomandibular joint dysfunction and associated myofascial pain, except as specifically provided in the certificate.
38. Dental care or treatment other than care of sound, natural teeth and gums required on account of Injury resulting from an Accident while the Covered Person is covered under the certificate, and rendered within 6 months of the Accident;
39. Treatment for Blood or Blood plasma, except for charges by a Hospital for the processing or administration of blood;
40. Eyeglasses, contact lenses, hearing aids braces, appliances, or examinations or prescriptions therefore;
41. Any Accident where the Covered Person is the operator of a motor vehicle and does not possess a current and valid motor vehicle operator's license;
42. Travel in or upon:
- (a) A snowmobile;
  - (b) A water jet ski
  - (c) Any two or three wheeled motor vehicle, other than a motorcycle registered for on-road travel;
  - (d) Any off-road motorized vehicle not requiring licensing as a motor vehicle; when used for recreation competition.
43. Travel or flight in or on any vehicle for aerial navigation, including boarding or alighting from:
- i. While riding as a passenger in any Aircraft not intended or licensed for the transportation of passengers; or
  - ii. While being used for any test or experimental purpose; or
  - iii. While piloting, operating, learning to operate or serving as a member of the crew thereof; or
  - iv. While traveling in any such Aircraft or device which is owned or leased by or on behalf of the Policyholder of any subsidiary or affiliate of the Policyholder, or by the Covered Person or any member of his household.
  - v. A space craft or any craft designed for navigation above or beyond the earth's atmosphere; or
  - vi. An ultra light, hang-gliding, parachuting or bungee-cord jumping;
- Except as a fare paying passenger on a regularly scheduled commercial airline or as a passenger in a non-scheduled, private aircraft used for business or pleasure purposes.
44. Treatment for an Injury that is caused by or results from a Nuclear reaction or the release of nuclear energy. However, this exclusion will not apply if the loss is sustained within 180 days of the initial incident and:
- (i) The loss was caused by fire, heat, explosion or other physical trauma which was a result of the release of nuclear energy; and
  - (ii) The Covered Person was within a 25-mile radius of the site of the release either:
    - 1) At the time of the release; or
    - 2) Within 24 hours of the start of the release.
45. Practice or play in any school or professional sports contest or competition.
46. The repair or replacement of existing artificial limbs, orthopedic braces, or orthotic devices;
47. Rest cures or custodial care;
48. Prescription medicines unless specifically provided for under the certificate.
49. Elective or Cosmetic surgery, except for reconstructive surgery on a diseased or injured part of the body;
50. Massage Therapy, Physical Therapy or Acupuncture/Acupressure Services, unless otherwise specifically allowed for in the schedule of benefits.
51. Services rendered for detection and correction by manual or mechanical means (including x-rays incidental thereto) of structural imbalance, distortion or subluxation in the human body for purposes of removing nerve interference where such interference is the result of or related to distortion, misalignment or subluxation of or in the vertebral column.

As the result of an Injury caused by an Accident for which the Covered Person is entitled to benefits paid or payable by Workers' Compensation or other similar law. To be eligible for this group insurance, you must be a member of AUC.

This policy is ongoing and payments will continue to post until we receive written notification of your request to cancel.

Any payments drafted from your financial institution will show up as InsuranceTPA.com. This policy is ongoing and payments will continue to post until we receive written notification of your request to cancel 5 days before your next billing date, and your request is processed.

Policy terms, conditions, exclusions and limitations may vary by state. This product may not be available in all states. This brochure provides a very brief description of the important features of the Comprehensive Accident Medical plan that includes group accident insurance policies. This brochure is not a certificate of coverage and only the actual certificate provisions will control. The certificate itself sets forth in detail the rights and obligations of both the certificate holder and the insurance company. It is, therefore, important that you READ THE CERTIFICATE CAREFULLY.