Accident Disability Direct

Cash benefits paid directly to you during times of accident-related disability

DID YOU KNOW?

95%
of disabling injuries occur off the job which means Worker's Compensation does not cover them.[1]

Accidents happen and the **Accident Disability Direct** plan can help you financially when they do. It pays **monthly cash benefits** directly to you during times when an accidental injury results in total disability leaving you unable to work. The money can be used to **pay unexpected medical costs or everyday living expenses**.

Applying is simple and can be completed in minutes.

Cash benefits can be used for:

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

Accident Disability Direct At A Glance

- Pays up to a **$2,500 monthly cash benefit** for a physician-verified period of total disability caused by an injury
- Waiver of Premium benefit included
- 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 $5**[16] **per month**[2]

Cash benefits paid directly to you. Apply today!

[1] Council for Disability Awareness, Long-Term Disability Claims Review, 2012 | [2] White collar female at $1,000 monthly benefit level with a benefit period of 12 months and an elimination period of 30 days.

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surebridge®
Covering Life's Twists and Turns

Underwritten by *The Chesapeake Life Insurance Company®*

Accident Disability Direct

DESCRIPTION

Pays a monthly cash benefit for a physician-verified period of total disability due to an injury.
Available benefit options: $500[1], $1,000, $1,500, $2,000 and $2,500. Benefit cannot exceed 60% of gross monthly earnings.

Medical advice, consultation or treatment must commence within 30 days of the injury which caused your total disability.

Waiver of Premium Benefit: After a period of 90 consecutive days of total disability, this additional benefit waives the monthly premium, up to the maximum period payable, with no interruption in coverage. Premium payments must resume within 31 days of the expiration of the waiver of premium benefit to continue coverage.

Maximum Period Payable Options: 12 or 24 months

Elimination Period Options: 14, 30, 60 or 90 days

Consumer Preferred

MONTHLY PREMIUMS	$500[1]		$1,000		$1,500		$2,000		$2,500	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
30 Year Old (white collar)	$3.56	$3.05	$6.02	$5.16	$9.18	$7.87	$12.50	$10.72	$15.83	$13.57
30 Year Old (blue collar)	$8.90	$7.63	$15.04	$12.89	$22.95	$19.67	$31.26	$26.80	$39.57	$33.92

The chart above is only an illustration of benefit and premium options per individual for plans with a 30 day elimination period and 12 month benefit period. As defined by the American Academy of Actuaries, "blue collar" refers to union and hourly workers. All other workers are classified as "white collar." | [1] This benefit level is guaranteed acceptance regardless of health or medical history; subject to eligibility requirements.

Consumer Preferred Status: Based on 33% of applicants selecting the $2,500 benefit level (4/2013).

Make sure you are protected with other popular SureBridge products:

Critical Illness Direct

Dental

Vision

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

This brochure provides only summary information and the benefits and rates may vary by state. 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 Accident Only Disability Income Insurance Policy. Form CH-26114-IP (01/10), or its state variation.

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ACCIDENT DISABILITY DIRECT: OTHER IMPORTANT INFORMATION

Definitions (See Policy for Other Important Definitions):

- **Actively at Work** means working on a permanent basis at least 25 hours per week for wage or salary; and performing the material and substantial duties of a regular job or any other job for which the insured is qualified by reason of education, training or experience.[1]
- **Elimination Period** means the consecutive period of time beginning from the date in which you are considered totally disabled before the monthly indemnity benefit is payable. The elimination period is shown in the Policy schedule of benefits.
- **Injury** means bodily harm caused by an accident resulting in unforeseen trauma requiring immediate medical attention and is not contributed to, directly or indirectly, by a sickness. The injury must first occur after your coverage has become effective and while the coverage is in force.[2]
- **Total Disability or Totally Disabled** means that, due to an injury, you are: 1) under a legally qualified physician's care; and 2) not in fact actively at work, as certified by a legally qualified physician upon our request.[3]

[1]TN: changes 'job' to 'gainful occupation' | [2]MD: adds 'If an injury occurs before the effective date, it will be covered if loss is incurred or disability begins after one year from the effective date of the Policy' | [3]MD: revises to 'means that due to injury, you are: 1) under a legally qualified physician's care (such care will not be required if it is determined that such regular care would be of no benefit to you); and 2) during the first 12 months for which benefits are payable and you are unable to perform each and every duty pertaining to your occupation. After the first 12 months, it means you are unable to perform each and every duty of any business or occupation for which the insured person is reasonably fitted by education, training and experience, as certified by a legally qualified physician upon our request.'

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.

ACCIDENT DISABILITY DIRECT: OTHER IMPORTANT INFORMATION

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[1] | Injuries that do not first occur while the Policy is in force for the insured person[2] | Any act of war, declared or undeclared | Active military duty in the service of any country | Participation in a riot, civil commotion or insurrection[3] | Suicide, attempted suicide, or any intentionally self-inflicted injury while sane or insane[4] | Mental or nervous disorders | Having cosmetic surgery[5] | Operating any motorized passenger vehicle for wage, compensation or profit[6] | Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly[7] | An overdose of drugs, being intoxicated or under the influence of intoxicants, hallucinogens, narcotics or other drugs directly or indirectly[8] | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated[9] | Committing or trying to commit a felony[10] | 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, parasailing, experimental aviation, ultra-light flying, base jumping, bungee jumping, heli-skiing or heli-snowboarding[11] | 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.

