# Workplace Benefits

Proposal:BusinessSolver

Proposal #: BU180622v6



# Presented:

Date: June 22, 2018 Contact: Janine Zenner

This offer is valid for ninety (90) days from the proposal date.

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# Chubb

## **Workplace Benefits**

With Chubb, you are never alone. We are committed to working with you to create superior solutions. Our experts are committed to years of above and beyond service excellence. With Chubb as your partner, you can deliver customized benefit programs for your clients, and do so with the utmost confidence. Expect craftsmanship.

Chubb. Insured.

## Committed to our Craft

#### **Proven Industry Experience**

We are a force in the supplemental benefits marketplace. We have had a dedicated workplace unit since 1996 and leverage over 90 years' experience providing supplemental benefits to individuals and their families.

#### **Leading Edge Product Portfolio**

Benefit programs require customizable solutions. Chubb workplace products are created to give you the innovative, flexible and competitive solutions your clients deserve.

#### Strong and Stable Partnership

Chubb stands for excellence. Our world class reputation, global leadership, extensive product offering and exceptional financial strength means we are partners you can count on with confidence.

#### **Extensive Service and Support**

Well-planned, flawlessly executed programs are integral to your success. Our expert, hands-on approach and extensive infrastructure assure you smooth implementation from enrollment through fulfillment.

## The Right Solutions

Chubb Accident, Chubb Critical Illness, High Deductible Buffer and LifeTime Benefit Term® are rich with innovative, flexible and competitive solutions. By design, they enable Chubb to create the custom benefit programs your clients deserve.



# **Product Offering**

## **Accident Insurance**

Chubb Individual Accident Insurance

- Not available in the following states: ID, MA, MN, NH, RI, WA.
- The following states are not approved for the Actively at Work Rider: FL, ID, NH, NM, RI, TX, VT

### Critical Illness Insurance

Chubb Individual Critical Illness

- Not available in the following states: AZ, ID, MA, MT, ND, OR, RI, TN, UT, WA
- The following states may have different benefits and/or rates: AK, , CA, CO, CT, D.C., FL, GA, IL, IN, KY, LA, MD, MI, MO, MT, NC, NJ, NM, NV, NY, OH, SC, SD, VA, WI
- The following states are not approved for the Activeyl at Work Rider: AZ, CO, FL, ID MA, MT, ND, NH, NJ, OR, PA, RI, TN, UT, VT, WA



# Chubb Individual Accident

## No one knows Accident insurance like Chubb

We've been delivering accident benefits for over 90 years. Our innovative Sports Package has captured the markets attention.

### Accident with Distinction

#### **Sports Package**

Most people buy accident insurance to help pay for sports-related injuries. Chubb pays 25% higher benefits for injuries resulting from organized sports – up to \$1,000 per person per year!

### **Rehabilitation Package**

No one gets to stay in the hospital until they are fully recovered. Chubb's robust benefits pay for admission and confinement in a rehabilitation facility and recovery at home.

## Featuring

#### **Immediate Coverage**

No Exclusions for Pre-existing Conditions

#### **Guaranteed Renewable**

Coverage cannot be cancelled as long as premiums are paid as due.



