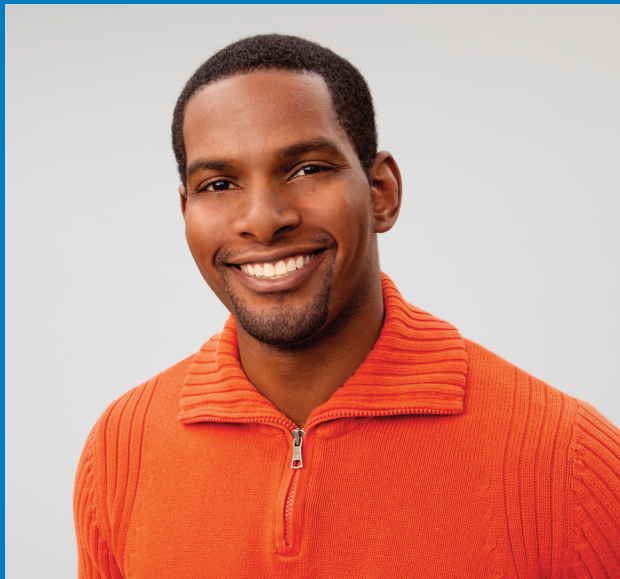


Hospital Recovery Insurance



Recover with less worry.

LifeSecure Insurance Company



**Affordable insurance to assist in
your recovery after a hospital stay.**

Approximately 1 in 10 (9.7%) Americans ages 45 to 64, and nearly 1 in 5 (18.9%) ages 65 and older, experience a hospital stay during a one-year period.¹

Over the past two decades, hospital stays have become shorter as patients are sent home earlier to complete their recovery. From 1993 to 2008, average hospital stays decreased by about 20% – from 5.7 days to 4.6 days.²

A shorter hospital stay may mean additional out-of-pocket expenses, which are not typically covered by most health plans.

^{1, 2} Weighted national estimates from HCUP NIS, 2008, AHRQ, based on data collected by individual States and provided to AHRQ by the States. U.S. Population figure from Census Bureau website, July 2010

The **benefits are paid directly to you**, or someone designated by you, upon discharge from the hospital. Whether you need rehabilitative services or assistance around the house, this plan provides benefits to help you pay for the services and resources you want.

How might you use your Hospital Recovery benefits? You decide!

- Home care assistance
- Rehabilitative services
- Child care
- Housekeeping help
- Uncovered medical expenses
- Lost wages while away from work
- Transportation to/from appointments
- Yard work
- *Anything else!*



**You choose a Daily Benefit Amount,
that's all!**

**No confusing riders or options –
just one straightforward insurance plan.**

Choose your Daily Benefit Amount (any amount between \$100 and \$999)

Your **Daily Benefit Amount** represents the amount payable to you upon discharge for each day you are hospitalized as an inpatient (up to a maximum of 15 days per calendar year).

Your **Annual Benefit Bank** is the total dollar amount available to you per calendar year, and is equal to your Daily Benefit Amount multiplied by 15. On January 1st of each year, your Annual Benefit Bank will replenish to its full amount.

THIS POLICY PROVIDES LIMITED BENEFITS.

For example, a \$500 Daily Benefit Amount would give you an Annual Benefit Bank of \$7,500.

Daily Benefit Amount		# Days	Annual Benefit Bank	
\$500	X	15	=	\$7,500

Choosing a plan is simple. And our **Budget-Point PricingSM** tool can help you determine the size of your Daily Benefit 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 Hospital Recovery plan design that best fits your budget.

Try it at **www.YourLifeSecure.com**.

How is your Benefit Payout calculated?

LifeSecure will pay a benefit directly to you, or someone designated by you, based on the number of days spent in the hospital.

Calculating your Benefit Payout is easy! Just multiply your Daily Benefit Amount by the number of days spent in the hospital (1–15 days).

A Claim Example

Jane Doe – Hospitalized for Hip Replacement Surgery

- What Daily Benefit Amount did Jane select? \$500
- How much is her Annual Benefit Bank? \$7,500
- How long was her hospital stay? 4 days
- How much will she receive? **\$2,000**

Daily Benefit Amount		# Days	Benefit Payout	
\$500	X	4	=	\$2,000

- What is Jane's remaining Benefit Bank balance? **\$5,500**

Annual Benefit Bank	Benefit Payout	Remaining Benefit Bank Balance*	
\$7,500	- \$2,000	=	\$5,500
*available through end of calendar year			

Jane's Annual Benefit Bank will replenish to the full amount of \$7,500 on January 1st of each year.

Monthly Premium Rates

Sample Daily Benefit Amounts

Age		\$ 100	\$ 200	\$ 500	\$ 999
	20	\$10.76	\$12.52	\$17.81	\$26.60
	25	\$11.05	\$13.10	\$19.25	\$29.47
	30	\$11.34	\$13.67	\$20.68	\$32.34
	35	\$11.70	\$14.40	\$22.49	\$35.96
	40	\$12.19	\$15.37	\$24.93	\$40.83
	45	\$12.89	\$16.77	\$28.43	\$47.82
	50	\$13.97	\$18.95	\$33.87	\$58.68
	55	\$15.61	\$22.22	\$42.05	\$75.03
	60	\$18.15	\$27.29	\$54.73	\$100.37
	65	\$21.76	\$34.51	\$72.79	\$136.45

Hospital Recovery Insurance

To view monthly premiums for different Daily Benefit Amounts and/or ages, visit www.YourLifeSecure.com and click on Quote Calculator.

Talk to your agent today, call us at **1.866.582.7701**, or visit us on-line for more information.

Limitations and Exclusions

No benefits will be payable under this policy for confinement in a hospital for a sickness or injury that was directly or indirectly (IL residents – directly) a result of:

- operating, learning to operate, or serving as a crew member of any aircraft; or
- engaging in hazardous activities; 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 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
- participating in (AK, AL, DC, IN, LA, MI, NM, SD, TN & UT residents – 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 (CO & MO residents – while sane), or an intentionally self-inflicted injury (SD residents – an illness, treatment or medical condition that results from an attempt at suicide or self-inflicted injuries); or
- expenses for treatment for a mental or nervous disorder or disease; or
- being intoxicated or under the influence of alcohol, drugs or any narcotic (AL & LA residents – being intoxicated or under the influence of any narcotic) unless administered on the advice and instructions of a licensed health care provider (SD residents – not applicable); or
- care or services provided outside the United States of America, its territories or possessions, or Canada.

Any pre-existing condition as defined in the policy that occurred within the 12 month (NM, NV & WY residents – 6 month) period before the policy effective date will not be covered for the first 6 months after the policy effective date.

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