

Plan-at-a-Glance

Hospital Recovery Insurance | Pennsylvania

Affordable insurance to assist in your recovery after an inpatient hospital stay.

Your medical plan provides benefits to help with medical costs during a hospital stay. Once you leave the hospital, you shouldn't have to worry about financial setbacks that you didn't expect during your recovery. Things like lost wages plus the cost for help with transportation, meals, child care, or even housekeeping can all add up. Hospital Recovery Insurance provides cash benefits regardless of any other insurance you have.

By pairing it with your medical plan, you can extend your protection to help with those unexpected costs so you can focus on your recovery.

Standard Features

Eligible Issue Ages: 18 through 74

Daily Benefit Amount: You choose an amount between **\$100** and **\$900**, in \$10 increments.

The Daily Benefit Amount represents the amount payable to you upon discharge for each day you or a covered family member is confined as an inpatient. The Daily Benefit Amount is per covered family member.

Benefit Payout: Upon discharge from a qualified inpatient hospital stay, we will pay a cash benefit to you as illustrated in the example below.

*A Benefit Example**

Tom chooses a Daily Benefit Amount of **\$500**. He is later hospitalized for 4 days. Upon discharge, Tom's benefit payout will be **\$2,000**.

Daily Benefit Amount	X	# Days in Hospital	=	Tom's Hospital Recovery Benefit Payout
\$500		4 Days		\$2,000

You can receive up to 31 days of benefits for inpatient hospitalizations caused by the same or a related condition.

If you are hospitalized for fewer than 31 days, and later readmitted to the hospital for the same (or a related) cause within 30 days of your hospital discharge, you'll be eligible to receive benefits for each additional day hospitalized until you reach 31 days for the same condition. A new hospital admission for a different cause must begin at least 30 days after the discharge of a previously covered hospitalization in order to be eligible for benefits.

Optional Benefits

Optional Benefit riders offer additional protection against other expenses you might face. You may add one or more of the benefits listed below to your Hospital Recovery Insurance policy for an additional premium. These benefits are payable in addition to the policy's Daily Benefit Amount.

Emergency Room & Ambulance Benefit:

Emergency Room visit (*one per calendar year*): **\$300 Benefit Payout***

Ambulance Services (*one per calendar year*):

- Ground transportation: **\$150 Benefit Payout***; or
- Air transportation: **\$500 Benefit Payout***

Major Diagnostic Exam Benefit:

\$500 Benefit Payout* for a major diagnostic exam (*one per calendar year*):

- Computerized Tomography (CT); or
- Magnetic Resonance Imaging (MRI); or
- Electroencephalogram (EEG)

Rehabilitation Facility Benefit:

\$100 Benefit Payout* for each day in a rehabilitation facility, immediately following a qualified hospital stay (up to 15 days per calendar year).

* *Available per covered family member*

Limitations or Conditions on Eligibility for Benefits

Pre-Existing Condition Limitation: Care or treatment caused by a Pre-Existing Condition that occurred within 12 months prior to the policy effective date will not be covered unless it occurs more than 6 months after the Policy effective date.

Exclusions: No benefits will be payable under this Policy for a Sickness or Injury that was directly or indirectly a result of: 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, parasailing or any similar activities; 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 an act of war whether declared or undeclared while on active duty as a member of the armed forces of any nation; voluntarily participating in or attempting to participate in an illegal activity that is classified as a felony, whether charged or not (the term felony is as defined by the law of the jurisdiction in which the activity takes place); or dental treatment or plastic surgery for cosmetic purposes (this exclusion does not apply if the treatment or surgery is (a) due to an Injury; or (b) to restore normal bodily functions); or for the first 6 months after the Policy Effective Date, Elective surgery that is not Medically Necessary; normal pregnancy, except for Complications of Pregnancy; or an illness, treatment or medical condition that results from an attempt at suicide or an intentionally self-inflicted injury; or any loss sustained or contracted in consequence of the Insured's being intoxicated, or under the influence of any narcotic unless administered on the advice of a physician.

No benefits will be payable under this Policy for expenses or treatment: of a mental or nervous disorder or disease; or for alcoholism or drug addiction; or for care or services provided outside the United States of America, its territories or possessions, or Canada; or not due to an Injury or Sickness.

THIS IS A LIMITED BENEFIT POLICY. This policy is guaranteed renewable to age 75.

For more information, contact your agent or visit us at YourLifeSecure.com

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