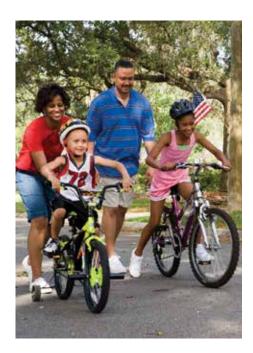
# **Accident Insurance**

## Benefits that help you and your family

No one plans on getting injured, but just in case, we've got you covered.

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 Accident Insurance can help.

Accident Insurance pays cash benefits directly to you, regardless of other coverage you have.



### **Coverage Features**

- Guaranteed Issue with no health questions
- Guaranteed renewable for life
- No exclusions or pre-existing conditions
- Employee, spouse and child coverage available
- Portability allows you to keep this coverage if you change employers or if Questco benefits are no longer available to you.

## **Sports Package**

Your benefits increase 25%, up to \$1,000 per person, for injuries resulting from participating in organized sports! Playing sports can lead to injuries and unwelcome expenses. We'll increase your benefits to help pay for those expenses.

#### **Wellness Benefit**

To promote good health, this pays a \$50 benefit for each covered person once per year when they have a defined annual health screening or test.

## **Rehabilitation Package**

We pay cash benefits for admission, daily confinement and recovery. Whether you are 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.

## **Eligibility**

- Active employees working at least 30 hours per week, ages 18+
- Spouses ages 18+. Includes legally married spouse, domestic partner and civil union partner
- Children ages 0-26, no student status required

This is a brief description of Certificate Form No. C70701-TX. Refer to your certificate of insurance for specific details about benefits, exclusions and limitations. Underwritten by Combined Insurance Company of America, a Chubb company.

This product is a supplement to health insurance and is not substitute for major medical or other minimum essential coverage.



#### **Here's How Accident Insurance Works**

Accident Insurance helps pay for the unexpected costs of an accidental injury by providing benefits for initial care, injuries, treatment, facility care and follow-up.

For example, if your child gets injured at soccer practice and breaks her leg, here's how benefits may stack up:

Benefits	
Ambulance	\$400
ER Visit	\$200
X-Ray	\$250
Fracture	\$1,800
Crutches	\$1,000
Physical Therapy	\$500 (\$50 x 10 visits)
Follow-up Visits	\$200 (\$100 x 2 visits)
Subtotal	\$4,350
PLUS Sports Package Increases the total benefit payment by 25%	\$1,000
Total Payment	\$5,350

This claim scenario is hypothetical and is offered solely to illustrate the types of situation that may result in a claim. This scenario is not based on an actual claim and should not be compared to an actual claim. Whether or to what extent a particular loss is covered depends on the facts and circumstances of the loss, the terms and conditions of the policy as issued and applicable law. Refer to the certificate of insurance for details.

### **Accident Rates - 24 Hour Coverage**

Your monthly rates (12 pay cycles) will vary depending on the Plan and coverage level you choose.

Monthly Rates	Diamond
Employee	\$ 9.36
Employee + Spouse	\$ 18.20
Employee + Child(ren)	\$ 21.84
Family	\$ 26.00

#### **Accident Definition, Exclusions and Limitations**

A covered accident means an unintended and unforeseen injurious occurrence causing injury that occurs after the Certificate Effective Date while the coverage is in force.

This is accident-only insurance. No benefits will be paid for an injury that is caused by, contributed to, 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 alcohol in the jurisdiction in which the accident occurred);
- Participating in an illegal activity 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; or
- 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.

A Physician cannot be you or a member of your Immediate Family, your business or professional partner, or any person who has a financial affliliation or business interest with you.

