



Underwritten by *The Chesapeake Life Insurance Company*®

Accident Companion



Help with out-of-pocket costs for accidental injuries.

Notice to Our Customers About Supplemental Insurance

- The supplemental plan discussed in this document is separate from any health insurance coverage you may have purchased with another insurance company.
- This plan provides optional coverage for an additional premium. It is intended to supplement your health insurance and provide additional protection.
- This plan is not required in order to purchase health insurance with another insurance company.
- This plan should not be used as a substitute for comprehensive health insurance coverage. It is not considered Minimum Essential Coverage under the Affordable Care Act.



SureBridge® is a registered trademark used for both insurance and non-insurance products offered by subsidiaries of HealthMarkets, Inc. Supplemental and life insurance products are underwritten by The Chesapeake Life Insurance Company®. Administrative offices are located in North Richland Hills, TX. Products are marketed through independent agents/producers. Insurance product availability may vary by state.



Accident Companion

Cash benefits paid directly to you, not your doctor or hospital.

DID YOU KNOW?

1 in 8

persons seek medical attention from an injury each year.¹

Cash benefits can be used for:

- Co-pays or co-insurance
- Rent/mortgage
- Car payments
- Child care
- Everyday living expenses

Accidents happen and the **Accident Companion** plan can help you financially when they do. The plan offers **four, budget-friendly benefit level options**. When you receive treatment for an accidental injury, the plan pays **lump-sum cash benefits** directly to you. The money can be used to **pay unexpected medical costs or everyday living expenses**.

Applying is simple and can be completed in minutes.

Accident Companion At A Glance

- Pays a lump-sum cash benefit for accidental injuries even if benefits are also paid under Workers' Compensation², up to:
 - **\$10,000 lump-sum cash benefit** for accidental injuries that result in a hospital confinement
 - **\$1,000 lump-sum cash benefit** per injury for emergency treatment received in an ER or urgent care facility
 - **\$1,000 lump-sum cash benefit** for major diagnostic exam (one exam per Policy year)
 - **\$100 lump-sum cash benefit** per visit for follow-up treatment or physical therapy (up to five visits per Policy year)
- Benefits are paid directly to you - not your doctor or hospital
- Affordable premiums that do not increase as you get older with coverage **starting at less than \$7⁰⁰ per month³**

¹ National Safety Council, Injury Facts, 2014 | ² Benefits are not coordinated with Workers' Compensation. Exclusions & Limitations and Policy provisions may apply. For a complete listing of benefits, exclusions and limitations, please refer to your Policy. | ³ For coverage Option 1. See chart on next page for full list of coverage option levels.

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BENEFITS (per person, per accidental injury)	Option 1	Option 2	Option 3	Option 4
Hospital Confinement¹ (one per Policy year)	\$2,500	\$5,000	\$7,500	\$10,000
Emergency Treatment² (within 72 hours of Injury)	\$250 per injury	\$500 per injury	\$750 per injury	\$1,000 per injury
Major Diagnostic Exam (one per Policy year at hospital or urgent care center)	\$250	\$500	\$750	\$1,000
Follow-up Treatment³ (up to five visits per Policy year)	\$50 per visit	\$100 per visit	\$100 per visit	\$100 per visit
OR				
Follow-up Physical Therapy³ (up to five visits per Policy year)	\$50 per visit	\$100 per visit	\$100 per visit	\$100 per visit
MONTHLY PREMIUMS	\$7.00	\$13.50	\$19.50	\$25.00

The chart above is only an illustration of benefit and premium options per covered person.

¹ Hospital confinement must begin within 30 days of the accidental injury | ² Treatment in Emergency Room or Urgent Care Facility | ³ Benefits following Emergency Room or Urgent Care treatment and therapy provided within 30 days of initial onset. Follow-up treatment and physical therapy received on the same day will only receive one benefit.

Consumer Preferred Status: Based on 39% of customers with the "Option 4" benefit level (8/2016).

This brochure provides only summary information. The information contained herein is accurate at the time of publication. This plan is not intended as a replacement for accident and sickness health insurance and should not be construed as such. For a complete listing of benefits, exclusions and limitations, please refer to your Policy. In the event of any discrepancies contained in this brochure, the terms and conditions contained in the Policy documents shall govern. An Accidental Injury Only Insurance Policy, Form CH-26122-IP (01/11) FL (06/11).

ACCIDENT COMPANION: OTHER IMPORTANT INFORMATION

Definitions (See Policy for Other Important Definitions):

- **Accidental Injury** means sudden, non-recurrent, traumatic, accidental and unanticipated damage to the body, not of gradual onset requiring immediate medical attention, and not contributed to, directly or indirectly, by a sickness. The accidental injury must first occur after the insured person's coverage has become effective and while the coverage is in force under the Policy.
- **First Occur, First Occurred or First Occurrence** means an accidental injury for which diagnosis, treatment, surgery or advice by a physician, or manifested symptoms, initially occurred while the Policy is in force for the insured person and for the first time in the insured person's lifetime.
- **Hospital** means an institution operated pursuant to its license for the care and treatment of sick and injured persons for which a charge is made that the insured person is legally obligated to pay. The institution must maintain on its premises organized facilities for medical, diagnostic and surgical care for sick and injured persons on an inpatient basis; maintain a staff of one or more duly licensed physicians; provide 24 hour nursing care by or under the supervision of a registered graduate professional nurse (R.N.); and is accredited as a hospital by the Joint Commission on Accreditation of Hospitals.
- **Policy Year** means each consecutive 12 month period beginning with your effective date of coverage.
- **Urgent Care Center** means a free-standing facility, center or other entity that operates primarily to provide specialty medical treatment of an unforeseen, unexpected accidental injury on an urgently needed or prompt basis.

