# NOTICE OF TERMINATION OF AAA PREMIER® TRAVEL ACCIDENT INSURANCE BENEFIT

# THIS TRAVEL ACCIDENT INSURANCE BENEFIT TERMINATES JUNE 30, 2020 FOR AAA PREMIER MEMBERS IN:

Automobile Club of Southern California AAA East Central AAA Northern New England AAA Texas Automobile Club of Missouri

# THIS TRAVEL ACCIDENT INSURANCE BENEFIT TERMINATES DECEMBER 31, 2020 FOR AAA PREMIER MEMBERS IN:

AAA Alabama AAA Hawaii AAA New Mexico AAA Tidewater Virginia

For eligible travel purchased on or before the above termination date, coverage will be provided for covered losses until the earlier of: (1) the date on which the ticket is used, or (2) one year from the date of benefit termination.

Please call AAA Premier Services number listed on the back of your Membership card for any questions.

# The insurance of the Insured ends automatically at the earliest of any of the following:

- 1. On the date the policy is terminated;
- 2. On the expiration of the policy term for which premium has been paid;
- 3. On the date the insured no longer falls within the description of Persons Insured.

# However, for any Insured who falls within the description of Persons Insured, prior to the date on which this policy terminates, coverage will be provided until the earlier of:

- 1. The date on which the ticket is used; or
- 2. One year from the date of termination of this policy.

#### Beneficiary

The Loss of Life benefit will be paid to the beneficiary designated by the Insured. If no such designation has been made, that benefit will be paid to the first surviving beneficiary in the following order: a) the Insured person's spouse or domestic partner, b) the Insured's children, c) the Insured's parents, d) the Insured's brothers and sisters, e) the Insured's estate. All other indemnities will be paid to the Insured.

# Notice of Claim

Written notice of claim should be mailed to your local AAA office.

# The Cost

The premium for this Travel Accident Insurance is paid for by AAA for AAA Premier Members.

# **Change of Beneficiary**

The Loss of Life benefit will be paid to the beneficiary designated by the Insured. If no such designation has been made, that benefit will be paid to the first surviving beneficiary in the order stated in the Beneficiary Section of this brochure. If you wish to change beneficiaries, please complete the following information and sign below. Mail this form to your local Auto Club office.

Name of Beneficiary	Allocation %	Relationship
Name of Beneficiary	Allocation %	Relationship
Signature of Member		Date
Membership Number		

#### Definitions

Loss of Use means the permanent and total inability of the specified body part to function, as determined by a physician.

Loss of Use of Arm means the Loss of Use of the arm at or above the elbow joint.

 $\underline{\text{Loss of Use}}$  of Foot means the Loss of Use of the foot at or above the ankle joint.

Loss of Use of Hand means the Loss of Use at or above the knuckle joints of at least four (4) fingers on the same hand or at least three (3) fingers and the thumb on the same hand.

Loss of Use of Leg means the Loss of Use of the leg at or above the knee joint.

Loss must occur within 365 days from the date of accident. Loss of Sight of an Eye means the permanent loss of vision in one eye. Remaining vision must be no better than 20/200 using a corrective aid or device as determined by a physician. Loss of Speech means the permanent and irrecoverable total loss of the capability of speech without the aid of mechanical devices, as determined by a physician. Loss of Hearing means the permanent and irrecoverable Loss of Hearing in both ears, as determined by a physician.

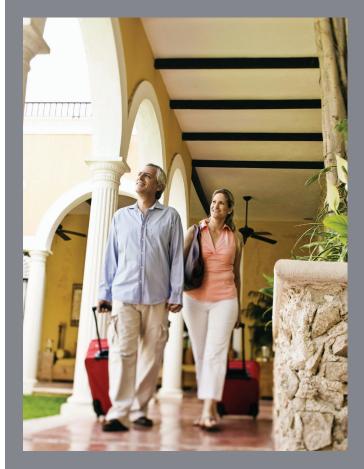
NOTE: The information contained in this brochure is a description of the coverage, benefits and exclusions contained in the Master Policy 6477-01-32.\* The Policy Number and Master Policy are on file with the Policyholder. All information is subject to the terms and conditions of the Master Policy. Keep this brochure with your important papers for your records. It will serve as an important reminder of the valuable protection you have under this plan.