## **Accident Insurance Schedule of Benefits**

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Ambulance (Ground/Air)         \$400/\$2,000           Emergency Room         \$200           Urigent Care         \$200           Emergency Dental (Crown/Extraction/Dentures/Implants)         \$400/\$150/\$400/\$400           Emergency Dental (Crown/Extraction/Dentures/Implants)         \$400/\$150/\$400/\$400           Telemedicine Services         \$100           Hospital And Rehabilitation         ****           ICU Admission         \$1,500           Rehab Facility Admission         \$1,250           Hospital Confinement (Per day, up to 365 days)         \$300           Rehab Facility Confinement (Per day, up to 30 days)         \$600           Rehab Facility Confinement (Per day, up to 30 days)         \$200           Follow-up Care & Treatment           Surger, (Abdominal, cranial or Thoracic/Hernia)         \$2,000/\$200           Appliances           Surger, (Abdominal, cranial or Thoracic/Hernia)         \$0.00           Chiopartic Care (3 visits per accident, 6 visits per accident
Urgent Care         \$200           Initial Dr. Visit         \$200           Emergency Dental (Crown/Extraction/Dentures/Implants)         \$400/\$150/\$400/\$400           Telemedicine Services         \$1,500           Hospital and Rehabilitation         \$1,500           ICU Admission         \$1,250           Rehab Facility Admission         \$1,250           Hospital Confinement (Per day, up to 365 days)         \$300           ICU Confinement (Per day, up to 30 days)         \$600           Rehab Facility Confinement (Per day, up to 30 days)         \$200           Follow-up Care & Teatment         \$200           Every (Abdominal, cranial or Thoracic/Hernia)         \$2,000/\$200           Appliances         \$1,000           Blood, Plasma, Platelets         \$000           Chiropratic Care (3 visits per accident, 6 visits per calendar year)         \$50           Collow-up Teatment (Per visit, up to 2 visits)         \$100 for 2 visits           Colloging (per night, up to 30 nights; 100+ miles away)         \$200           Major Diagnostic Exam         \$200           Organ Loss         \$2,500           Outpatient Surgery Facility         \$600           Presapt- Physical, Occupational, or Speech (per visit, up to 10 visits)         \$60           Finerapy- Physical, Occupational,
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Emergency Dental (Crown/Extraction/Dentures/Implants)         \$400/\$150/\$400/\$400           Telemedicine Services         \$100           Hospital and Rehabilitation           HOspital Admission         \$1,500           ICU Admission         \$3,000           Rehab Facility Admission         \$1,250           Hospital Confinement (Per day, up to 365 days)         \$300           ICU Confinement (Per day, up to 30 days)         \$600           Rehab Facility Confinement (Per day, up to 30 days)         \$200           Follow-up Care & Treatment           Surgery (Abdominal, cranial or Thoracic/Hernia)         \$2,000/\$200           Appliances         \$1,000           Blood, Plasma, Platelets         \$600           Chiropratic Care (3 visits per accident, 6 visits per calendar year)         \$50           Follow-up Treatment (Per visit, up to 2 visits)         \$100 for 2 visits           Lodging (per night, up to 30 nights; 100+ miles away)         \$200           Major Diagnostic Exam         \$2,500           Organ Los         \$2,500           Outpatient Surgery Facility         \$600           Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits)         \$50           Prosthetics         \$1,500           Tendon, Ligament, Rotator Cuff Surgery
Telemedicine Services
Hospital Admission \$1,500  CU Admission \$3,000  Rehab Facility Admission \$1,250  Hospital Confinement (Per day, up to 365 days) \$300  CU Confinement (Per day, up to 30 days) \$600  Rehab Facility Confinement (Per day, up to 30 days) \$200  Follow-up Care & Treatment  Surgery (Abdominal, cranial or Thoracic/Hernia) \$2,000/\$200  Appliances \$1,000  Blood, Plasma, Platelets \$600  Chiropratic Care (3 visits per accident, 6 visits per calendar year) \$50  Follow-up Treatment (Per visit, up to 2 visits) \$100 for 2 visits  Lodging (per night, up to 30 nights; 100+ miles away) \$200  Organ Loss \$2,500  Outpatient Surgery Facility \$600  Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits) \$50  Frosthetics \$1,500  Tendon, Ligament, Rotator Cuff Surgery \$1,000  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Transportation (per trip, up to 3 trips, 100+ miles away) \$600
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Rehab Facility Admission \$1,250 Hospital Confinement (Per day, up to 365 days) \$300 ICU Confinement (Per day, up to 30 days) \$600 Rehab Facility Confinement (Per day, up to 30 days) \$200  Follow-up Care & Treatment  Surgery (Abdominal, cranial or Thoracic/Hernia) \$2,000/\$200 Appliances \$1,000 Blood, Plasma, Platelets \$600 Chiropratic Care (3 visits per accident, 6 visits per calendar year) \$50 Follow-up Treatment (Per visit, up to 2 visits) \$100 for 2 visits Lodging (per night, up to 30 nights; 100+ miles away) \$200 Major Diagnostic Exam \$200 Organ Loss \$2,500 Outpatient Surgery Facility \$600 Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits) \$50 Frosthetics \$1,500 Tendon, Ligament, Rotator Cuff Surgery \$1,000 Trausmatic Brain Injury \$600 X-ray \$250 Injuries Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
