



**ace usa**



## Limited Accident & Sickness Benefits

A proposal for:

**CareAccess Health Care**

**Group Inc.**

**Prepared by Affinity Group Underwriters  
Underwritten by ACE American Insurance Company**



ACE USA offers a portfolio of limited benefit products, affordably priced, easy to access, and specifically designed to pay accident and sickness benefits for persons not otherwise eligible for health care benefits or to help fill the gap under a high-deductible healthcare plan.

We are pleased to offer a proposal for Limited Accident & Sickness benefits to CareAccess Health Care Group Inc and its participants.

### Product Highlights and Features

The ACE USA Limited Benefit Plan is more than an insurance program – it is a package of benefits and services designed to take care of your clients’ basic medical needs. It is not major medical or comprehensive medical insurance. It provides an alternative to the high cost of healthcare by providing a cost-effective plan of limited benefits for participants and their eligible dependents.

Our plans offer:

- Guaranteed issue coverage with no medical evidence required
- 6 month preexisting condition limitation on hospital & surgery benefits only
- No coordination of benefits regardless of any other coverage in force
- Family coverage available
- Easy and convenient payroll deduction for employer group participants
- Assignment of benefits directly to service providers

Plus, value added services:

- Access to Beechstreet’s PPO network discounts for hospital services
- Toll-free numbers for customer service including inquiries and claim service
- Multilingual claims customer service capabilities—English and Spanish on a standard basis; other languages available if necessary to better serve your client population
- Administration of COBRA benefits for groups with 20+ employees

Our Managing Underwriter, Affinity Group Underwriters (“AGU”), works with you to establish an end-to-end process for enrollment (both initial and ongoing), fulfillment, premium collection, change processing, and terminations.

Our Claims Administrator, Administrative Concepts, Inc. (“ACI”), is committed to service excellence and exceptional quality providing timely, accurate, and hassle-free eligibility verification, benefit explanations, and claims processing.

### **Who Is Eligible For Insurance?**

A person in one of the eligible classes shown in the Schedule of Benefits is eligible for coverage on the later of the effective date of the policy or when he or she satisfies the eligibility requirements..

For Family Plan Coverage, dependents are eligible on the later of the date the insured is eligible or the date a person becomes a Dependent. A person may not be insured as both an insured and a Dependent.

All eligible persons must be actively at work on the effective date of coverage or, if not employed, able to engage in substantially all of the usual activities of a person in good health of like age and sex and not confined in a hospital or rehabilitation or rest facility.

### **When Does Coverage Go Into Effect?**

Insurance is effective on the latest of the policy effective date; the date the person becomes eligible; the date we receive the completed enrollment form; the date payroll deduction is authorized for this insurance; or premium is received.

Insurance for a Dependent becomes effective on the latest of the date he or she becomes eligible; the date we receive the completed enrollment form; the date payroll deduction is authorized for this insurance; premium is received; or the date the insured's coverage goes into effect.

Coverage for any person who is not actively at work (or as described above for non-employed persons) on the date insurance would otherwise be effective will not go into effect until the date he or she returns to actively at work status.

### **When Does Coverage Terminate?**

An insured's coverage will end on the earlier of the date the policy terminates; the period ends for which premium is paid; or the date he or she is no longer a participant in the CareAccess health care program or no longer eligible.

Coverage for a Dependent will end on the earliest of the date he or she is no longer a Dependent; the period ends for which premium is paid; or the date the insured's coverage ends.

### **What Continuation Options Are Available?**

Under certain circumstances, if an insured's coverage ends, he or she may continue insurance provided he or she elects the continuation coverage and pays the required premium. (Available to participants through an employer group only)

## Limited Accident & Sickness Benefits

### Emergency Room Visits

We will pay benefits for Emergency Room Visits if a covered person requires treatment or services in a Hospital emergency room for a life-threatening condition. Covered expenses include the attending Doctor's charges, X-rays, laboratory procedures, use of the emergency room and supplies.

### Hospital Confinement Benefit

We will pay benefits if a covered person is confined in a hospital because of a covered injury or illness for at least 24 consecutive hours.

### Surgery and Anesthesia Benefit

We will pay benefits if a covered person undergoes medically necessary surgery at the direction of a doctor for a covered injury or sickness. We will also pay benefits for anesthesia services for pre-operative screening and the administration of anesthesia during a surgical procedure whether on an inpatient or outpatient basis.

### Accident Medical Expense Benefits

We will pay benefits for medically necessary expenses that result directly from a covered accident. Initial treatment must begin within 72 hours of the accident and covered expenses must be incurred within 90 days after the accident. These benefits are subject to the Deductible, Benefit Periods, Benefit Maximums and other terms or limits, if any, shown in the Schedule of Benefits. Covered expenses include medical services and supplies, emergency care, ambulance expenses, treatment of an injured tooth, prescription drugs and rehabilitative braces or appliances prescribed by a doctor.

