



LifeSecure Insurance Company

Personal Accident Insurance

with Disappearing Deductible

Plan-At-A-Glance

Annual Benefit Bank Amount

You choose an amount within the range below (in \$100 increments):

- Minimum = \$1,000
- Maximum = \$15,000 for individuals or \$25,000 for couples/families

Your Annual Benefit Bank represents the total dollar amount available to you for covered services rendered each calendar year. On January 1st of each year, your Annual Benefit Bank will restore to its full amount. This benefit can compliment your health insurance plan in the event of an accidental injury.

Annual Deductible Amount

You choose an annual deductible amount of \$100, \$250 or \$500 – then watch it disappear!

Your annual deductible represents the dollar amount that an individual must incur in covered services in a calendar year before benefits are payable under the policy.

Disappearing Deductible Feature

On January 1st of each calendar year, your Annual Deductible Amount will decrease by 20% if no benefits are payable for the preceding calendar year. Your policy must be in force for at least three full months before the first reduction of the deductible will occur. If any benefits are payable for covered services rendered during a calendar year, your Annual Deductible Amount will reset on the following January 1 to the original Annual Deductible Amount. If no benefits are payable for five consecutive calendar years, your Annual Deductible Amount will be eliminated beginning with the next calendar year. Once your Annual Deductible Amount reaches zero, it will not reset.

Family Deductible (when spouse/domestic partner and/or dependents are included)

The deductible for family coverage is two-times (2X) the individual deductible amount and must be satisfied by at least two covered family members. Once the family deductible is satisfied, benefits would be payable for all covered family members for the remainder of the calendar year, up to your Annual Benefit Bank Amount. Benefits may be paid for an individual family member before the full family deductible is satisfied.

Benefit Payout

If you suffer an accidental injury and receive initial care within 72 hours, simply submit your proof of claim for the dollar amount of your actual medical and/or recovery expenses. To determine the actual expenses to be reimbursed under this policy, we will take into account the adjustments or discounts which may be negotiated between your health insurance plan and provider(s) for services received. While you may have other health insurance, benefits from this policy will pay in addition to other coverage, less any deductible applicable under this policy. All benefits are paid directly to you.

Covered expenses include:

- ambulance transportation
- emergency room, urgent care center or physician's office visits
- hospitalization, including intensive care unit (ICU)
- diagnostic exams
- x-rays
- follow-up visits
- rehabilitative therapies
- certain durable medical equipment and prosthetic devices
- drugs administered in a hospital, urgent care center or physician's office setting

Our **BudgetPointPricingSM** tool can help you determine the size of your Annual Benefit Bank Amount based on the premium you're most comfortable with. By entering your age and target monthly premium, you can quickly and easily find the Personal Accident plan design that best fits your budget.

Try it at www.YourLifeSecure.com under "Quote Calculator" – Personal Accident.

Example – Individual Benefit Payout

Donna chose an **Annual Benefit Bank of \$10,000** and **Annual Deductible of \$250**. She broke her collar bone while skiing with friends and required immediate medical attention.

Covered Expenses	Deductible	Benefit Payout
\$8,000	- \$250	= \$7,750

Example – Family Benefit Payout

Dave purchased a policy which includes coverage for his wife, Kim, and their two children, with a shared **Annual Benefit Bank of \$15,000** and an **Annual Deductible of \$500 per person**; therefore, their **Family Deductible = \$1,000** (2 x Annual Deductible). The family deductible would be satisfied once covered expenses for two or more family members reach \$1,000. In one calendar year, each member of the family suffered an accidental injury, resulting in the benefit payout scenario shown below:

Accidental Injuries	Covered Expenses	Deductible Amount Paid	Benefit Payout
Kim – Sprained ankle/wrist (slipped on ice)	\$1,000	- \$500	= \$500
Dave – Lacerated finger (woodworking)	\$200	- \$200	= \$0
Michael – Broken nose (hit by wild pitch)	\$4,000	- \$300	= \$3,700
\$1,000 Annual Family Deductible satisfied			
Mandy – Broken leg (fall from trampoline)	\$8,000	- \$0	= \$8,000
Total Benefit Payout:			\$12,200

Note: The examples shown are for illustration purposes only.

Policy Limitations and Exclusions

Care or services must be provided within the United States, its territories or possessions or Canada to be considered eligible for benefits and be received within the timeframes stated in the Policy. Refer to the Outline of Coverage.

No benefits of this Policy are payable when the loss is caused by or contributed to:

- Any illness, loss, or condition specifically excluded from the definition of Accident; or
- Operating, learning to operate, or serving as a crew member of any aircraft; or
- Engaging in hang-gliding, hot air ballooning, bungee jumping, parachuting, scuba diving, sail gliding, or parasailing; or
- Riding in or driving any motor-driven vehicle in a race, stunt show or speed test; or
- Officiating, coaching, practicing for or participating in any semi-professional or professional competitive athletic contest for which any type of compensation or remuneration is received; or
- Any act of war whether declared or undeclared; or
- Voluntary participation in any riot or civil insurrection; or
- Engaging in an illegal activity or occupation; or
- Commission or attempt to commit an assault or felony; or
- Dental care or treatment unless caused by Accidental Injury to natural teeth; or
- Suicide or attempted suicide, while sane or insane (CO & MO: while sane); or
- Intentionally self-inflicted injury (SD: treatment or medical condition that results from an attempt at suicide or self-inflicted injury); or
- Treatment for a mental or nervous disorder or disease; or
- Being intoxicated or under the influence of alcohol, drugs or any narcotic unless administered and used in accordance with the instructions of a Physician, (AL, LA & TX: being intoxicated or under the influence of any narcotic unless administered and used in accordance with the instructions of a Physician), (SD: exclusion not applicable).

THIS IS AN ACCIDENT ONLY POLICY AND PROVIDES LIMITED BENEFITS.

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