

Critical Accident Direct

Cash benefits

paid to you, not
your provider



Critical Accident



Disability



Cancer



Critical Illness



Hospital

With advances in emergency medical treatment and trauma care, the likelihood of surviving a critical accident continues to increase. However, there may be an extended recovery period with an injury that is life altering.

Having health insurance is just one part of the protection you need to help you recover. A supplemental insurance plan will help with the out-of-pocket expenses not covered by your health insurance, as well as help with expenses for home modifications or other lifestyle changes required to adapt to a new way of living.

Our Critical Accident Direct supplemental insurance plan is simple and is intended to complement our

Supplemental insurance plans offered by SureBridge®

- Provide customizable protection for you and your family to fit any budget
- Complement your existing health insurance plan
- Pay the cash benefit directly to you—not your doctor or hospital

Want to learn more about insurance that pays you? Contact your local agent or visit SureBridgeinsurance.com to learn about how you can customize or combine multiple plans to fit your specific budget and needs.

Critical Illness Direct plan. It pays a **lump-sum cash benefit** directly to you for qualifying injuries caused by an accident. This money can be used for anything you choose, including expenses health insurance doesn't pay for, such as your health insurance plan deductibles and co-pays, offsetting a loss of income during your hospital stay, family travel expenses, or to help with everyday living expenses. It's your money; how you spend it is your decision.

Critical Accident Direct

Description

Pays a one-time lump-sum benefit 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.

Benefit Options

\$10,000, \$15,000, \$20,000, \$30,000, \$40,000, \$50,000 and \$60,000

Qualifying Injury

Quadriplegia - total paralysis of both upper and lower limbs
Paraplegia - total paralysis of lower limbs
Hemiplegia - total paralysis of upper and lower limbs on one side of the body
Third degree burn to 10% of the body
Second degree burn to 20% of the body
Coma
Loss of Sight in both Eyes
Loss of Hearing in both Ears

SureBridge® is a brand name used for supplemental insurance products underwritten, and administered, by The Chesapeake Life Insurance Company®. Administrative offices are located in North Richland Hills, TX. Insurance product availability may vary by state. For premium costs and further details of the coverage, including exclusions, any reductions or limitations and the terms under which the Policy may be continued in force, please contact your licensed insurance agent/producer. © 2012 The Chesapeake Life Insurance Company.

CH-26123-IP (04/11), or state variation.
SB/000018 Exp. 1/13

THE CHESAPEAKE LIFE INSURANCE COMPANY®

A Stock Company

(Hereinafter called: the Company, We, Our or Us)

Home Office: Oklahoma City, Oklahoma

Administrative Office: P.O. Box 982010

North Richland Hills, Texas 76182-8010

Customer Service: 1-800-815-8535

CRITICAL ACCIDENTAL INJURY POLICY OUTLINE OF COVERAGE FOR FORM CH-26123-IP (04/11) KY

THE POLICY PROVIDES LIMITED BENEFITS BENEFITS PROVIDED ARE SUPPLEMENTAL AND NOT INTENDED TO COVER ALL MEDICAL EXPENSES

- 1. READ YOUR POLICY CAREFULLY!** This Outline of Coverage provides a very brief description of some of the important features of Your Policy. 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 Insured Person and Us. Therefore, it is important that You **READ YOUR POLICY CAREFULLY.**
- 2. CRITICAL ACCIDENTAL INJURY POLICY –** Critical Accidental Injury coverage is designed to provide You and Your Covered Dependents coverage for Qualifying Injuries that occur as a direct result of an Accidental Injury within 60 days of such Accidental Injury, subject to any limitations contained in the Policy. **The Policy does NOT provide benefits for loss from Sickness, and coverage is not provided for basic hospital, basic medical-surgical, or major medical expenses.**
- 3. SCHEDULE OF BENEFITS –**

ONE TIME BENEFIT AMOUNT FOR A QUALIFYING INJURY:

Primary Insured:	<input type="checkbox"/> \$10,000 <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> \$30,000 <input type="checkbox"/> \$40,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> \$60,000
Dependent spouse:	<input type="checkbox"/> No Benefit <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> \$30,000 <input type="checkbox"/> \$40,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> \$60,000
Dependent child(ren):	<input type="checkbox"/> No Benefit <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> \$30,000 <input type="checkbox"/> \$40,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> \$60,000

QUALIFYING INJURY

Coma

Hemiplegia

Loss of Sight in Both Eyes

Paraplegia

Quadriplegia

Second-Degree Burn to at least 20% of Body

Third-Degree Burn to at least 10% of Body

Loss of Hearing in Both Ears

4. **BENEFITS** – Upon receipt of proof of the occurrence of a Qualifying Injury, We will pay the one time Benefit Amount shown in the POLICY SCHEDULE – SCHEDULE OF BENEFITS, provided the Qualifying Injury occurred within 60 days of an Accidental Injury. The Accidental Injury must occur after the Insured Person's coverage has become effective and while the coverage is in force under the Policy.

