## **Accident Insurance**

# Add Accident Insurance Coverage to Your Health Insurance Plan

CHUBB®



## Cash Benefits Paid in Addition to Any Other Coverage You Have

You do everything you can to stay active and healthy, but accidents happen every day, including sports-related accidents. An injury that hurts an arm or a leg can hurt your finances too. That's where Chubb Accident can help.

Chubb Accident pays cash benefits directly to you regardless of any other coverage you have. Benefits are designed to cover health plan gaps for out-of-pocket expenses like deductibles, copays, and coinsurance. Let Chubb Accident help take care of your bills so you can take care of yourself and your family.

\$7,500

Average cost for a broken leg<sup>1</sup>

60%

of Americans can't cover an unexpected \$1,000 expense.<sup>2</sup> 42 million

ER visits each year are due to injuries.<sup>3</sup>

For eligible employees of

**Catholic Diocese of Columbus** 



Good things in life happen every day, and unfortunately, accidents happen too. When they do, we can help protect you.

<b>Monthly Premium</b>	Plan 1
Employee	\$10.40
Employee + Spouse	\$19.24
Employee + Child(ren)	\$21.84
Family	\$30.68
	Plan 2
Employee	Plan 2 \$5.20
Employee Employee + Spouse	
1 7	\$5.20

#### When You Need It Most

Chubb Accident provides coverage if you are accidentally injured and need treatment, whether you go to a physician's office, urgent care center, emergency room or use telemedicine services. There are no restrictions on how your money can be used.

#### **Accident Insurance Benefits Include**

#### **First Accident**

Pays you \$100 soon after you report your first claim for covered benefits. If you get injured, we can begin processing your claim as soon as you submit it, so you can get cash benefits fast.

#### **Sports Package**

Playing sports can lead to injuries and unwelcome expenses. We'll increase your benefit 25%, up to \$1,000 per person per year, for injuries resulting from participating in organized sports.

#### **Telemedicine Services Benefit**

With this benefit, you will no longer need to leave your home for a doctor's visit. We'll pay you a \$75 benefit if you receive consultation with a physician for a covered accident via audio or video communication.

#### **Rehabilitation Package**

We pay cash benefits for admission, daily confinement and recovery. Whether you're released to a Rehabilitation Center following a hospital stay or you recover at home, we pay a daily recovery benefit to help with your transition. We'll even pay cash benefits for a residence/vehicle modification and therapy, including physical, occupational and speech.

#### **How Chubb Accident Works-And Pays**

Chubb Accident helps pay for unexpected costs of accidental injury. If your child breaks a leg at soccer practice here's how benefits may stack up:

The Sports Package increases the total benefit payment by \$652.

First Accident	\$	100
Ambulance	\$	300
ER Visit	\$	200
X-Ray	\$	40
Fracture	\$	1,000
Medicine	\$	20
Medical Supplies	\$	20
Crutches	\$	200
Physical Therapy	\$	500
Follow-up Visits	\$	225
Subtotal	\$	2,605
PLUS Sports Package	\$	652
Tatal Danier	ф	0.055

Total Payment \$ 3,25°

This example is for illustrative purposes only and should not be compared to an actual claim. Whether an injury is covered depends on the circumstances of the loss. Refer to the certificate of insurance for terms and conditions.

