Critical Accident Direct

Cash benefits to help cover expenses that result from Serious accident

DID YOU KNOW? 7 in 10

workers say they could not cover normal living expenses for more than 6 months without a paycheck.¹

Cash benefits can be used for:

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

With advances in emergency medical treatment and trauma care, the likelihood of surviving a critical accident continues to improve. However, there are likely to be many unexpected expenses related to an extended recovery period with an injury that is life altering.

The **Critical Accident Direct** plan offers multiple **budget-friendly benefit level options** that **pay a one-time lump-sum cash benefit** 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.

Critical Accident Direct At A Glance

- Pays up to a \$60,000 lump-sum cash benefit for a qualifying injury²
- · 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 \$1⁵⁰ per month³

Cash benefits paid directly to you. Apply today!

¹ Social Security Administration, Fact Sheet February 2013 |² Available on the highest option |³ For female at \$10,000 benefit level.



Underwritten by The Chesapeake Life Insurance Company®

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Critical Accident Direct 💓

DESCRIPTION

Pays a one-time cash lump sum benefit¹ for the conditions listed below. All qualifying injuries must be caused by an accident, independent of any other causes, and occur within 60 days of the accident.

- Quadriplegia: total paralysis of both upper and lower limbs²
- Paraplegia: total paralysis of lower limbs²
- Hemiplegia: total paralysis of upper and lower limbs on one side of body²
- Third degree burn to 10% of body
- Second degree burn to 20% of the body
- Coma
- Loss of sight in both eyes
- Loss of hearing in both ears

Family Security Benefit: Beginning with the next premium due date following the receipt of due proof of the death of the Policy holder, we will waive premiums for a period of 12 months for covered dependents. During this premium waiver period, no increase in benefits or addition of eligible dependents, except newborns, will be considered. Provisions for termination of coverage for covered dependents will apply.



MONTHLY							
PREMIUMS	\$10,000	\$15,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000
Male	\$2 ⁵⁰	\$3 ⁷⁵	\$5 ⁰⁰	\$7 ⁵⁰	\$10 ⁰⁰	\$12 ⁵⁰	\$ 15 ⁰⁰
Female	\$1 ⁵⁰	\$2 ²⁵	\$3 ⁰⁰	\$4 ⁵⁰	\$6 ⁰⁰	\$7 ⁵⁰	\$9 ⁰⁰
Dependent Child	\$2 ⁰⁰	\$3 ⁰⁰	\$4 ⁰⁰	\$6 ⁰⁰	\$8 ⁰⁰	\$10 ⁰⁰	\$1200

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

Consumer Preferred Status: Based on 31% of applicants selecting the \$10,000 benefit level (4/2013).

Apply today for Critical Accident Direct to help cover costs related to accidental injuries

¹ In no event will the Policy pay more than one benefit amount for each insured person during that insured person's lifetime. |² For a continuous period of at least 30 days | This brochure provides only summary information. The information contained herein is accurate at the time of print. 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, definitions, 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. A Critical Accidental Injury Only Policy, Form CH-26123-IP (04/11) KS.

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CRITICAL ACCIDENT DIRECT: OTHER IMPORTANT INFORMATION

Definitions:

• Qualifying Injury means one of the conditions listed which occurs while the Policy is in force, is a direct result of an accidental injury, occurs within 60 days of such accidental injury, and for which a positive diagnosis is made by a legally gualified physician.

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

Sickness | Any care or benefits which are not specifically provided for in the Policy | Any act of war, declared or undeclared | Active military duty in the service of any country | Participation in a riot, civil commotion or insurrection | Suicide, attempted suicide, or any intentionally self-inflicted injury while sane or insane | Payment for care for military service connected disabilities for which the insured person is legally entitled to services and for which facilities are reasonably available to the insured person and payment for care for conditions that state or local law requires be treated in a public facility | Experimental or investigational medicine | Intentionally medically induced qualifying injury | Cosmetic surgery | 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 | Sunburn | Treatment, services or supplies received outside the U.S. or Canada. However, treatment, services or supplies received as a result of an acute accidental injury sustained during the first 30 days of travel outside of the U.S. or Canada will be considered a covered expense. In no event will treatment, services or supplies received beyond the first 30 days of travel outside of the U.S. or Canada be considered a covered expense.

Benefits will not be payable for: A qualifying injury that occurred prior to an insured person's effective date of coverage | Any condition that is not a qualifying injury, as defined in the Policy | Loss resulting from any other condition or incapacity, other than loss resulting from a qualifying injury, as defined in the Policy. This includes any other condition or incapacity which may have been complicated or directly or indirectly affected or caused by a qualifying injury or as a result of treatment of a qualifying injury | Any amounts in excess of the lifetime benefit amount.

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 75, 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 31 days prior to the effective date of the new rates.
- **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 the qualifying injury occurs and a benefit has been paid | On the date of fraud or intentional misrepresentation of a material fact by you | On the date we elect to discontinue this plan or type of coverage or all coverage in your state | On the date an insured person is no longer a permanent resident of the United States | On the date you reach age 75 | Your dependent's coverage will terminate at the end of the month following the date such dependent ceases to be an eligible dependent.

Cancellation by Insured Person: You may cancel the Policy at any time by written notice delivered or mailed to us, effective upon receipt of such notice on or on such late date as may be specified in such notice. In the event of cancellation, we will promptly return the unearned portion of any premium paid. The earned premium shall be computed by the use of the prorata method. Cancellation shall be without prejudice to any claim origination prior to the effective date of cancellation.

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