In no event will We pay more than one Benefit Amount for each Insured Person during that Insured Person's lifetime.

5. **EXCLUSIONS & LIMITATIONS:** The Benefit Amount shown in the POLICY SCHEDULE – SCHEDULE OF BENEFITS is not payable more than once per Insured Person during an Insured Person's lifetime for any or all Qualifying Injuries, as defined in the Policy during an Insured Person's lifetime.

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

1. A Sickness;
2. Any care or benefits which are not specifically provided for in the Policy;
3. Any act of war, declared or undeclared;
4. Active military duty in the service of any country;
5. Participation in a riot, civil commotion or insurrection;
6. Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane;
7. 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;
8. Experimental or investigational medicine;
9. Intentionally medically induced Qualifying Injury;
10. Cosmetic surgery;
11. Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly, unless taken as prescribed by a Legally Qualified Physician;
12. 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 Legally Qualified Physician;
13. Directly or indirectly engaging in an illegal occupation or illegal activity or Your being incarcerated;
14. Committing or trying to commit a felony; or
15. Sunburn.

Benefits will not be payable for:

1. A Qualifying Injury that occurred prior to an Insured Person's Effective Date of Coverage;
2. Any condition that is not a Qualifying Injury, as defined in the Policy;
3. 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; or
4. Any amounts in excess of the Benefit Amount.

6. **RENEWABILITY** – The Policy is conditionally renewable to age 75, subject to the Company's right to discontinue or terminate the coverage as provided in the TERMINATION OF COVERAGE section of the Policy. The Company reserves the right to change the applicable table of premium rates on a Class Basis.

7. **BEGINNING OF COVERAGE** - Once We have approved Your application based upon the information You provided therein, the Effective Date of Coverage for You and those Eligible Dependents listed in the application and accepted by Us will be the Policy Date shown in the POLICY SCHEDULE.

8. **TERMINATION OF COVERAGE** -

You

Your coverage will terminate and no benefits will be payable under the Policy:

1. At the end of the month for which premium has been paid;
2. On the date the Qualifying Injury occurs and a benefit has been paid;
3. At the end of the month following the date of Our receipt of Your request of termination;
4. On the date of fraud or intentional misrepresentation of material fact under the terms of the Policy by You;
5. On the date We elect to discontinue this plan or type of coverage;
6. On the date We elect to discontinue all coverage in Your state;

- 7. On the date an Insured Person is no longer a permanent resident of the United States; or
- 8. On the date You reach age 75.

Premium will be refunded for any unearned premium paid beyond the termination date.

Covered Dependents

Your Covered Dependent's coverage will terminate under the Policy on:

- 1. The date Your coverage terminates;
- 2. At the end of the month following the date such dependent ceases to be an Eligible Dependent;
- 3. At the end of the month following the date of Our receipt of Your request of termination;
- 4. On the date the Qualifying Injury occurs and a benefit has been paid , with respect to an Insured Person; or
- 5. On the date the Covered Dependent:
 - a. performs an act or practice that constitutes fraud; or
 - b. has made an intentional misrepresentation of material fact, relating in any way to the coverage provided under the Policy, including claims for benefits under the Policy.

Premium will be refunded for any unearned premium paid beyond the termination date.

The attainment of the Limiting Age for an Eligible Dependent will not cause coverage to terminate while that person is and continues to be both:

- 1. Incapable of self-sustaining employment by reason of mental or physical handicap; and
- 2. Chiefly Dependent on You for support and maintenance. For the purpose of this provision "Chiefly Dependent" means the Eligible Dependent receives the majority of his or her financial support from You.

We will require that You provide written proof that the dependent is in fact a disabled and dependent person within 31 days after his or her attainment of the Limiting Age. Thereafter, We may require such written proof not more frequently than annually after the two-year period following the child's attainment of the Limiting Age. In the absence of such proof We may terminate the coverage of such person after the attainment of the Limiting Age.

- 9. PREMIUMS** – We reserve the right to change the table of premiums, on a Class Basis, however, the premium table will not be increased within 12 months from date of issue or date of renewal. The premium for the Policy may also change in amount by reason of an increase in the Attained Age of the Insured Person, the Insured Person's change in geographic location or an increase in the Policy benefit level. If We change the premiums, We will give the Insured Person a written notice of at least 31 days prior to the effective date of the new rates.

Premium Due (at time of application) \$ _____