# ${\bf Schedule\ of\ Benefits-24}\hbox{-} Hour\ Coverage$

Initial Care Plan 1	Plan 2
Ambulance	
Ground\$300	\$120
Air. \$2,000	\$1,000
Emergency Room \$200	\$75
Initial Doctor's Office Visit \$75	\$25
Telemedicine Services Benefit \$75	\$25
Urgent Care \$150	\$50
Emergency Dental	ΨΟΟ
Crown \$400	\$200
· ·	\$200 \$50
Extraction \$100	
Dentures         \$400           Implants         \$400	\$200 \$200
Hospital and Rehabilitation Plan 1	Plan 2
Hamital Admission #1 250	¢500
Hospital Admission \$1,250	\$500
ICU Admission \$2,500	\$1,000
Rehabilitation Admission \$1,250	\$500
Hospital Confinement\$300	\$100
Per day, up to 365 days	
ICU Confinement	\$200
Per day, up to 30 days	
Rehabilitation Confinement \$180 Per day, up to 30 days	\$100
Recovery \$75 Per day, up to 7 days	\$25
Follow-up Care & Treatment Plan 1	Plan 2
Appliances \$200	\$75
Blood, Plasma, Platelets \$300	\$200
Chiropractic Care\$50	\$0
Per visit, up to 3 visits per accident; 6 visits per year	ΨΟ
Follow-up Treatment \$75	\$25
*	φ23
Per visit, up to 3 visits	#400
Herniated Disc Surgery	\$400
Knee Cartilage (Torn) Surgery	\$400
Knee Cartilage Torn - Exploratory	
Surgery Benefit	\$150
Lodging	\$100
For treatment 100 miles or more away;	
per night, up to 30 nights	
Major Diagnostic Exam (CT, MRI, etc.) \$250	\$100
Medical Supplies \$20	\$10
Medicine \$20	\$10
Organ Loss \$1,500	\$500
Outpatient Surgery Facility \$25	\$0
Physical, Occupational, or Speech	ΨΟ
Therapy	\$25
Per visit, up to 10 visits	<b>\$23</b>
Post Traumatic Stress Disorder	\$25
•	\$23
Per visit, up to 6 visits	
Prosthetics	<b>6500</b>
One prosthetic device or artificial limb \$1,500	\$500
More than one device or artificial limb\$3,000	\$1,000
Surgery Abdominal, Cranial & Thoracic \$1,500	\$750
Hernia \$200	\$100
Tendon, Ligament or Rotator Cuff Repair	,
One	\$400
	:
Two or more \$1,250	\$600
Exploratory Arthroscopic Surgery	A-=-
without Repair \$200	\$150
Transportation\$600	\$300
For treatment and Confinement in a	
Hospital 100 miles or more away;	
per trip, up to 3 trips	
X-ray\$40	\$20

Injuries Plan 1	Plan 2
Burns	
2nd/3rd Degree, up to	\$7,500
Skin Graft (% of burn benefit)	25%
Coma	\$7,500
Dislocations, up to\$4,800	\$3,600
Ear Injury	\$200
Eye Injury	\$200
Fractures, <i>up to</i>	\$5,000
Lacerations	\$20-\$300
Loss of Hands, Feet or Sight, <i>up to</i> \$20,000	\$10,000
Loss of Fingers or Toes, <i>up to</i> \$2,000 Paralysis	\$1,200
Two limbs	\$5,000
Four limbs	\$7,500
Puncture Wound	\$20
Traumatic Brain Injury\$300	\$100
Additional Benefits Plan 1	Plan 2
Additional Benefits     Plan 1       First Accident (Once per policy)     \$100	Plan 2 \$100
First Accident (Once per policy)	\$100
First Accident (Once per policy) \$100 Family Care \$30	\$100
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center:	\$100
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center: Per day, up to 30 days	\$100
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center: Per day, up to 30 days Joint Replacement	\$100 \$0
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center: Per day, up to 30 days Joint Replacement Elbow \$750	\$100 \$0
First Accident (Once per policy)       \$100         Family Care       \$30         For each child in a child care center:       Per day, up to 30 days         Joint Replacement       \$750         Hip       \$1,500	\$100 \$0 \$0
First Accident (Once per policy)       \$100         Family Care       \$30         For each child in a child care center:       Per day, up to 30 days         Joint Replacement       \$750         Hip       \$1,500         Knee       \$1,000	\$100 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center: Per day, up to 30 days Joint Replacement Elbow \$750 Hip \$1,500 Knee \$1,000 Shoulder \$900	\$100 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy) \$100 Family Care \$30 For each child in a child care center: Per day, up to 30 days  Joint Replacement  Elbow \$750 Hip \$1,500 Knee \$1,000 Shoulder \$900  Outpatient Physician's Treatment for Accident and	\$100 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy)         \$100           Family Care         \$30           For each child in a child care center:         Per day, up to 30 days           Joint Replacement         \$750           Elbow         \$750           Hip         \$1,500           Knee         \$1,000           Shoulder         \$900           Outpatient Physician's Treatment for Accident and Preventative Care         \$50	\$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy)         \$100           Family Care         \$30           For each child in a child care center:         Per day, up to 30 days           Joint Replacement         \$750           Elbow         \$750           Hip         \$1,500           Knee         \$1,000           Shoulder         \$900           Outpatient Physician's Treatment for Accident and Preventative Care         \$50           Residence/Vehicle Modification         \$1,000	\$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy)         \$100           Family Care         \$30           For each child in a child care center:         Per day, up to 30 days           Joint Replacement         \$750           Elbow         \$750           Hip         \$1,500           Knee         \$1,000           Shoulder         \$900           Outpatient Physician's Treatment for Accident and Preventative Care         \$50           Residence/Vehicle Modification         \$1,000           Sports Package Benefit	\$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0
First Accident (Once per policy)         \$100           Family Care         \$30           For each child in a child care center:         Per day, up to 30 days           Joint Replacement         \$750           Elbow         \$750           Hip         \$1,500           Knee         \$1,000           Shoulder         \$900           Outpatient Physician's Treatment for Accident and Preventative Care         \$50           Residence/Vehicle Modification         \$1,000           Sports Package Benefit Increases total benefit by 25% when	\$100 \$0 \$0 \$0 \$0 \$0 \$0 \$0