\* Plan underwritten by: Federal Insurance Company a member insurer of the Chubb Group of Insurance Companies
202 Hall's Mill Road
Whitehouse Station, NJ 08889

# AAA Premier<sup>®</sup>

# Travel Accident Insurance Benefit

This Plan Covers up to \$300,000 when travel arrangements are made through your local AAA Travel Agency.





# Travel Easier Knowing You're Covered

The Travel Accident Insurance Program covers AAA Premier members that book and purchase travel on a licensed Common Carrier and rental car through the AAA Travel Agency. Coverage includes accidental loss of life, limbs, sight, speech or hearing. Common Carrier means any land, water or air conveyance operated by those whose occupation or business is the transportation of persons without discrimination and for hire.

### Coverage applies:

- While you are riding solely as a passenger in, entering or exiting any conveyance operated by a common carrier licensed for the transportation of passengers for hire.
- 2. While you are riding solely as a passenger in, entering or exiting any conveyance operated by a common carrier licensed for the transportation of passengers for hire, while traveling directly to or from a terminal, station or airport;
- a. immediately preceding scheduled departure of a common carrier; or
- b. immediately following scheduled arrival of a common carrier.
- 3. Riding or driving in, entering or exiting from a private passenger automobile of the strictly pleasure car type; while going directly to the departure point or while coming from the arrival point of a common carrier.
- 4. While riding or driving in, entering or exiting from a rental car whose lease has been arranged through your participating AAA Travel Agency in conjunction with any airline or other common carrier transportation.

# **Common Carrier and Auto Benefits**

The full Benefit Amount of \$300,000 is payable for accidental loss of: life, two or more members, sight of both eyes, speech and hearing or any combination thereof. One half of the Benefit Amount is payable for accidental loss of: one member, sight of one eye, speech or hearing. "Member" means hand or foot. One guarter of the Benefit Amount is payable for the accidental loss of the thumb and index finger of the same hand. "Loss" means, with respect to a hand, complete severance throughout or above the knuckle joints of at least four (4) fingers on the same hand; with respect to a foot, complete severance through or above the ankle joint. Federal Insurance Company (The Company) will consider it a loss of hand or foot even if they are later reattached. If an Insured Person has multiple Losses as the result of one Accident, we will pay only the single largest Benefit Amount applicable to the Losses suffered. 100% of the benefit is paid if the accident causes the Insured Person to suffer loss of use of both arms and legs; 75% of the Benefit for both arms or both legs or a combination of an arm and a leg; 50% of the Benefit for one arm or one leg, or both hands or both feet or a combination of a hand and a foot: 25% of the Benefit for one hand or one foot.

### Seat Belt Benefit

Accidental Loss of Life Benefits payable under the Private Passenger Automobile coverage of this policy will be increased 10 percent of the loss of life benefit amount up to a maximum amount of \$50,000, if at the time of the Accident the Insured Person suffers Accidental Loss of Life while:

operating or riding in a Private Passenger Automobile and
 utilizing a Seat Belt

A Benefit Amount will not be paid if the Insured Person is driving or riding as a passenger in any race, or contest of any type. The seatbelt usage must be verified by a licensed Physician, a coroner, a police officer or other person of competent authority. The seat belt must have been properly secured, and utilized in accordance with the recommendations of its manufacturer. Private passenger automobile means a four-wheeled motor vehicle with a maximum seat capacity of nine (9), manufactured and designed to travel on public roads.

# **In-Hospital Benefits**

Benefits of \$150 per day for each day hospitalized, up to a total of seven days, will be paid in addition to the Accidental Loss of Life Benefit and other benefit amounts for the losses covered, to the Insured Person if an accident covered under this policy results in the hospitalization of the Insured Person. In-Hospital means that the Insured Person is registered as an in-patient and confined to a hospital, while being treated by a licensed physician. Periods of hospitalization include all In-Hospital stays related to the same Accident. The Benefit Amount will be paid until one of the following occurs:

- 1. The Insured Person dies; or
- 2. The Insured Person is no longer hospitalized; or
- 3. The maximum number of days (7) of payment has expired.

