

# Plan-at-a-Glance | New Jersey

## Hospital Indemnity Insurance — WORKSITE

### Affordable insurance to assist in your recovery

Your medical plan provides benefits to help with medical costs resulting from an inpatient hospitalization or treatment in an observation unit. Once you leave the hospital, you shouldn't have to worry about financial setbacks that you didn't expect during your recovery. Things like medical deductibles and copayments, plus the cost for help with transportation, meals, child care, or even housekeeping can all add up. Hospital Indemnity Insurance provides cash benefits based on your time in the hospital, regardless of any other insurance you have.

Pair it with your medical plan to extend your protection and help with unexpected costs so you can focus on recovery.

### Standard Features

**Eligible Issue Ages:** 18 through 85. This policy is guaranteed renewable for life.

**Benefit Options** – All benefits listed below are per covered family member.

GUARANTEED ISSUE (no medical questions or build charts)	
Lump Sum Hospital Admission Benefit Amount*	\$250
Hospital Confinement Daily Benefit Amount**	\$200
Hospital Observation Benefit Amount***	\$200
Mental Health Confinement Benefit Amount****	\$200

SIMPLIFIED UNDERWRITING (Option 1)	
Lump Sum Hospital Admission Benefit Amount*	\$1,000
Hospital Confinement Daily Benefit Amount**	\$50
Hospital Observation Benefit Amount***	\$50
Mental Health Confinement Benefit Amount****	\$50

SIMPLIFIED UNDERWRITING (Option 2)	
Lump Sum Hospital Admission Benefit Amount*	\$750
Hospital Confinement Daily Benefit Amount**	\$100
Hospital Observation Benefit Amount***	\$100
Mental Health Confinement Benefit Amount****	\$100

\* Lump Sum Hospital Admission Benefit = up to 2 per calendar year. Not payable for Observation or Mental Health confinements.

\*\* Hospital Confinement Daily Benefit = This represents the cash benefit payable to you for each day you are confined to a hospital as an inpatient, up to 31 days per period of confinement. Multiple hospital stays will accumulate toward your day count. Once you have been out of the hospital for 60 days in a row, your available number of days resets to 31 days.

\*\*\* Hospital Observation Benefit = up to 6 days per calendar year. This benefit is paid in lieu of the Hospital Confinement Benefit.

\*\*\*\* Mental Health Confinement Benefit = up to 7 days per calendar year. This benefit is not payable on the same day as the Hospital Confinement Benefit or the Hospital Observation Benefit.

HOW IT WORKS:

BENEFIT PAYOUT EXAMPLE

If you select the Simplified Underwriting (Option 1) plan, and are admitted to a hospital as an inpatient, we will pay you a Lump Sum Hospital Admission Benefit of \$1,000, plus a Hospital Confinement Daily Benefit of \$50 for each day of your hospital stay, up to 31 days per period of confinement.

*Example:* Sam selects the Simplified Underwriting (Option 1) plan and is later hospitalized for 10 days after back surgery. Upon discharge, Sam’s benefit payout will be **\$1,500**. Sam has 21 days remaining in this period of confinement, which will end once he has been out of the hospital for 60 days in a row.

Hospital Confinement Daily Benefit	X	Days in Hospital	+	Lump Sum Hospital Admission Benefit	=	Sam’s Benefit Payout
\$50		10 Days		\$1,000		\$1,500

Limitations or Conditions on Eligibility for Benefits

**Pre-Existing Condition Limitation:** Confinement or Hospital admission caused by a Pre-Existing Condition will not be covered unless it begins more than 6 months after the Policy Effective Date. If coverage for a Spouse/Domestic Partner/ Civil Union Partner or Dependent Child is added to this Policy after the Policy Effective Date, a Pre-Existing Condition for that person will not be covered unless Confinement or Hospital admission begins more than 6 months after the Coverage Change Effective Date.

**Exclusions:** We will not pay benefits for Confinement or Hospital admission due to Injuries received in accidents or for Sicknesses which are caused, directly or indirectly by, or a result of: operating, learning to operate, or serving as a crew member of any aircraft; or war or act of war which is not an act of terrorism, whether declared or undeclared, while serving in the armed forces or any auxiliary unit; or dental work or plastic surgery for cosmetic purposes (this exclusion does not apply if the dental work or surgery is (a) due to an Injury; or (b) to restore normal bodily functions); or elective surgery that is not medically necessary (the medical treatment or services necessary and appropriate for the diagnosis or treatment of Sickness or Injury based upon generally accepted medical practice and prescribed by a Physician); or an attempt at suicide, while sane or insane, or an intentionally self-inflicted injury.

No benefits will be payable under this Policy for Confinement or Hospital admission due to: a normal pregnancy, except for any Complication of Pregnancy, or services provided outside the United States of America, its territories or possessions, or Canada.

**Intoxicants and Narcotics:** We will not be liable for any loss sustained or contracted in consequence of a Covered Person being intoxicated or under the influence of any narcotic unless administered on the advice of a Physician.

**Illegal Occupation:** We will not be liable for any loss to which a contributing cause was a Covered Person’s commission of or attempt to commit a felony or to which a contributing cause was the Covered Person’s engagement in an illegal occupation.

THIS IS A LIMITED BENEFIT POLICY.



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