

Lump Sum Hospital Confinement Indemnity Coverage **Metal Gap Plan**

Cash benefits to help cover expenses ... left by your health insurance.





Cash benefits paid directly to you, not your doctor or hospital.

SureBridge insurance products provide an added layer of coverage designed to fill financial gaps left by your health plan coverage. They **help you manage out-of-pocket expenses such as deductibles, coinsurance and co-payments**. This type of coverage is especially important to those who may have health insurance plans with lower premiums but higher out-of-pocket expenses.

The Metal Gap plan comes in three benefit levels that help **complement the Bronze, Silver, and Gold Affordable Care Act (ACA) plans**.

Applying is simple and can be completed in minutes.

THIS POLICY PROVIDES LIMITED BENEFITS. This type of plan is a supplement to health insurance and is not considered "minimum essential coverage" under the Affordable Care Act and therefore a Lump Sum Hospital Confinement Indemnity Insurance Policy does not satisfy the individual mandate that you have health insurance coverage. If you do not have other health insurance coverage, you may be subject to a tax penalty.

Metal Gap at a Glance



Pays a lump-sum cash benefit even if benefits are also paid under Workers' Compensation¹:

- **\$6,000** for hospital confinement

Helps fill the gaps left by Bronze, Silver and Gold level ACA compliant health insurance plans

Cash benefits can be used for:



Co-pays or co-insurance



Rent/mortgage



Car payments



Child care



Everyday living expenses



Did You Know?

43% of those with private insurance said their deductible was either **difficult or impossible to afford.**²

This is an outline only and is not intended to serve as a legal interpretation of benefits. Reasonable effort has been made to have this outline represent the intent of contract language. However, the contract language stands alone and the complete terms of the coverage will be determined by the policy. Rates may vary by current date. The information contained herein is accurate at the time of publication. For a complete listing of benefits, exclusions and limitations, please refer to your Policy. In the event of any discrepancies contained in this brochure, the terms and conditions contained in the Policy documents shall govern. A Lump Sum Hospital Confinement Indemnity Insurance Policy, Form CH-26127-IP (03/15) (1) KS. | ¹ Benefits are not coordinated with Workers' Compensation. Exclusions & Limitations and Policy provisions may apply. | ² InsuranceNewsNet Magazine, March 2015 issue. Magazine source: The Commonwealth Fund



A Metal Gap plan from SureBridge helps by providing **cash benefits**. The money is **paid directly to you**, not the hospital, and can be **used for anything you choose**. It's your money, your decision.

| METAL GAP BENEFITS | | | |
|---------------------------------|--|--|--|
| Designed to coordinate with: | | | |
| Benefits | | | |
| Hospital Confinement (Lump Sum) | | | |

Maximum benefit per person, in a calendar year, is equal to the Hospital Confinement benefit. Maximum benefit per family, in a calendar year, is equal to 2 times the Hospital Confinement benefit. | ¹ Subject to a 30-day waiting period for sickness; 0 days for injury.

| MONTHLY PREMIUMS | | | |
|-------------------------------------|---------|---------|---------|
| 30 Year Old Non-Tobacco Male | \$9.27 | \$18.54 | \$27.81 |
| 30 Year Old Tobacco Male | \$11.12 | \$22.25 | \$33.37 |
| 30 Year Old Non-Tobacco Female | \$16.99 | \$33.99 | \$50.98 |
| 30 Year Old Tobacco Female | \$20.39 | \$40.79 | \$61.18 |
| 45 Year Old Non-Tobacco Male | \$15.59 | \$31.18 | \$46.76 |
| 45 Year Old Tobacco Male | \$18.71 | \$37.42 | \$56.11 |
| 45 Year Old Non-Tobacco Female | \$19.17 | \$38.33 | \$57.50 |
| 45 Year Old Tobacco Female | \$23.00 | \$46.00 | \$69.00 |
| Dependent Child (0-17 years of age) | \$17.79 | \$35.59 | \$53.38 |

The chart above is only an illustration of premium options. Sample rates are based on zip code 66605. Premiums may vary by current date.