# Proposed Benefit & Rate

	CHUBB ACCIDENT INSURANCE	
Plan	Gold	Diamond
Coverage Type	24-I	Hour
Initial Car	e Benefits	_
Emergency Room	\$75	\$125
Urgent Care	\$50	\$100
Initial Dr. Visit	\$25	\$50
Hospital/Facility Benefits		
Standard Admission	\$500	\$1,250
ICU Admission	\$1,000	\$2,500
Hospital/Facility Confinement		
Hospital Confinement (per day, up to 365 days)	\$150	\$250
ICU Confinement (per day, up to 30 days)	\$300	\$500
Rehab Admission	\$500	\$1,250
Rehab Confinement (per day, up to 30 days)	\$90	\$150
Recovery Benefit (per day)	\$50	\$100
No. of Days	7	7
Accidental Death (Not available in D.C.or VA)	/	/
Insured	\$25,000	\$25,000
Spouse as % of Ins	\$25,000	\$25,000
Child as % of Ins	\$5,000	\$5,000
Cinic as 70 of this		
AD Common Carrier	2X	2X
Ambulance (air)	\$1,000	\$2,000
Ambulance (ground)	\$120	\$200
Appliance	\$75	\$100
Blood, Plasma, Platelets	\$200	\$300
Burns		
Level 1	\$750	\$1,000
Level 2	\$1,500	\$2,000
Level 3	\$7,500	\$10,000
Skin Graft	25%	25%
Catastrophic (Not available in D.C. or VA)		
Insured	\$25,000	\$25,000
Spouse	\$25,000	\$25,000
Child	\$12,500	\$12,500
On or after age 70	50%	50%
Chiropractic Care (per visit) ( Not available in D.C., MD or VA)	\$25	\$25
Maximum Visits	3	3
Coma	\$7,500	\$12,500
Concussion	\$60	\$100
Dislocations		
Up to	\$3,600	\$4,800
Emergency Dental		
Crown	\$200	\$400



Extraction	\$50	\$100
Eye Injury	\$200	\$300
Family Care ( Not available in D.C., MD or VA)	\$25 per day, per child in child care center, while parent is confined, up to 30 days	\$25 per day, per child in child care center, while parent is confined, up to 30 days
Follow-up Treatment (per visit)	\$25	\$50
Maximum Visits	1	3
Fractures		
Up to	\$5,000	\$7,000
Herniated Disc	\$400	\$750
Knee Cartilage - Torn	\$400	\$750
Lacerations	\$20-\$300	\$30-\$500
<b>Lodging</b> (per night, up to 30 nights; 100+ miles)	\$100	\$150
Loss of hands, feet, sight	\$10,000	\$20,000
Loss of fingers or toes	\$1,200	\$2,000
Major Diagnostic Exam (CT, MRI, etc.)	\$100	\$200
Organ Loss	\$2,500	\$2,500
Outpatient Surgery Facility ( Not available in D.C., MD or VA)	\$25 (Additional benefit for surgeries performed as outpatient)	\$25 (Additional benefit for surgeries performed as outpatient)
Physical Therapy (per visit)	\$25	\$50
Maximum Visits	6	10
Prosthetics	\$500	\$1,500
Sports Package	Benefits are 25% higher when accident is due to organized sports; Up to \$1000 per person/per year	Benefits are 25% higher when accident is due to organized sports; Up to \$1000 per person/per year
Surgery - Abdominal or Thoracic	\$750	\$1,500
Tendon, Ligament, Rotator Cuff	\$400	\$750
<b>Transportation</b> (per trip, up to 3 trips, 100+ miles away)	\$300	\$600
X-Ray	\$20	\$40
Wellness (per person, per year)  Not available in: CA, CO, CT, D.C.,MD, MO, MT, ND, OH, PA, VA, VT	See rates and benefits below	See rates and benefits below



	GENERIC	
	Gold	Diamond
	24-Hour	
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$11.28	\$20.76
Insured + Spouse	\$20.76	\$38.12
Insured+ Children	\$22.16	\$40.88
Family	\$31.64	\$58.24

This above rates are for the following states: AL, AK, AR, AZ, DE, GA, HI, IL, IN, IA, KS, LA, ME, MI, MS, NE, NV, NJ, NC, OK, OR, TX, UT, WV, WI, WY

	GENERIC with actively at work rider	
	Gold	Diamond
	24-H	our
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$11.84	\$21.80
Insured + Spouse	\$11.84 \$21.80	\$21.80 \$40.00
		·

