

AFEUSA MEMBERSHIP IS REQUIRED TO PARTICIPATE IN THIS PLAN,  
REFER TO WEBSITE FOR ADDITIONAL INFORMATION AND ENROLLMENT.



# AFEUSA ACCIDENT DISABILITY PLAN

Chance Caldwell | NPN 7556237

Ind/Family Plans: 817-809-4837 | Group Plans: 214-693-3002

Marketplace Consent: My Snap Health

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Available In: TX, AL, AR, AZ, FL, GA, IL, IN, KS, KY, LA, MI, MS, MO, NC, OH, OK, SC, TN, VA

Underwritten by Zurich American Insurance Company.

A Disabling Injury Can Happen at Any Time...

And it could impact your ability to work.

**Help protect your income with AFEUSA's Accident Disability Coverage Plan. A weekly**

**payment of \$500/week would be approximately \$2,000 per month - \$1,000/week would be approximately \$4,000 per month.**

Our accident only Weekly Indemnity Benefit for Total Disability is a "Regular Occupation" plan that pays when a disabling accident prevents you from performing the essential functions of your job. Not just any job. Your job.

## ACCIDENTAL DISABILITY COVERAGE



**Weekly Accident Indemnity  
Benefit for Total Disability**



**Occupation**  
Regular Occupation



**Benefit Amount**



**Benefit Period**  
Up to 52 weeks

This benefit pays 60% of your base weekly earnings per week up to the weekly benefit amount elected, after the elimination period of 14 or 30 days (depending on plan selected), for up to 52 weeks, if a covered accidental bodily injury solely and directly causes disability that: a) prevents a Covered Person from performing the material and substantial duties of his or her occupation, or if he or she is not employed, from engaging in any of the usual activities of a person of like age and sex whose health is comparable to that of the Covered Person immediately prior to the Accident; and b) requires the continuous care of a physician. The Total Disability must occur within 30 days of the date of the Injury. Pays regardless of any other coverage or salary continuation plans in place. Workers compensation, Social Security Disability Insurance (SSDI) or other Disability Income (DI) benefits will not reduce this Weekly Accident Indemnity Benefit for Total Disability benefit.

ELIMINATION PERIOD	BENEFIT PERIOD	MAXIMUM WEEKLY BENEFIT AMOUNT	MAXIMUM AD&D BENEFIT*	MONTHLY COST**
14 Days	Up to 52 Weeks	\$250	\$5,000	\$23.95
14 Days	Up to 52 Weeks	\$500	\$5,000	\$47.93
30 Days	Up to 52 Weeks	\$500	\$5,000	\$22.32
30 Days	Up to 52 Weeks	\$750	\$5,000	\$34.32
30 Days	Up to 52 Weeks	\$1000	\$5,000	\$46.53

\*If you suffer a covered injury resulting in a covered loss within 365 days, this insurance will pay all or a percentage of the benefit amount.

\*\*Monthly costs above do not include the monthly AFEUSA association membership dues. Monthly costs do include billing and administrative fees and insurance premium.

# LIMITATIONS & EXCLUSIONS

**This policy does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing the insurance. In addition, A loss will not be a Covered Loss if it is the direct result of:**

1. War or any Act of War, whether declared or undeclared; or the release of radiation which is the result of war;
2. involvement in any type of active military service, including Reserve or National Guard active duty which extends beyond thirty-one (31) consecutive days;
3. illness or disease, regardless of how contracted; medical or surgical treatment of illness or disease; or complications following the surgical treatment of illness or disease; except for Accidental ingestion of contaminated foods;
4. participation in the commission or attempted commission of any felony, an assault, insurrection or riot;
5. parasailing, bungee jumping, heli-skiing, scuba diving or any other activity that would reasonably be deemed extra-hazardous;
6. being legally intoxicated. A Covered Person will be conclusively presumed to be legally intoxicated if the level of alcohol in his or her blood exceeds the amount at which a person is presumed, under the law of the state in which the Accident occurred, to be intoxicated, if operating a motorized vehicle. An autopsy report from a licensed medical examiner, law enforcement officer reports, or similar items will be considered proof of the Covered Person's intoxication;
7. intentional use of illegal drugs or intentional misuse of prescription or over the counter drugs (not taken as directed);
8. travel or flight in any aircraft except to the extent stated in SECTION IV - HAZARDS and SECTION V - COVERAGES.

Limitation on Multiple Covered Losses: If a Covered Person suffers more than one Covered Loss as a result of the same Accident, We will pay only one benefit, the largest benefit. Limitation on Multiple Coverages and Benefits: If a Covered Person suffers a Covered Loss which is payable under more than one benefit as a result of the same Accident, the most We will pay for these benefits in total is the Covered Person's Principal Sum.

The Disability benefit is not subject to these limitations.

This product is only available to AFEUSA Members.

The Weekly Accident Indemnity and Accidental Death & Dismemberment and Covered Loss of Use Insurance benefits described underwritten by Zurich American Insurance Company (Zurich), 1299 Zurich Way, Schaumburg, Illinois 60196, 1 800 987 3373 (NAIC # 16535). This website provides a general description of certain provisions and features of this insurance program for informational purposes only and does not revise or amend the applicable policies. In the event of a discrepancy between this document and your certificate of insurance or the group policy, the terms of the group policy shall apply. All benefits are subject to the terms and conditions of the group policy. Please refer to your certificate of insurance for a detailed description of the insurance coverage, including the exclusions, limitations, reductions and termination.

Coverage may not be available in all states or certain terms, conditions and exclusions may be different where required by state law. Coverage terminates at age 65. This insurance provides limited benefits. Limited benefits plans are insurance products with reduced benefits and are not intended to be an alternative, it is intended to help supplement Comprehensive coverage. This insurance does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential benefits as set forth under the Patient Protection and Affordable Care Act