Notice to Our Customers About Supplemental Insurance

- The supplemental plan discussed in this document is separate from any health insurance coverage you may have purchased with another insurance company.
- This plan provides optional coverage for an additional premium. It is intended to supplement your health insurance and provide additional benefits for covered expenses.
- This plan is not required in order to purchase health insurance with another insurance company.
- This plan should not be used as a substitute for comprehensive health insurance coverage. It is not considered Minimum Essential Coverage under the Affordable Care Act.



Other Important Information

Definitions (See Policy for Other Important Definitions):

- **Confined/Confinement** means an insured person's admission to and subsequent continued stay in a hospital for which a daily charge for room and board is made for each day of confinement with no discharge or interruption in such hospital stay.
- **Hospital** means an institution operated pursuant to its license for the care and treatment of sick and injured persons for which a charge is made that the insured person is legally obligated to pay. The institution must: (1) Maintain on its premises organized facilities for medical, diagnostic and surgical care for sick and injured persons on an inpatient basis; (2) Maintain a staff of one or more duly licensed physicians; (3) Provide 24 hour nursing care by or under the supervision of a registered graduate professional nurse (R.N.); and (4) Be accredited as a hospital by the Joint Commission on Accreditation of Hospitals.
- **Injury** means bodily harm caused by an accident resulting in unforeseen trauma requiring immediate medical attention and is not contributed to, directly or indirectly, by a sickness.
- **Pre-Existing Condition** means a medical condition, sickness or injury not excluded by name or specific description for which: (1) Medical advice, consultation, or treatment was recommended by or received from a medical practitioner acting within the scope of his or her license, within the one year period before the effective date of coverage; or (2) Symptoms existed which would cause an ordinarily prudent person to seek diagnosis, care or treatment within the one year period before the effective date of coverage.
- **Sickness** means an illness or disease.
- **Waiting Period** means the consecutive period of time beginning from the effective date of coverage in which an insured person must be insured under the Policy before benefits are payable.

Other Important Information (continued)

Coverage Information:

- **COVERAGE BEGINS:** Once Chesapeake has approved your application and you have paid your premium, coverage will begin on the Policy date shown in the Policy schedule.
- **RENEWABILITY:** Your Policy is conditionally renewable to age 65, subject to Chesapeake's right to discontinue or terminate the coverage as provided in the Termination of Coverage section of the Policy.
- **PREMIUM CHANGES:** Chesapeake reserves the right to change the table of premiums, on a class basis, becoming due under the Policy at any time and from time to time; provided, Chesapeake has given you written notice of at least 31 days prior to the effective date of the new rates. The premium for the Policy may change in amount by reason of an increase in the attained age of the insured person.
- **TERMINATION OF COVERAGE:** Your coverage will terminate and no benefits will be payable under the Policy: At the end of the period for which premium has been paid (subject to the grace period) | On the date you reach age 65 | On the date of fraud or material misrepresentation by you | On the date Chesapeake elects to discontinue this plan or type of coverage or all coverage in your state | On the date an insured person is no longer a permanent resident of the United States.

Cancellation by Insured Person: You may cancel this Policy at any time by written notice delivered or mailed to Chesapeake, effective upon receipt of such notice on or on such late date as may be specified in such notice. In the event of cancellation, Chesapeake will promptly return the unearned portion of any premium paid. The earned premium shall be computed by the use of the pro-rata method. Cancellation shall be without prejudice to any claim origination prior to the effective date of cancellation.

