

# Legion AME



Underwritten by  
AXIS Insurance Company



Association



Billing and Customer Service



THIS INSURANCE PROVIDES LIMITED BENEFITS. LIMITED BENEFIT PLANS ARE INSURANCE PRODUCTS WITH REDUCED BENEFITS AND ARE NOT INTENDED TO BE AN ALTERNATIVE TO OR INTEGRATED WITH COMPREHENSIVE COVERAGE. FURTHER, THIS INSURANCE DOES NOT COORDINATE WITH ANY OTHER INSURANCE PLAN. 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. IF YOU DON'T HAVE MINIMUM ESSENTIAL COVERAGE, YOU MAY OWE ADDITIONAL PAYMENT WITH YOUR TAXES.

**COVERAGE IS SUBJECT TO EXCLUSIONS AND LIMITATIONS, AND MAY NOT BE AVAILABLE IN ALL US STATES AND JURISDICTIONS. PRODUCT AVAILABILITY AND PLAN DESIGN FEATURES, INCLUDING ELIGIBILITY REQUIREMENTS, DESCRIPTIONS OF BENEFITS, EXCLUSIONS OR LIMITATION MAY VARY DEPENDING ON LOCAL COUNTRY OR US STATE LAWS. FULL TERMS AND CONDITIONS OF COVERAGE, INCLUDING EFFECTIVE DATES OF COVERAGE, BENEFITS, LIMITATIONS AND EXCLUSIONS, ARE SET FORTH IN THE POLICY.**

The Limited Benefit Plans are underwritten by AXIS Insurance Company under group policy form number GOA-001-0112.

# Association



AFEUSA strives to bring the member the most current information on business, technology, and related processes to help the member grow the confidence needed to succeed. Entrepreneurship takes a much different shape today than in the past. In fact, the member may have a business and not even know it.

The member might be selling goods on eBay, repairing old cars and posting ads online, might be a grandmother who babysits kids, or an Uber or Lyft driver. We are always eager to chat with our members. We are here for you! With AFEUSA it's success by association.

- BurnAlong
- NeedyMeds
- AmericanTM Hearing Benefits (AHB)
- Avis® and Budget® Car Rental Discounts
- SkyMed
- SkyMed Travel
- CARCHEX®
- TrueCarTM
- Costco®
- Benefit Hub
- Home Chef
- Long-Term Care Resources
- Griswold® Home Care
- Gusto
- Take Charge America®
- The Credit Clinic
- EJ Pro Lease
- First American
- Eric'sJobs.com
- Trapp Technology
- UPS
- Office Depot® and OfficeMax® Discounts
- E6 Agency
- The Newsletter Pro
- Genius Network®
- Big Results Academy
- GoSmallBiz.com
- The Messinger Institute
- SocialCore Marketing
- Joe Weldon Consultant and Executive Speech Coach
- Empowered Couples University
- InfoArmor®
- LegalShield<sup>SM</sup>
- IDShield<sup>SM</sup>

# Product Summary

Coverage Effective Date	Next day coverage; later effective date available, but not to exceed 60 days from date of processed application
Waiting Period	No Waiting Period
Age Eligibility	Ages 18 – 64 Dependent Children from birth to 26 years old

## Plan Benefits

Accidental Death and Dismemberment Benefit							
	Plan 500	Plan 1,000	Plan 3,000	Plan 5,000	Plan 10,000	Plan 15,000	Plan 20,000
Primary Insured Principal Sum	\$1,000	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$20,000
Insured Spouse Principal Sum	\$1,000	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$20,000
Insured Dependent Principal Sum	\$1,000	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$15,000
Time Period for Loss from date of Covered Accident	365 days	365 days	365 days	365 days	365 days	365 days	365 days
Outpatient Accident Medical Benefit							
	Plan 500	Plan 1,000	Plan 3,000	Plan 5,000	Plan 10,000	Plan 15,000	Plan 20,000
Benefit Maximum per Plan Year	\$500	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$20,000
First Expense Incurral Period from Covered Accident	72 hours	72 hours	72 hours	72 hours	72 hours	72 hours	72 hours
Deductible per Covered Accident	\$250	\$250	\$250	\$250	\$250	\$250	\$250
Benefit Percent Payable of Usual & Customary Charges	80%	80%	80%	80%	80%	80%	80%
Maximum Benefit Period from Covered Accident	90 days	90 days	90 days	90 days	90 days	90 days	90 days

**Disclaimer:** The amount of benefits provided depends upon the plan selected; the premium will vary with the amount of the benefits selected.

# Accidental Death and Dismemberment Benefits

The Company will pay the Benefit Amount for any one of the Covered Losses listed below, subject to all applicable conditions and exclusions, if the Insured Person suffers a Loss within the applicable time period specified in the *Schedule of Benefits*.

