ACCIDENT MEDICAL EXPENSE COVERAGE
THE POLICY PROVIDES LIMITED BENEFITS

BENEFITS PROVIDED ARE SUPPLEMENTAL AND ARE NOT INTENDED TO COVER ALL MEDICAL EXPENSES

OUTLINE OF COVERAGE

THE POLICY IS NOT A MEDICARE SUPPLEMENT POLICY. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from the company.

Read Your Policy Carefully — This outline of coverage provides a very brief description of the important features of coverage. This is not the insurance contract and only the actual policy provisions will control. The Policy itself sets forth in detail the rights and obligations of both the Owner ("You" or "Your") and Colorado Bankers Life Insurance Company ("We", "Our" or "Us"). It is, therefore, important that you READ YOUR POLICY CAREFULLY!

Accident-only coverage is designed to provide, to persons insured, coverage for certain losses resulting from a covered accident ONLY, subject to any limitations contained in the policy. Coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.

A. DESCRIPTION OF BENEFITS

1. Eligibility.
   To be eligible for accident benefits under the Policy:
   (a) A Covered Person:
      (1) must be Injured in an Accident,
      (2) while the Policy is in force, and satisfy the other rules under the Policy; and
   (b) A Request for benefits that complies with all of the rules for filing such a claim must be made to Us.

2. Accident Medical Expenses.
   Subject to the terms of the Policy, during each calendar year, if a Covered Person is Injured in an Accident that requires care by a Legally Qualified Physician, We will pay Covered Medical Expenses incurred by the Covered Person as a result of that Accident:
   (a) not to exceed the Accident Medical Expense Benefit Amount for the Covered Person,
   (b) less the amount of any Accident Medical Expense Benefit already paid or pending payment for that calendar year,
   (c) less the applicable Deductible.
   The Accident Medical Expense Benefit Amount for each Covered Person is shown in the application. Each Covered Person has a Deductible as indicated in the application. This Deductible will apply to each Injury. Treatment must be rendered in a Hospital or in a Legally Qualified Physician's Office. Care for an Injury received in an Accident must begin within 90 days after the Accident. No more than the Accident Medical Expense Benefit Amount for the Covered Person is payable for Covered Medical Expenses of the Covered Person for each calendar year.

   Subject to the terms of the Policy, if a Covered Person is Injured in an Accident that results in a Catastrophic Loss within 90 days of such Accident, We will pay the Benefit Amount for Catastrophic Loss for such Covered Person. Only one Catastrophic Loss benefit is payable for each Covered Person regardless of the number of Catastrophic Losses incurred.
   The Catastrophic Loss Benefit Amount for each Covered Person is the amount elected in the application.

4. Accidental Death.
   The Accidental Death Benefit Amount for a Covered Person is payable if the Covered Person dies as a direct result of an Accident within 90 days of the Accident. The Benefit Amount for each Covered Person will be:

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(a) twice the benefit amount elected in the application if the Covered Person’s death is a direct result of an Accident involving a Common-Carrier Vehicle in which the Covered Person is a passenger; otherwise,
(b) the benefit amount elected in the application for Accidental Death, Other Accidents.
Upon payment of the benefits for Accidental Death, the Covered Person’s insurance will terminate.

5. **Other Eligibility and Benefit Amount Rules for the Covered Person.**

Only one benefit type is payable for all of a Covered Person’s Injuries due to a single Accident. If a single Accident results in Covered Medical Expenses, Catastrophic Loss and/or Accidental Death, We will pay only one of those types of benefit. The type of benefit payable will be the largest one for which the Covered Person is eligible.

**B. EXCLUSIONS AND LIMITATIONS**

1. **Limitations**

   No benefits are payable for an Accident which results from or is caused by:
   (a) War or act of war, whether war is declared or not;
   (b) Intentionally self-inflicted Injury or illness, while sane or insane;
   (c) The Covered Person’s commission of or attempt to commit a felony, or being engaged in an illegal occupation;
   (d) The Covered Person’s taking part in a riot, insurrection, rebellion, civil commotion, civil disobedience or unlawful assembly, except while acting in a lawful manner within the scope of authority;
   (e) The Covered Person’s participation in a professional or semi-professional sport, high-risk or extreme sports such as bungee jumping, base jumping, parachuting, hang gliding or contest of speeds;
   (f) The Covered Person’s elective or cosmetic surgery, unless due to an Accident;
   (g) The Covered Person’s engaging in air travel, except while riding as a fare-paying passenger on a regularly scheduled commercial airline or as a passenger for transportation only and not as a pilot or crew member;
   (h) The Covered Person’s alcohol or drug intoxication, or drug addiction, unless such drugs are taken on the advice of and in the manner and dosage prescribed by a Legally Qualified Physician; or
   (i) The Covered Person’s driving while under the influence of alcohol or other intoxicating substance as defined by the applicable law of the jurisdiction in which the Accident occurred. Conviction is not necessary for a determination of the applicability of this provision.

**C. GUARANTEED RENEWABLE FOR LIFE**

You may keep the Policy in force by paying all premiums as due. Your premium can be changed if We change the premium on all policies in Your Policy’s premium class.

**D. PREMIUM**

Premium is due in advance. We allow a 31-day grace period for payments of every premium after the first premium payment.