

Accident Insurance



No one plans on getting injured. . . but just in case, we've got you covered.

You do everything you can to stay active and healthy, but accidents happen every day, including sports-related accidents. An injury that hurts an arm or a leg can hurt your finances too. That's where Chubb Accident can help.

Chubb Accident pays cash benefits directly to you or anyone you choose regardless of any other coverage you have. And Chubb Accident pays extra benefits for injuries resulting from participating in organized sports. Let Chubb Accident help take care of your bills so you can take care of yourself and your family.

Accident Benefits always include:

First Accident

Pays you \$100 soon after you report your first claim for covered benefits!

Sports Package

Your benefits increase 25%, up to \$1,000 per person per year, for injuries resulting from participating in organized sports!

Rehabilitation Package

We pay cash benefits for Admission, Daily Confinement and Recovery at either a Rehabilitation Center following a hospital stay or recovery at home.

Initial Eligibility

Member Actively employed working at least 17.5 hours per week; ages 18 and up

Spouse

Ages 18 and up

Dependent children/grandchildren

Ages 0 to 26. No student status required. Coverage will continue for incapacitated dependent children regardless of age.

Exclusions & Limitations

This is Accident-Only Insurance.

No benefits will be paid for services rendered by a member of the Immediate Family of a Covered Person.

No benefits will be payable for sickness or infection including physical or mental condition that is not caused solely by or as a direct result of a Covered Accident.

No benefits will be paid for an injury that is caused by, contributed to, or occurs as a result of a covered person's:

- Being intoxicated, or under the influence of alcohol or any narcotic or other prescription drug unless administered on the advice of a Physician and taken according to the Physician's instructions (the term "intoxicated" means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction in which the accident occurred);
- Participating in an illegal activity or attempting to commit or actually committing a felony ("felony" is as defined by the law of the jurisdiction in which the activity takes place);

- Committing or attempting to commit suicide or intentionally injuring himself or herself;
- Having dental treatment, except for such care or treatment due to injury to sound natural teeth within twelve (12) months of the Covered Accident;
- Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary thereto; or
- Participation in any contest using any type of motorized vehicle.

No benefits will be paid for an injury incurred while working for pay or profit.

For use in the following states: AL, AZ, DE, DC, HI, IN, IA, KY, MA, MS, NJ, NM, ND, OH, PA, RI, SC, TN, TX, WV, WI, WY

This is a supplement to health insurance and is not a substitute for Major Medical or other minimal essential coverage.

This document is a brief description of Form No. C14059R (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. This insurance product is underwritten by Combined Insurance Company of America, Chicago, IL, a Chubb company.

For members of



Schedule of Benefits – Non-occupational Coverage

Gold & Platinum Plans

| Initial Care | GOLD | PLATINUM |
|-------------------------------|---------|----------|
| Ambulance | | |
| <i>Ground</i> | \$120 | \$200 |
| <i>Air</i> | \$1,000 | \$2,000 |
| Emergency Room | \$75 | \$100 |
| Initial Doctor's Office Visit | \$25 | \$50 |
| Urgent Care | \$50 | \$75 |
| Emergency Dental | | |
| <i>Crown</i> | \$200 | \$300 |
| <i>Extraction</i> | \$50 | \$75 |

Hospital and Rehabilitation

| | | |
|---|---------|---------|
| Hospital Admission | \$500 | \$1,000 |
| ICU Admission | \$1,000 | \$2,000 |
| Rehabilitation Admission | \$500 | \$1,000 |
| Hospital Confinement <i>per day, up to 365 days</i> | \$150 | \$225 |
| ICU Confinement <i>per day, up to 30 days</i> | \$300 | \$450 |
| Rehabilitation Confinement <i>per day, up to 30 days</i> | \$90 | \$135 |
| Recovery <i>per day, up to seven days</i> | \$25 | \$25 |

Follow-up Care & Treatment

| | | |
|---|---------|---------|
| Abdominal or Thoracic Surgery | \$750 | \$1,500 |
| Appliances | \$75 | \$100 |
| Blood, Plasma, Platelets | \$200 | \$300 |
| Chiropractic Care <i>per visit, up to three visits</i> | \$50 | \$50 |
| Concussion | \$60 | \$100 |
| Follow-up Treatment <i>per visit, up to two visits</i> | \$25 | \$50 |
| Lodging <i>for treatment 100 miles or more away; per night, up to 30 nights</i> | \$100 | \$125 |
| Major Diagnostic Exam (CT, MRI, etc.) | \$100 | \$150 |
| Organ Loss | \$2,500 | \$2,500 |
| Outpatient Surgery Facility | \$50 | \$50 |
| Physical Therapy <i>per visit, up to 10 visits</i> | \$25 | \$50 |
| Prosthetics | \$500 | \$1,000 |
| Tendon, Ligament, or Rotator Cuff Surgery | \$400 | \$500 |
| Transportation <i>for treatment and confinement in a hospital 100 miles or more away; per trip, up to three trips</i> | \$300 | \$500 |
| X-ray | \$20 | \$30 |

| Injuries | GOLD | PLATINUM |
|---|-------------------------|------------------|
| Burns | | |
| <i>2nd/3rd degree</i> | \$750-\$7,500 | \$1,000-\$10,000 |
| Skin Graft | 25% of the burn benefit | |
| Coma | \$7,500 | \$10,000 |
| Dislocations | | |
| <i>Open reduction, up to ...</i> | \$3,600 | \$4,400 |
| <i>Closed reduction, up to ...</i> | \$1,800 | \$2,200 |
| Eye | \$200 | \$300 |
| Fractures | | |
| <i>Open reduction, up to ...</i> | \$5,000 | \$6,000 |
| <i>Closed reduction, up to ...</i> | \$2,500 | \$3,000 |
| Herniated Disc Surgery | \$400 | \$500 |
| Knee Cartilage (Torn) Surgery | \$400 | \$500 |
| Lacerations | \$20-\$300 | \$30-\$400 |
| Loss of Hands, Feet or Sight - <i>up to</i> | \$10,000 | \$14,000 |
| Loss of Fingers or Toes - <i>up to</i> | \$1,200 | \$1,500 |

Additional Benefits

| | | |
|---|--------------|--------------|
| First Accident once per policy | \$100 | \$100 |
| Sports Package Benefits are 25% higher when accident is due to participation in organized sports. Up to \$1,000 per person per year. | | |
| Accidental Death | | |
| <i>Employee & Spouse</i> | \$25,000 | \$50,000 |
| <i>Child</i> | \$5,000 | \$10,000 |
| Catastrophic Accident | | |
| <i>Prior to Age 70</i> | | |
| <i>Employee & Spouse</i> | \$50,000 | \$50,000 |
| <i>Child</i> | \$25,000 | \$25,000 |
| <i>On or after Age 70</i> | 50% | 50% |
| Family Care <i>for each child in a child care center; per day, up to 30 days</i> | \$50 | \$50 |

Benefits may vary by state. Benefits are paid once per accident unless otherwise noted.

Marketed by
Choice Benefits America

1-844-229-5629