This above rates are for the following states: AL, AK, AR, AZ, DE, GA, HI, IL, IN, IA, KS, LA, ME, MI, MS, NE, NV, NJ, NM, NC, OK, OR, UT, WV, WI, WY



	CA, CT, MC	CA, CT, MO, MT, PA, VT	
	Gold	Diamond	
	24-	Hour	
<b>Monthly Premiums</b>	No W	ellness	
Insured	\$10.36	\$18.92	
Insured + Spouse	\$19.04	\$34.68	
Insured+ Children	\$20.72	\$38.00	
Family	\$29.40	\$53.76	

	CA, CT, MO, MT, PA, VT with actively at work rider	
	Gold	Diamond
	24-Hour	
Monthly Premiums	No Wellness	
Insured	\$10.88	\$19.88
Insured + Spouse	\$20.00	\$36.44
Insured+ Children	\$21.76	\$39.88
Family	\$30.88	\$56.44

## \*VT is not approved for Actively at Work Rider

	COLORADO	
	Gold	Diamond
	24-H	our
Monthly Premiums	No Wellness	
Insured	\$8.68	\$15.88
Insured + Spouse	\$16.00	\$29.16
Insured+ Children	\$17.40	\$31.84
Family	\$24.72	\$45.12

	COLORADO With actively at work rider	
	Gold	Diamond
	24-Hour	
Monthly Premiums	No Wellness	
Insured	\$9.12	\$16.68
Insured + Spouse	\$16.84	\$30.64
Insured+ Children	\$18.28	\$33.44
Family	\$25.96	\$47.40



	D.C., MD, VA,	
	Gold	Diamond
	24-H	our
Monthly Premiums	No Wellness	
Insured	\$8.00	\$16.56
Insured + Spouse	\$14.92	\$30.56
Insured+ Children	\$17.84	\$35.12
Family	\$24.76	\$49.12

	D.C., MD, VA with actively at work rider	
	Gold	Diamond
	24-H	our
Monthly Premiums		No Wellness
Insured	\$8.40	\$17.40
Insured + Spouse	\$15.68	\$32.08
Insured+ Children	\$18.72	\$36.88
Family	\$26.00	\$51.56

	FLORIDA	
	Gold	Diamond
	24-H	our
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$13.24	\$24.40
Insured + Spouse	\$25.28	\$46.56
Insured+ Children	\$27.27	\$49.96
Family	\$39.28	\$72.12

<sup>\*</sup>FL is not approved for Actively at Work Rider



	N	ND, OH	
	Gold	Diamond	
	24	-Hour	
Monthly Premiums	No V	Vellness	
Insured	\$9.36	\$17.12	
Insured + Spouse	\$17.28	\$31.48	
Insured+ Children	\$18.84	\$34.52	
Family	\$26.76	\$48.88	

	ND, OH with actively at work rider	
	Gold Diamond 24-Hour	
Monthly Premiums	No Wellness	
Insured	\$9.84	\$17.96
Insured + Spouse	\$18.16	\$33.04
Insured+ Children	\$19.76	\$36.24
Family	\$28.08	\$51.32

	SOUTH CAROLINA	
	Gold Diamond 24-Hour	
Monthly Premiums	\$25 Wellness	\$25 Wellness
Insured	\$10.20	\$18.80
Insured + Spouse	\$18.84	\$34.60
Insured+ Children	\$20.16	\$37.16
Family	\$28.80	\$52.96

	SOUTH CAROLINA with actively at work rider	
	Gold Diamond 24-Hour	
Monthly Premiums	\$25 Wellness	\$25 Wellness
Insured	\$10.72	\$19.76
Insured + Spouse	\$19.80	\$36.36
Insured+ Children	\$21.16	\$39.00
Family	\$30.24	\$55.60



	SOUTH	SOUTH DAKOTA	
	Gold	Diamond	
	24-	Hour	
Monthly Premiums	\$25 Wellness	\$50 Wellness	
Insured	\$9.48	\$17.44	
Insured + Spouse	\$17.48	\$32.04	
Insured+ Children	\$18.60	\$34.28	
Family	\$26.60	\$48.88	