If the Insured Person sustains more than one Loss as a result of the same Covered Accident, the Company will pay the Benefit for the Loss for which the largest benefit is payable.

## Schedule of Losses

Loss	Benefit Amount
Life	100% of the Principal Sum
Two or more Members	100% of the Principal Sum
One Member	50% of the Principal Sum
Thumb and Index Finger of the Same Hand	25% of the Principal Sum
Four Fingers of the Same Hand	25% of the Principal Sum

# Outpatient Accident Medical Expense Benefits

The Company will pay Outpatient Accident Medical Expense Benefit amount for the Covered Medical Expenses listed below that result directly from a Covered Injury.

Outpatient Accident Medical Expense Benefits are only payable:

- 1. when Covered Medical Expenses incurred exceed any applicable Deductible specified in the *Schedule of Benefits*;
- 2. as long as the first Covered Medical Expense has been incurred within the number of days specified in the *Schedule of Benefits*;
- 3. until the Maximum Benefit Period shown in the *Schedule of Benefits* has expired; or
- 4. until Benefits paid equal the Benefit Maximum shown in the *Schedule of Benefits*.

No benefits will be paid for any Covered Medical Expenses incurred that are in excess of Usual and Customary Charges.

**THIS IS AN ACCIDENT ONLY POLICY. THE COVERED LOSSES ARE LIMITED TO THOSE LOSSES LISTED ABOVE.**

# Limitations & Exclusions

In addition to the Common Exclusions, the Company will not pay Outpatient Accident Medical Expense Benefits for any Covered Medical Expense, treatment or services resulting from:

1. treatment of sickness, disease or bacterial infections, except infections that result from an Accidental injury, or infections which result from the Accidental, involuntary or unintentional ingestion of a contaminated substance;
2. treatment of all types of hernia, Osgood-Schlatter's Disease, osteochondritis, appendicitis;
3. osteomyelitis, cardiac disease or conditions, pathological fractures, congenital weakness;
4. detached retina unless caused by a Covered Accident;
5. mental disorder or psychological or psychiatric care or treatment whether or not caused by a Covered Accident;
6. pregnancy, childbirth, miscarriage, abortion or any complications of any of these conditions;
7. mental and nervous disorders;
8. damage to or loss of dentures or bridges, or damage to existing orthodontic equipment;
9. expenses incurred for treatment of temporomandibular or craniomandibular joint dysfunction and associated myofacial disorders;
10. injury covered by Workers' Compensation, Employer's Liability Laws or similar occupational benefits, including any insurance policy that provides benefits to the Insured Person for injuries resulting from an occupational accident, or while engaging in an occupation for monetary gain from sources other than the Policyholder.
11. cosmetic and elective surgery;
12. any elective treatment, health treatment, or examination, including any service, treatment or supplies that: (a) are deemed by us to be experimental; and (b) are not recognized and generally accepted medical practices in the United States;
13. eyeglasses, contact lenses, hearing aids, examinations or prescriptions for them, or repair or replacement of existing artificial limbs, orthopedic braces, or orthotic devices;
14. expenses payable by any automobile insurance policy without regard to fault;
15. conditions that are not caused by a Covered Accident;
16. any treatment, service or supply not specifically covered by the Certificate; or
17. injuries paid under medical payment coverage or no-fault coverage contained in an automobile insurance policy or liability insurance policy.



## Non-Insurance Benefit



Simply put, SingleCare can save you up to 80% on prescriptions, and on average, our prices are 45% lower than retail. In many cases, less than the cost through an insurance plan. You will only pay for the prescriptions you need, at the pharmacy of your choice. There are no membership fees, no premiums, and zero cost to join.

Use SingleCare for your prescriptions when:

- Your prescriptions are not covered by your health insurance
- Your prescription is subject to a deductible
- Your copay is higher than the SingleCare price



**Disclaimer:** The Benefit listed is not insurance and does not provide coverage, it only provides discounts and services. This benefit is not affiliated with AXIS Insurance Company. This program offers you the opportunity to locate providers of various types of medical services who will offer their services to you at discounted rates. The range of discounts for medical or ancillary services provided under the plan will vary depending on the type of provider and service received. You are fully responsible for paying for all health care services but will be entitled to receive a discount from those health care providers in accordance with the specific pre-negotiated discounted fee schedule. This program does not guarantee the quality of the services or procedures offered by the providers. Except for prescription drugs which you will pay directly to the pharmacy at the time of purchase, all other services received through a program provider will be charged to the credit card on file in your member account. The charge will include an administrative fee for use of the program.