# **Maximum Limit of Insurance**

If more than one (1) Insured Person suffers a loss in the same accident, The Company will not pay more than \$20,000,000 per accident. If an accident results in benefit amounts becoming payable, which when totalled exceed \$20,000,000, the maximum limit of insurance will be proportionately divided among the insured persons, based on each applicable benefit amount.

### **Exclusions**

This insurance does not cover loss resulting from: 1) an Insured's emotional trauma, mental or physical illness, disease, pregnancy, childbirth or miscarriage, bacterial or viral infection (except bacterial infection caused by an accident or from accidental consumption of a substance contaminated by bacteria), or bodily malfunctions; 2) suicide, attempted suicide or intentionally self inflicted injuries; 3) declared or undeclared war, but war does not include acts of terrorism. 4) This insurance does not apply to an accident occurring while an Insured is in, entering, or exiting any aircraft while acting or training as a pilot or crew member. This exclusion also does not apply to passengers who temporarily perform pilot or crew functions in a life threatening emergency; 5) This insurance does not apply to an Accident occurring while an Insured Person is in, entering, or existing any aircraft owned, leased or operated by the Policyholder or any aircraft owned, leased or operated by an employee of the Policyholder on behalf of the Policyholder. This exclusion does not apply to aircraft chartered with pilot or crew on a one time charter basis.

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# March 20, 2020

**TO ALL:** New Mexico residents named as an insured, participant, member, or certificate holder under a supplemental accident & health insurance product issued by a Member of the Chubb Group of Companies

**RE:** Notice Regarding your Insurance Issued by a Member of the Chubb Group of Companies

We recognize and understand that this is a difficult time for all of us; therefore, we wish to provide you clarity regarding the limits of coverage you have under your supplemental accident & health insurance product issued by a Member of the Chubb Group of Companies. For that reason, we are providing the attached notice, as directed by the New Mexico State Insurance Commissioner, which provides additional information about your insurance coverage.

# CHUBB.

# NOTICE TO NEW MEXICO RESIDENTS REGARDING YOUR INSURANCE UNDERWRITTEN BY ACE AMERICAN INSURANCE COMPANY OR FEDERAL INSURANCE COMPANY

The coverage provided under your benefits plan or policy underwritten by ACE American Insurance Company or Federal Insurance Company is limited in nature and may not provide financial protection for significant costs that you could incur for the diagnosis or treatment of COVID-19 ("Coronavirus") related illness.

If you do not have comprehensive major medical coverage, in addition to the plan or policy issued by our company, you may incur significant uninsured medical expenses associated with the diagnosis and treatment of illness caused by COVID-19.

Major medical plans offer robust consumer protections, and are required to waive all deductibles, co-pays and other cost sharing expenses for the diagnosis or treatment of COVID-19 related illness. Your policy or plan with us is not a major medical plan and does not provide such protections.

If you do not have major medical coverage, you may:

- 1. Contact a licensed insurance broker or agent to see about major medical coverage availability.
- 2. To see if you are eligible for a special enrollment period for major medical coverage through the New Mexico Health Insurance Exchange, contact beWellnm toll-free at 1-833-862-3935.
- 3. To see if you are eligible for Medicaid coverage and to complete an application, please call the Human Services Department's Medicaid Expansion Hotline toll-free at l-855-637-6574 or visit <u>https://www.yes.state.nm.us/yesnm/home/index</u>
- 4. To see if you are eligible for high risk pool coverage, please contact the New Mexico Medical Insurance Pool (the "High Risk Pool") at 1-844-728-7896 or <u>https://nmmnip.org/</u>. If you are uninsured and have a COVID-19 diagnosis, your condition qualifies you for Pool coverage.

The Centers for Disease Control and the New Mexico Department of Health each have websites with considerable information on COVID-19. Visit each website at <a href="https://www.cdc.gov/or.http://cv.nmhealth.org/">https://www.cdc.gov/or.http://cv.nmhealth.org/</a>.

Individuals who have symptoms consistent with COVID-19 should immediately call the NM Department of Health at 1-855-600-3453.