EXCLUSIONS AND LIMITATIONS

We will not provide benefits for loss caused by, resulting from, or in connection with:

Sickness, including but not limited to pregnancy and childbirth | Any care not medically necessary (except as specifically provided in the Policy) or benefits which are not specifically provided for in the Policy | Hospital Confinement for childbirth, including routine or normal newborn child care | Accidental Injuries that do not first occur while the Policy is in force for the insured person | Any act of war, declared or undeclared | Active military duty in the service or any country | Participation in a riot, civil commotion or insurrection | Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane | Mental or Nervous disorders | Having cosmetic surgery or other elective procedures that are not medically necessary | Operating any motorized passenger vehicle for wage, compensation or profit | Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly, unless taken as prescribed by a physician | An overdose of drugs, being intoxicated or under the influence of intoxicants, hallucinogens, narcotics or other drugs, directly or indirectly, unless taken as prescribed by a physician | Directly or indirectly engaging in an illegal occupation or illegal activity or Your being incarcerated | Committing or trying to commit a felony | Mountaineering using ropes and/or other equipment, parachuting, hang gliding, racing any type of vehicle in an organized or unorganized event, sky diving, scuba diving below 130 feet, motorized racing, para-sailing, experimental aviation, ultra-light flying, base jumping, bungee jumping, heli-skiing or helisnowboarding and | Travel in or descent from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline (other than a charter airline) certified by the U.S. Federal Aviation Administration (FAA), on a regularly scheduled passenger trip.

ACCIDENT COMPANION: OTHER IMPORTANT INFORMATION (continued)

Coverage Information:

- **COVERAGE BEGINS:** Chesapeake requires evidence of insurability before coverage is provided. Once Chesapeake has approved your application and you have paid your premium, coverage will begin on the Policy date shown in the Policy schedule.
- **RENEWABILITY:** Your Policy is conditionally renewable to age 65, subject to Chesapeake's right to discontinue or terminate coverage as provided in the termination of coverage section of the Policy.
- **PREMIUM CHANGES:** Chesapeake reserves the right to change the table of premiums, on a class basis, becoming due under the Policy at any time and from time to time; provided, Chesapeake has given you written notice of at least 45 days prior to the effective date of the new rates. Such change will be on a class basis.
- **TERMINATION OF COVERAGE:** Your coverage will terminate and no benefits will be payable under the Policy: At the end of the month for which premium has been paid | On the date of Our receipt of Your request for termination or on the date specified in your termination request, whichever is later | On the date of fraud or material misrepresentation by you | On the date we elect to discontinue this plan or type of coverage. We will give you at least 90 days notice before the date coverage will be discontinued. You will be offered an option to purchase any other coverage that we offer without regard to health status | On the date we elect to discontinue all coverage in your state. We will give you and the proper state authority at least 180 days notice before the date coverage will be discontinued | On the date an insured person is no longer a permanent resident of the United States | On the date you reach age 65 | Your dependent's coverage will terminate at the end of the month following the date such dependent ceases to be an eligible dependent.

For a complete listing of benefits, exclusions and limitations, please refer to your Policy. In the event of any discrepancies contained in this brochure, the terms and conditions contained in the Policy documents shall govern.

About SureBridge

SureBridge is one of the leading brands of supplemental insurance coverage in the United States, helping to provide financial security for Americans of all ages and their families. Our comprehensive portfolio of products is available from licensed insurance agents in 46 states and the District of Columbia and are available through HealthMarkets Insurance Agency, as well as through other unaffiliated insurance distributors. SureBridge policyholders can receive direct cash benefits for expenses caused by unexpected medical issues, sustained illnesses and end of life challenges.

The SureBridge portfolio includes dental, vision, and other insurance plans that complement an individual's health insurance. These plans help provide an additional layer of protection in the event of accidental injury, catastrophic illness, hospitalization or cancer.

For more information on SureBridge's supplemental insurance products, please visit [SureBridgeInsurance.com](https://www.SureBridgeInsurance.com)



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Navigate life's twists and turns

with the SureBridge portfolio
of supplemental and life
insurance products

Dental

Accident Direct

Accident Disability Direct

Critical Illness Direct

Critical Accident Direct

Accident Companion

Simplified Issue Term Life

Metal Gap

Vision

Income Protection Direct

CancerWise®

Hospital Confinement Direct

ProtectFit Plus

Final Expense Whole Life

Fixed Indemnity Direct

SureBridgeInsurance.com

800-815-8535

Weekdays, 8am to 5pm in all time zones



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