



Accident Companion

Help with the out-of-pocket costs of accidental injuries

DID YOU KNOW?

1 in 8

persons seek medical attention from an injury each year.¹

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

Cash benefits can be used for:

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

- Pays up to a:
 - **\$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 \$7⁵⁰ per month²**

Cash benefits paid directly to you. Apply today!

¹ National Safety Council, Injury Facts, 2012 | ² For coverage Option 1. See chart on next page for full list of coverage option levels.

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Accident Companion



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Dental



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BENEFITS (per person, per accidental injury)	Option 1	Option 2	Option 3	Option 4
Hospital Confinement ¹ (one per Policy year)	\$2,500	\$5,000	\$7,500	\$10,000
Emergency Treatment ² (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 Treatment ³ (up to five visits per Policy year) OR	\$50 per visit	\$100 per visit	\$100 per visit	\$100 per visit
Follow-up Physical Therapy ³ (up to five visits per Policy year)	\$50 per visit	\$100 per visit	\$100 per visit	\$100 per visit
MONTHLY PREMIUMS	\$7.50	\$15.00	\$21.50	\$28.00

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 Center | 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 41% of applicants selecting the "Option 4" \$10,000 benefit level (4/2013).

Apply today for Accident Companion to help cover costs related to accidental injuries

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, 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) VA.

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ACCIDENT COMPANION: OTHER IMPORTANT INFORMATION

Definitions (See Policy for Other Important Definitions):

- **Accidental Injury** means accidental bodily injury sustained by the insured person which are the direct result of an accident, independent of disease or bodily infirmity or any other cause, and which occur while the insurance is in force.
- **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 or facilities available to the hospital on a prearranged basis, 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, or unless otherwise stated in the Policy | Any act of war, declared or undeclared ("war" does not include terrorism) | Participation in a riot or insurrection | Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane | Mental or emotional disorders | Having cosmetic surgery or other elective procedures that are not medically necessary | Alcoholism and drug addiction | Directly or indirectly engaging in an illegal occupation | Committing or trying to commit a felony | Aviation, 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.

Coverage Information:

- **COVERAGE BEGINS:** In consideration of your premiums paid as shown in the Policy schedule, and 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 31 days prior to the effective date of the new rates. Such change will be on a class basis. The premium for the Policy is based on the issue age of the insured person at the time in which the Policy becomes effective.
- **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 not been paid (subject to the grace period) | Effective upon our receipt of your request of termination or on such later date as may be specified in the notice | On the date of fraudulent misstatements in the application 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 65 | Your dependent's coverage will terminate at the end of the month following the date such dependent ceases to be an eligible dependent. The unearned portion of any premium paid will be refunded promptly. The earned premium shall be computed pro rata.

Navigate life's twists and turns with the SureBridge portfolio of supplemental and life insurance products



Dental



Vision



Accident Direct



Income Protection Direct



Accident Disability Direct



CancerWise®



Critical Illness Direct



Hospital Confinement Direct



Critical Accident Direct



ProtectFit Plus



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Simplified Issue Term Life



Fixed Indemnity Direct



SureBridgeInsurance.com

800-815-8535

Weekdays, 8am to 5pm in all time zones

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