	SOUTH DAKOTA with actively at work rider	
	Gold Diamond	
	24-Hour	
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$9.96	\$18.32
Insured + Spouse	\$18.36	\$33.64
Insured+ Children	\$19.56	\$36.00
Family	\$27.92	\$51.32

	TN, KY	
	Gold Diamond 24-Hour	
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$9.92	\$18.52
Insured + Spouse	\$18.40	\$34.16
Insured+ Children	\$19.76 \$36.76	
Family	\$28.24	\$52.40

	TN, KY with actively at work rider	
	Gold	Diamond
	24-Hour	
Monthly Premiums	\$25 Wellness	\$50 Wellness
Insured	\$10.40	\$19.44
Insured + Spouse	\$19.32	\$35.88
Insured+ Children	\$20.72	\$38.60
Family	\$29.64	\$55.04



	VIRO	VIRGINIA	
	Gold	Diamond	
	24-Hour		
Monthly Premiums	No Wo	ellness	
Insured	\$8.00	\$16.56	
Insured + Spouse	\$14.92	\$30.56	
Insured+ Children	\$17.84	\$35.12	
Family	\$24.76	\$49.12	

		VIRGINIA with actively at work rider	
	Gold	Diamond	
	24-I	Iour	
Monthly Premiums	No We	ellness	
Insured	\$8.40	\$17.40	
Insured + Spouse	\$15.68	\$32.08	
Insured+ Children	\$18.72	\$36.88	
Family	\$26.00	\$51.56	



## **Initial Eligibility**

#### **Individual**

- · Actively employed working at least 17.5 hours per week
- Ages 18 to 70

#### **Spouse**

- · Includes legally married spouse, domestic partner and civil union partner
- Ages 18 to 70

#### Children

- Ages o to 26
- No student status required

### **Exclusions & Limitations:**

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.



# Proposed Benefit & Rate (New York Only)

	CHUBB ACCIDENT INSURANCE	
Plan	Gold	Diamond
Coverage Type	24 Hour	Coverage
Initial Care Benefits		
Emergency Room	\$75	\$125
Urgent Care	\$50	\$100
Initial Dr. Visit	\$25	\$50
Hospital/Facility Benefits		
Standard Admission	\$500	\$1,250
ICU Admission	\$1,000	\$2,500
Hospital/Facility Confinement (Metro/Non Metro)		
Hospital Confinement (per day, up to 365 days)	\$150/\$150	\$240/\$165
ICU Confinement (per day, up to 30 days)	\$300/\$300	\$480/\$330
Rehab Admission	\$500	\$1,250
Rehab Confinement (per day, up to 30 days)	\$90	\$120
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Additional Benefits		
Accidental Death		
Employee	\$25,000	\$25,000
Spouse as % of Employee	\$20,000	\$20,000
Child as % of Employee	\$4,000	\$4,000
•		
AD Common Carrier	2X	2X
Ambulance (air)	\$1,000	\$2,000
Ambulance (ground)	\$120	\$200
Appliance	\$75	\$100
Blood, Plasma, Platelets	\$200	\$300
Burns		
Level 1	\$750	\$1,000
Level 2	\$1,500	\$2,000
Level 3	\$7,500	\$10,000
Skin Graft	25%	25%
Catastrophic		
Employee	\$25,000	\$25,000
Spouse	\$25,000	\$25,000
Child	\$12,500	\$12,500
Chiropractic Care (per visit)	\$25	\$25
	Up to 3 visits per accident	Up to 3 visits per accident
Coma	\$7,500	\$12,500
Concussion	\$100	\$150
Dislocations (Category)		
Major (Ankle, Foot, Hip, Knee)	\$1,000	\$1,000
Standard	\$300	\$500
Minor (Finger, Toe)	\$50	\$200
<b>Emergency Dental</b>		
Crown	\$200	\$400
Extraction	\$50	\$100
Eye Injury	\$200	\$300