## Exclusions

### What's Not Covered?

We will not pay benefits for any loss, injury or sickness that is caused by, or results from:

- intentionally self-inflicted injury.
- suicide or attempted suicide.
- war or any act of war, whether declared or not.
- service in the military, naval or air service of any country.
- commission of, or attempt to commit, a felony, an assault or other illegal activity.
- commission of or active participation in a riot, or insurrection.
- an accident if the covered person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, except while participating in Driver's Education Program.
- medical or surgical treatment, diagnostic procedure, administration of anesthesia related to medical mishap or negligence, including malpractice.
- travel or activity outside the United States, except for a Medical Emergency.
- alcoholism, drug addiction or the use of any drug or narcotic except as prescribed by a Doctor unless specifically provided herein.
- repair or replacement of existing dentures, partial dentures, braces, fixed or removable bridges, or other artificial dental restoration;
- repair, replacement, examinations for prescriptions or the fitting of eyeglasses or contact lenses.
- while the covered person is legally intoxicated (as determined by that state's laws) or while under the influence of any drug unless administered under the advice and consent of a Physician.
- medical expenses and disability for which the covered person is entitled to benefits under any Worker's Compensation Act.
- medical expenses paid or payable under any mandatory no fault automobile insurance contract or mandatory basic reparations benefit of no fault.
- Injury to a covered person resulting from that covered person's willful violation of the Policyholder's rules or regulations. Willful violation includes, but is not limited to: a) competing without protective clothing, helmets, gloves, etc. required by the Policyholder's rules or regulations; or b) competing in a racing vehicle that is in violation of the Policyholder's rules or regulations.
- Pre-Existing Conditions\* occurring in the first six months of coverage (applies to Hospital & Surgery benefits only).
- Elective Abortion. Elective Abortion means an abortion for any reason other than to preserve the life of the female upon whom the abortion is performed.
- Mental and Nervous Disorders (except as provided in the Policy).
- Covered medical expenses for which the covered person would not be responsible for in the absence of this Policy.
- Cosmetic surgery, except for reconstructive surgery needed as the result of an injury or sickness.
- Experimental or Investigational drugs, services, supplies or any procedure held to be experimental or investigatory by Us at the time the procedure is done.

\*A Pre-Existing Condition is an illness, disease or other condition, that in the 6 month period before the person's coverage is effective:

- first manifested itself, worsened, became acute or exhibited symptoms that would have caused an ordinarily prudent person to seek diagnosis, care or treatment; or
- required taking prescribed drugs or medicines, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or
- was treated by a doctor or treatment had been recommended by a doctor.

## About ACE

As a global leader, ACE leverages its unique strengths and broad expertise to deliver specialty insurance and tailored products for clients worldwide. Following this same entrepreneurial spirit, ACE USA Accident & Health is committed to delivering innovative insurance products and continued protection for our clients, while helping to protect our insureds against the serious economic impact of sudden injury or catastrophic sickness. Our superior underwriting expertise and solid financial strength provide the competitive advantage we need to distinguish ourselves in the marketplace.

As an organization dedicated to providing client, shareholder, and employee value, ACE fosters an environment of professional excellence. It empowers its employees to deliver on the ACE promise to be creative, agile, innovative, and ethical in meeting the needs of their customers and producers.

ACE USA Accident & Health is a marketing division of ACE USA, headquartered in Philadelphia. ACE American Insurance Company, the primary ACE underwriting company for accident and health insurance in the U.S., is part of The ACE Group of Companies, headed by ACE Limited (NYSE: ACE). For more information about our products and services, please visit our Web site at [www.aceaccidentandhealth.com](http://www.aceaccidentandhealth.com).

This coverage is underwritten by ACE American Insurance Company, part of the ACE Group of Companies, Rated A+ (Superior) by A.M. Best Company for financial strength and operative performance (05/2006).

### Managed & administered by:



**Affinity Group Underwriters**  
Towers Affinity Benefit Services

4510 Cox Road, Suite 111  
Glen Allen, VA 23060  
(804) 273-9797  
[www.agu.net](http://www.agu.net)

Towers Affinity Benefit Services (TABS) is a division of Towers Administrators, Inc. TABS is a strategic alliance entity jointly created and managed by Affinity Group Underwriters and Towers Administrators.

### Claims administered on ACE's behalf by:

**Administrative Concepts, Inc.**  
997 Old Eagle School Road, Suite 215  
Wayne, PA 19087-1706  
Toll-free customer service (800) 964-7096  
[www.visit-aci.com](http://www.visit-aci.com)

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### IMPORTANT NOTICE

This information is a brief description of the important features of the recommended insurance plans. It is not a contract of insurance. Additional plan design options are available.

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