



Plan-at-a-Glance

Hospital Recovery Insurance | Washington

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 – up to 30 days per calendar year. The Daily Benefit Amount is per covered family member.

Annual Benefit Bank Amount:

The Annual Benefit Bank is the total dollar amount available to you and your covered family members per calendar year, and is equal to your Daily Benefit Amount multiplied by 30. The Annual Benefit Bank Amount is per covered family member. On Jan. 1 of each year, the Annual Benefit Bank will replenish to its full amount.

For example, a \$500 Daily Benefit Amount would give you and each covered family member Annual Benefit Banks of \$15,000.

Daily Benefit Amount	X	Maximum Days	=	Annual Benefit Bank
\$500		30 Days		\$15,000

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**, which provides an Annual Benefit Bank of **\$15,000**. 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

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 and Annual Benefit Bank.

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 begins 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 an illness, treatment or medical condition that is due to 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 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 elective surgery that is not medically necessary; or normal pregnancy, except for complications of pregnancy; or an illness, treatment or medical condition that results from an attempt at suicide, while sane or insane, or an intentionally self-inflicted injury.

No benefits will be payable under this Policy for expenses or treatment of: a mental or nervous disorder or disease; or alcoholism or drug addiction; or care or services provided outside the United States of America, its territories or possessions, or Canada.

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](https://www.YourLifeSecure.com)

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