Hospital Confinement (Per day, up to 365 days)  \$300  ICU Confinement (Per day, up to 30 days)  Rehab Facility Confinement (Per day, up to 30 days)  Follow-up Care & Treatment  Surgery (Abdominal, cranial or Thoracic/Hernia)  Appliances  \$1,000  Blood, Plasma, Platelets  Chiropratic Care (3 visits per accident, 6 visits per calendar year)  \$50  Follow-up Treatment (Per visit, up to 2 visits)  Lodging (per night, up to 30 nights; 100+ miles away)  Agior Diagnostic Exam  \$200  Organ Loss  Organ Loss  Therapy- Physical, Occupational, or Speech (per visit, up to 10 visits)  Forosthetics  \$1,500  Tendon, Ligament, Rotator Cuff Surgery  Transportation (per trip, up to 3 trips, 100+ miles away)  **Exposition of the properties of
CU Confinement (Per day, up to 30 days)   \$600
Rehab Facility Confinement (Per day, up to 30 days)  Follow-up Care & Treatment  Surgery (Abdominal, cranial or Thoracic/Hernia)  Appliances  Blood, Plasma, Platelets  Chiropratic Care (3 visits per accident, 6 visits per calendar year)  Follow-up Treatment (Per visit, up to 2 visits)  Lodging (per night, up to 30 nights; 100+ miles away)  Major Diagnostic Exam  Sugon  Organ Loss  Outpatient Surgery Facility  Se600  Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits)  Tendon, Ligament, Rotator Cuff Surgery  Transportation (per trip, up to 3 trips, 100+ miles away)  X-ray  Sugon  Injuries  Burns (Level 1/2/3)  \$1,500/\$3,000/\$15,000
Follow-up Care & Treatment  Surgery (Abdominal, cranial or Thoracic/Hernia) \$2,000/\$200  Appliances \$1,000  Blood, Plasma, Platelets \$600  Chiropratic Care (3 visits per accident, 6 visits per calendar year) \$50  Follow-up Treatment (Per visit, up to 2 visits) \$100 for 2 visits  Lodging (per night, up to 30 nights; 100+ miles away) \$200  Major Diagnostic Exam \$200  Organ Loss \$2,500  Outpatient Surgery Facility \$600  Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits) \$50  Prosthetics \$1,500  Tendon, Ligament, Rotator Cuff Surgery \$1,000  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Traumatic Brain Injury \$600  X-ray \$250  Injuries  Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
Surgery (Abdominal, cranial or Thoracic/Hernia)         \$2,000/\$200           Appliances         \$1,000           Blood, Plasma, Platelets         \$600           Chiropratic Care (3 visits per accident, 6 visits per calendar year)         \$50           Follow-up Treatment (Per visit, up to 2 visits)         \$100 for 2 visits           Lodging (per night, up to 30 nights; 100+ miles away)         \$200           Major Diagnostic Exam         \$200           Organ Loss         \$2,500           Outpatient Surgery Facility         \$600           Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits)         \$50           Prosthetics         \$1,500           Tendon, Ligament, Rotator Cuff Surgery         \$1,000           Transportation (per trip, up to 3 trips, 100+ miles away)         \$600           Traumatic Brain Injury         \$600           X-ray         \$250           Injuries           Burns (Level 1/2/3)         \$1,500/\$3,000/\$15,000
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Therapy - Physical, Occupational, or Speech (per visit, up to 10 visits)  Prosthetics \$1,500  Tendon, Ligament, Rotator Cuff Surgery \$1,000  Transportation (per trip, up to 3 trips, 100+ miles away) \$600  Traumatic Brain Injury \$600  X-ray \$250  Injuries  Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
Prosthetics         \$1,500           Tendon, Ligament, Rotator Cuff Surgery         \$1,000           Transportation (per trip, up to 3 trips, 100+ miles away)         \$600           Traumatic Brain Injury         \$600           X-ray         \$250           Injuries           Burns (Level 1/2/3)         \$1,500/\$3,000/\$15,000
Tendon, Ligament, Rotator Cuff Surgery       \$1,000         Transportation (per trip, up to 3 trips, 100+ miles away)       \$600         Traumatic Brain Injury       \$600         X-ray       \$250         Injuries         Burns (Level 1/2/3)       \$1,500/\$3,000/\$15,000
Transportation (per trip, up to 3 trips, 100+ miles away)       \$600         Traumatic Brain Injury       \$600         X-ray       \$250         Injuries       \$1,500/\$3,000/\$15,000
Traumatic Brain Injury       \$600         X-ray       \$250         Injuries       \$1,500/\$3,000/\$15,000
X-ray \$250  Injuries  Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
Injuries Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
Burns (Level 1/2/3) \$1,500/\$3,000/\$15,000
50% of the Burns benefit
Coma \$12,500
Dislocations, up to \$10,000
Eye \$400
Fractures, up to \$12,000
Herniated Disc Surgery \$1,500
Knee Cartilage - Torn \$1,500
Lacerations \$75 - \$700
Loss of Hands, Feet or Sight \$40,000
Loss of Fingers or Toes \$2,000
Additional Benefits
Accidental Death (AD) (Employee & Spouse/Child) \$50,000/\$25,000
Accidental Death (AD) (Employee & Spouse/Child) \$50,000/\$25,000  Accidental Death Common Carrier 4x AD amount
Accidental Death (AD) (Employee & Spouse/Child) \$50,000/\$25,000  Accidental Death Common Carrier 4x AD amount  Catastrophic (Employee, Spouse, and Child) \$40,000 (50% at age 70)
Accidental Death Common Carrier 4x AD amount