Right of Inspection: We may required information regarding pre-tax personal income, allowable business expenses, and other plans, including income tax returns, for periods before and after the start of a period of total disability. Failure to provide such information may result in disqualification for benefit payment under the Policy. Benefits are subject to coordination with other compensation.

[1]TN: adds 'except for complications of pregnancy' | [2]MD: removes entirely | [3]MD: removes entirely | [4]CO, MO: removes 'or insane' MN: deleted entirely | [5]DC: adds at the end 'except as mandated by D.C.' MD: revises to 'any cosmetic surgery or surgical procedure except for disabilities arising from unplanned and unanticipated adverse consequences of such surgery' | [6]IL: deleted entirely | [7]AL: adds at the end, unless taken as prescribed by a legally qualified physician' DC, MD, MI: deleted entirely IL: removes 'directly or indirectly' and adds at the end 'unless taken by a legally qualified physician' LA: revised to read 'addiction of alcohol, narcotics, or hallucinogens, directly or indirectly' MN: removes 'including alcoholism' and adds at the end 'unless administered on the advice of a physician' | [8]AL: adds at the end 'unless taken as prescribed by a legally qualified physician' and removes 'or under the influence of intoxicants' DC: revised to read 'the voluntary use of illegal drugs; the intentional taking of over the counter medication not in accordance with recommended dosage and warning instructions; and the intentional misuse of prescription drugs, except as mandated by D.C.' IL: revised to read 'being intoxicated or under the influence of intoxicants that which is defined and determined by the laws of the state where the loss or cause of the loss was incurred, hallucinogens, narcotics or other drugs, unless taken as prescribed by a legally qualified physician' IN, MD, MI: deleted entirely LA: revised to read 'being intoxicated or under the influence of intoxicants, hallucinogens or narcotics, directly or indirectly' MN: revised to read 'an overdose of drugs, being intoxicated (limited to an insured person driving or operating a motor vehicle and who has been determined to have a blood alcohol level exceeding the legal limit as defined by state law) or under the influence of hallucinogens, narcotics or other drugs, directly or indirectly, unless administered on the advice of a physician' TN: adds 'for alcohol intoxication this means over the legal limit of .08' after 'intoxicated' UT: removes 'being intoxicated or under the influence of intoxicants' and adds the new exclusion 'the use of alcohol that substantially contributes to, causes the loss, or is over the legal limit' | [9]IL: removes 'or indirectly' and 'illegal activity or' IA, MO: removes 'or your being incarcerated' MD: removes entirely NE: revised to read 'engaging in an illegal occupation' UT: adds 'as a voluntary participant' after 'activity' | [10]MD: removes entirely UT: adds at the end 'as a voluntary participant' | [11]IL, IA: deleted entirely.

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.

ACCIDENT DISABILITY DIRECT: 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 guaranteed 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.[1]
- **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.[2]
- **TERMINATION OF COVERAGE:** Your coverage will terminate and no benefits will be payable under the Policy:[4] At the end of the month for which premium has been paid, except as provided in the waiver of premium provision[3] | At the end of the month following the date of our receipt of your request of termination[5] | On the date of fraud or material misrepresentation by you[6] | On the date we elect to discontinue this plan or type of coverage or all coverage in your state[7] | On the date an insured person is no longer a permanent resident of the United States | On the date you reach age 65 | Premium will only be refunded for any full months paid beyond the termination date.[8]

[1]IA: changes 'guaranteed renewable to age 65' to 'conditionally renewable to age 65, or Medicare eligiblity, whichever occurs first' KS, MN, TN: changes 'guaranteed' to 'conditionally' MD: adds '(or 66 if coverage is issued at the age of 64)' after '65' | [2]LA: changes '31 days' to '45 days' and adds 'such rates will not increase more than once each six-month period following the initial twelve-month period' MD: revises '31 days' to '40 days' MS, NM, WI: changes '31 days' to '60 days' AK, UT: changes '31 days' to '45 days' | [3]MD: adds '(subject to the Grace Period provision)' NE: adds at the end '(subject to the grace period)' | [4]MD: adds '(subject to the Extension of Benefits provision)' | [5]KS: deleted entirely | [6]AK: adds "we will give you at least 45 days notice before the date coverage will be discontinued' AL, MD: adds at the end 'subject to the Time Limit on Certain Defenses provision in the General Provisions section' | [7]AK: adds 'we will give you at least 45 days notice before the date coverage will be discontinued' MN: adds 'laterally' after 'discontinue' ND, RI: deleted entirely. | [8]KS: deleted entirely.
For use in AK, AL, AR, AZ, CO, DC, DE, IA, IL, IN, KS, LA, MD, MI, MN, MO, MS, ND, NE, NM, OH, RI, TN, UT, WI

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. This is an Accident-Only Disability Income Insurance Policy. Form CH-26114-IP (01/10), or its state variation.

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