	\$25	\$25
Family Care	Per day, per child in child care center, while parent is confined, up to 30 days	Per day, per child in child care center, while parent is confined, up to 30 days
Follow-up Treatment (per visit)	\$25	\$50
Maximum Visits	3	3
Fractures (Category)		
Major (Skull, Hip, Thigh, Vertebrae)	\$1,000	\$1,000
Standard	\$300	\$500
Minor (Finger, Toe)	\$50	\$200
Herniated Disc	\$400	\$75O
Knee Cartilage - Torn	\$400	\$750
Lacerations	\$20-300	\$30-500
<b>Lodging</b> (per night, up to 30 nights; 100 or more miles)	\$100	\$150
Loss of hands, feet, sight	\$10,000	\$20,000
Loss of fingers or toes	\$1,200	\$2,000
Major Diagnostic Exam (CT, MRI, etc.)	\$100	\$200
Organ Loss	\$2,500	\$2,500
Outpatient Surgery Facility	\$25 additional benefit when surgeries are performed as outpatient	\$25 additional benefit when surgeries are performed as outpatient
Physical Therapy	\$25	\$50
Maximum Visits	10	10
Prosthetics	\$500	\$1,500
Surgery - Abdominal or Thoracic	\$750	\$1,500
Tendon, Ligament, Rotator Rotator Cuff	\$400	\$ <sub>75</sub> 0
<b>Transportation</b> (per trip, up to 3 trips; 100 or more miles)	\$300	\$600
X-Ray	\$25	\$45



	NEW YORK	
	Gold	Diamond
	24-Hour	
Monthly Premiums	No Wellness	
Insured	\$11.64	\$18.64
Insured + Spouse	\$21.12	\$33.96
Insured + Children	\$22.04	\$36.56
Family	\$31.52	\$51.88

	NEW YORK	
	Gold	Diamond
	24-Hour	
Monthly Premiums	No Wellness	
Insured	\$12.20	\$19.56
Insured + Spouse	\$22.16	\$35.64
Insured + Children	\$23.16	\$38.40
Family	\$33.12	\$54.48



## **Initial Eligibility**

#### **Employee**

- Actively employed working at least 17.5 hours per week
- Ages 18 through 64
- · Can match employer's service wait period for benefit eligibility

#### Spouse

- Includes legally married spouse, domestic partner and civil union partner
- Ages 18 through 64

#### Children

- Ages o through 26
- No student status required

### **Exclusions & Limitations:**

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 any narcotic unless administered
  on the advice of a Physician (the term "intoxicated" means the minimum
  blood alcohol level required to be considered operating an automobile under
  the influence of alcohol in the jurisdiction where the accident occurred);
- Commission of or attempt to commit a felony or to which a contributing
  cause was the Covered Person's being engaged in an illegal occupation
  ("felony" is as defined by the law of the jurisdiction in which the activity takes
  place);
- Suicide, attempted suicide or intentionally self-inflicted injury;
- Dental care or treatment, except for such care or treatment due to Injury to sound natural teeth within twelve (12) months of the Covered Accident and except for dental care or treatment necessary due to congenital disease or anomaly; or
- War or any act of war (whether declared or undeclared), or service in the Armed Forces or units auxiliary thereto.



At present we expect to deliver consistent benefits and rates to all individuals. However, due to state regulatory requirements, we reserve the right to adjust plans, rates, notification of disclosures, or delivery of forms.

This proposal is not a contract of insurance. The terms and conditions of coverage will be described in detail in the issued policy once we receive acceptance. If there are any differences between the terms and conditions of this proposal and the policy, the policy will govern. The policy is governed by the laws of the state in which it is delivered. Certain terms or provisions may be different if required by the laws of that state

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