

For employees of **CraftWorks Holdings** 



# 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 Chubb Accident can help.

Chubb Accident pays cash benefits directly to you or anyone you choose regardless of any other coverage you have. And Chubb Accident pays extra benefits for injuries resulting from participating in organized sports. Let Chubb Accident help take care of your bills so you can take care of yourself and your family.

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

#### **Chubb Accident Benefits always 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 right over the phone so you can get cash fast.

#### **Sports Package**

Your benefits increase 25%, up to \$1,000 per person per year, 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 those expenses

#### 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.

#### Here's How Accident Benefits Work:

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 \$491.

First Accident	\$ 100
Ambulance	\$ 200
ER Visit	\$ 200
X-Ray	\$ 40
Fracture	\$ 1,000
Crutches	\$ 100
Physical Therapy	\$ 250
Follow-up Visits	\$ 75
Subtotal	\$ 1,965
PLUS Sports Package	\$ 491

Total Payment \$ 2,456

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 or policy for terms and conditions.



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

### **Gold Plan**

Ambulance	
Ground	\$200
Air	\$2,000
Emergency Room	\$200
Initial Doctor's Office Visit	\$200
Urgent Care	\$100
Emergency Dental	
Crown	\$400
Extraction	\$100

Hospital Admission	\$1,000
ICU Admission	\$2,000
Rehabilitation Admission	\$1,000
Hospital Confinement	\$150
Per day, up to 365 days	
ICU Confinement	\$300
Per day, up to 30 days	
Rehabilitation Confinement	\$90
Per day, up to 30 days	
Recovery	\$50
Per day, up to seven days	

#### **Follow-up Care & Treatment**

\$1,500
\$100
\$300
\$25
\$100
\$25
\$150 away;

#### Follow-up Care & Treatment (cont'd)

Major Diagnostic Exam	\$200
(CT, MRI, etc.)	
Organ Loss	\$2,500
Outpatient Surgery Facility	\$25
Physical Therapy	\$25
Per visit, up to 10 visits	
Prosthetics	\$1,500
Tendon, Ligament, or	
Rotator Cuff Surgery	\$750
Transportation	\$600
For treatment 100 miles or more	
away; per trip, up to three trips	
X-ray	\$40

### **Injuries**

Burns	
2nd/3rd Degree \$1,	000-10,000
Skin Graft 25% of the	burn benefit
Coma	\$12,500
Dislocations	
Open reduction, up to	\$4,800
Closed reduction, up to	\$2,400
Eye	\$200
Fractures	
Open reduction, up to	\$7,000
Closed reduction, up to	\$3,500
Herniated Disc	\$750
Knee Cartilage – Torn	\$750
Lacerations	\$30-\$500
Loss of Hands, Feet or Sight,	
up to	
Loss of Fingers or Toes, up to	\$2,000

#### **Additional Benefits**

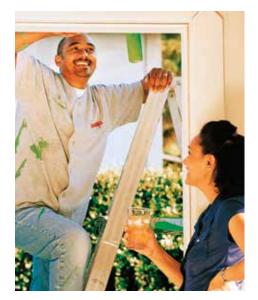
First Accident	\$100
Once per policy	
Accidental Death	
Employee & Spouse	\$80,000
Child	\$16,000
Catastrophic Accident	
Prior to age 70	
Employee & Spouse	\$60,000
Child	\$30,000
On or after age 70	50%
Family Care	\$25
For each child in a child care	center:
Per day, up to 30 days	

#### **Sports Package Benefits**

Increases total benefit by 25% when accident is due to participation in organized sports. Up to \$1,000 per person per year.

Wellness	\$100
Per person, once per year;	
90 day waiting period	

Weekly Premium	
Employee	\$ 2.80
Employee + Spouse	\$ 6.74
Employee + Child(ren)	\$ 8.28
Family	\$ 10.80



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**

#### **Date of Application Coverage**

Coverage becomes effective as soon as your application is signed, you have authorized payment and the Initial Eligibility requirements are met.

#### **Guaranteed Issue**

No medical history is required for coverage to be issued.

#### **Guaranteed Renewable**

Your coverage cannot be cancelled as long as your premiums are paid as due.

#### **Fully Portable**

You can keep your coverage even if you change jobs or retire.

#### **HSA Compatible**

#### **Initial Eligibility**

#### **Employee**

- · Actively employed working at least 17.5 hours per week
- Ages 18 and up

#### Spouse

• Ages 18 and up

#### Dependent children/grandchildren

- Ages 0 to 26
- · No student status required
- · Coverage will continue for incapacitated dependent children regardless of age.

#### Accident Benefits Summary

## Name: Type of Coverage\_ ☐ Employee ☐ Employee + Spouse ☐ Employee + Child(ren) ☐ Family Payroll Deduction \$

#### **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 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. 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.

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 Nos. C14059R or 14185 (or applicable state version). Refer to your certificate of insurance or policy for specific details about benefits, exclusions and limitations.

## Chubb. Insured.

Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. This insurance product is underwritten by Combined Insurance Company of America, Chicago, IL, a Chubb company.