You do everything you can to keep your family safe, but accidents happen, and when they do, it's good to know Chubb has you covered.

#### **Features**

#### **Guaranteed Issue**

No medical history is required for coverage to be issued.

### **Conditionally Renewable**

Coverage is automatically renewed as long as the insured is an eligible employee, premiums are paid as due, and the Policy is in force.

#### **Portable**

You can keep your coverage if you change jobs or retire while the Policy is in force. Once ported, coverage cannot be cancelled as long as the Policy remains in force and premiums are paid as due. You may not port coverage while you are actively employed by Catholic Diocese of Columbus.

#### Family Coverage

You can insure yourself, your spouse, and your kids. Your children and dependent grandchildren through age 26 can be included.

#### **HSA Compatible**

You can have this coverage even if you have a Health Savings Account.

#### **Initial Eligibility**

#### **Employee**

- Actively employed working at least 30 hours per week
- · Ages 18 and older

#### **Spouse**

- · Ages 18 and older
- Includes domestic or civil union partner

#### Dependent children/grandchildren

- · Ages 0 through 26
- · No student status required

#### **Exclusions & Limitations**

This is Accident-only insurance. No benefits will be paid for services rendered by a member of the Immediate family of a Covered Person. No benefits will be paid for an Injury that is caused by, or occurs as a result of a Covered Person's:

- Being intoxicated, or under the influence of alcohol or any narcotic or other prescription drug unless administered on the advice of a Physician and taken according to the Physician's instructions (the term "intoxicated" means the minimum blood alcohol level required to be considered operating an automobile under the influence of the alcohol in the jurisdiction where the accident occurred);
- Participating in an illegal occupation or attempting to commit or actually committing a felony ("felony" is as defined by the law of the jurisdiction in which the activity takes place);
- Committing or attempting to commit suicide or intentionally injuring himself or herself;
- Having dental treatment, except for such care or treatment due to Injury to sound natural teeth within twelve (12) months of the Covered Accident;
- Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary thereto;
- Participation in any contest using any type of motorized vehicle.

No benefits will be payable for sickness or infection including physical or mental condition that is not caused solely by or as a direct result of a Covered Accident.

- 1. www.healthcare.gov; accessed Sept. 2019
- 2. www.bankrate.com; accessed Sept. 2019
- 3. www.cdc.gov/nchs; accessed Sept. 2019

# Chubb. Insured.

This is a supplement to health insurance and is not a substitute for Major Medical or other minimal essential coverage. This document is a brief description of Form No. C70701 (or applicable state version). Refer to your certificate of insurance for specific details about benefits, exclusions and limitations.

Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. This insurance product is underwritten by ACE Property & Casualty Insurance Company, Philadelphia, PA.