Other Important Information (continued)

EXCLUSIONS AND LIMITATIONS

We will not provide any benefits for loss caused by, resulting from, or in connection with:

Any care or benefits which are not specifically provided for in the Policy | Any act of war, declared or undeclared | Active military duty in the service of any country | Participation in a riot, civil commotion or insurrection | Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane | Mental or Nervous Disorders | Mandibular or maxillofacial surgery to correct growth defects after one year from the date of birth, jaw disproportions or malocclusions, or to increase vertical dimension or reconstruct occlusion | Weight loss or modification, or complications arising therefrom, or procedures resulting therefrom, or for surgical treatment of obesity, including wiring of the teeth and all forms of surgery performed for the purpose of weight loss or modification | Breast reduction or augmentation unless necessary in connection with breast reconstructive surgery following a mastectomy performed while insured under the Policy | Modification of the physical body in order to improve the psychological mental or emotional well-being of the insured person, such as sex-change surgery | Payment for care for military service connected disabilities for which the insured person is legally entitled to services and for which facilities are reasonably available to the insured person and payment for care for conditions that state or local law requires be treated in a public facility | Experimental or investigational medicine | Any treatment or procedure that either promotes or prevents conception or prevents childbirth, including but not limited to: (a) artificial insemination; (b) in-vitro fertilization or other treatment for infertility; (c) treatment for impotency; (d) sterilization or reversal of sterilization; or (e) abortion (unless the life of the mother would be endangered if the fetus were carried to term), unless otherwise stated in the Policy | Cosmetic surgery | Radial keratotomy or any eye surgery when the primary purpose is to correct nearsightedness, farsightedness, astigmatism, or any other refractive error | Operating any motorized passenger vehicle for wage, compensation or profit | Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly, unless taken as prescribed by a physician

Other Important Information (continued)

EXCLUSIONS AND LIMITATIONS

We will not provide any benefits for loss caused by, resulting from, or in connection with:

An overdose of drugs, being intoxicated or under the influence of intoxicants, hallucinogens, narcotics or other drugs, directly or indirectly, unless taken as prescribed by a physician | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated | Committing or trying to commit a felony | Normal pregnancy, except for complications of pregnancy while hospital confined | Hospital confinement for routine or normal newborn child care | Mountaineering using ropes and/or other equipment, parachuting, hang gliding, racing any type of vehicle in an organized or unorganized event, sky diving, scuba diving below 130 feet, motorized racing, parasailing, experimental aviation, ultra-light flying, base jumping, bungee jumping, heli-skiing or heli-snowboarding | Travel in or descent from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline certified by the U.S. Federal Aviation Administration (FAA), on a regularly scheduled passenger trip | Care received outside of the United States.

Pre-Existing Condition Limitation: Chesapeake will not provide benefits for any loss resulting from a pre-existing condition, as defined in the Policy, unless the loss is incurred at least one year after the effective date of coverage for an insured person.



About Us

SureBridge is one of the leading brands of supplemental insurance coverage in the United States, helping to provide financial security for Americans of all ages and their families. Our comprehensive portfolio of products is available from licensed insurance agents in 46 states and the District of Columbia and is available through HealthMarkets Insurance Agency Inc., as well as through other unaffiliated insurance distributors. SureBridge policyholders can receive direct cash benefits for expenses caused by unexpected medical issues, sustained illnesses, and end-of-life challenges.

The SureBridge portfolio includes dental, vision, and other insurance plans that complement an individual's health insurance. These plans help provide an additional layer of protection in the event of accidental injury, catastrophic illness, hospitalization, or cancer.

SureBridge® is a registered trademark used for both insurance and non-insurance products offered by subsidiaries of HealthMarkets, Inc. Supplemental insurance products are underwritten by The Chesapeake Life Insurance Company®. Administrative offices are located in North Richland Hills, TX. Products are marketed through independent agents/producers. Insurance product availability may vary by state.

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Navigate Life's Twists & Turns

with the SureBridge portfolio of
supplemental insurance products

**Accident | Dental | Disability | Fixed Indemnity
Illness | Metal Gap | Vision**



SureBridge®
Underwritten by
The Chesapeake Life Insurance Company®

SureBridgeInsurance.com
(800) 815-8535

Weekdays 8:00 a.m. to 5:00 p.m. in all time zones