

# Income Protection Coverage

# **Income Protection Direct**

Cash benefits to help cover expenses ... during times of total disability.





## What is Income Protection?

Most people insure their material possessions but few think to insure their most valuable asset - their ability to earn income.

The **Income Protection Direct** plan provides the **important extra layer of financial protection you need**. The money can be used to **pay unexpected medical costs or everyday living expenses**.

**Applying is simple and can be completed in minutes.**

### Income Protection Direct At a Glance



Pays up to a \$2,500 monthly cash benefit for a physician-verified period of total disability caused by sickness or injury



Waiver of Premium benefit included



Benefits are paid directly to you - not your doctor or hospital



Affordable premiums that do not increase as you get older with coverage starting at \$12.06 per month<sup>1</sup>

<sup>1</sup> 30 year old white collar male at \$1,000 monthly benefit level with a benefit period of 12 months and an elimination period of 30 days.



## Cash Benefits Can be Used For



Co-pays or co-insurance



Rent/mortgage



Car payments



Child care



Everyday living expenses



## Did You Know?

# 78% of workers

say they could not cover normal living expenses if they missed a paycheck.<sup>1</sup>

<sup>1</sup>Forbes, 78% of Workers Live Paycheck to Paycheck, 2019.

## How Does the Coverage Work?

Pays a monthly cash benefit during times of total disability due to a sickness or injury.

**Available Benefit Options:** \$500<sup>1</sup>, \$1,000, \$1,500, \$2,000 and \$2,500. Benefit cannot exceed 60% of your prior monthly income.

Medical advice, consultation or treatment must commence within 30 days of the sickness or injury which caused your total disability.

**Waiver of Premium Benefit:** After a period of 90 consecutive days of total disability, this additional benefit waives the monthly premium, up to the maximum period payable, with no interruption in coverage. Premium payments must resume within 31 days of the expiration of the waiver of premium benefit to continue coverage.

**Maximum Period Payable Options:** 12 or 24 months

**Elimination Period Options:** 14, 30, 60 or 90 days

### Monthly Premiums (white collar worker)

	\$500 <sup>1</sup>		\$1,000		\$1,500		\$2,000		\$2,500	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
30 Year Old	\$3.81	\$5.29	\$12.06	\$16.74	\$18.61	\$25.82	\$25.36	\$35.19	\$32.31	\$44.83
45 Year Old	\$5.53	\$6.85	\$17.50	\$21.68	\$26.99	\$33.44	\$36.78	\$45.57	\$46.87	\$58.06

### Monthly Premiums (blue collar worker)

	\$500 <sup>1</sup>		\$1,000		\$1,500		\$2,000		\$2,500	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
30 Year Old	\$9.49	\$13.17	\$30.03	\$41.67	\$46.31	\$64.27	\$63.11	\$87.57	\$80.41	\$111.59
45 Year Old	\$13.77	\$17.06	\$43.56	\$53.96	\$67.18	\$83.23	\$91.54	\$113.42	\$116.64	\$144.52

The charts above are only illustrations of benefit and premium options per covered person for plans with a 30 day elimination period and 12 month benefit period. As defined by the American Academy of Actuaries, "blue collar" refers to union and hourly workers. All other workers are classified as "white collar." <sup>1</sup>This benefit level is guaranteed acceptance regardless of health or medical history; subject to eligibility requirements and pre-existing condition limitations; rates shown are for 90 day elimination period and 12 month benefit period

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. Benefits and rates may vary by state and 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 Disability Income Insurance Policy, Form CH-26115-IP (01/10) KY (05/11).



## 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):

- **Actively at Work** means working on a permanent basis at least 25 hours per week for wage or salary; and performing the material and substantial duties of a regular job or any other job for which the insured is qualified by reason of education, training or experience.
- **Elimination Period** means the consecutive period of time beginning from the date on which you are considered totally disabled before the monthly indemnity benefit is payable. The elimination period is shown in the Policy schedule of benefits.
- **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. The injury must first occur after your coverage has become effective and while the coverage is in force.
- **Pre-Existing Condition** means a sickness 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 two-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 two-year period before the effective date of coverage.
- **Sickness** means an illness or disease.
- **Total Disability or Totally Disabled** means that, due to a sickness or injury, you are: 1) under a legally qualified physician's care; and 2) not in fact actively at work, as certified by a legally qualified physician upon our request.

## EXCLUSIONS AND LIMITATIONS

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

Injuries that do not first occur while the Policy is in force for the insured person | 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 | Having cosmetic surgery | Experimental or investigational medicine | 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 legally qualified physician.

## Other Important Information (continued)

### EXCLUSIONS AND LIMITATIONS (continued)

#### 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 legally qualified physician | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated | Committing or trying to commit a felony | Pregnancy and childbirth | 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 (other than a charter airline) certified by the U.S. Federal Aviation Administration (FAA) on a regularly scheduled passenger trip.

**Right of Inspection:** We may require information regarding pre-tax personal income, allowable business expenses, and other plans, including income tax returns, for periods before and after the start of a period of total disability. Failure to provide such information may result in disqualification for benefit payment under the Policy. Benefits are subject to coordination with other compensation.

**Pre-Existing Condition:** We will not provide benefits for any loss resulting from a pre-existing condition, as defined, unless the loss is incurred at least one-year after your effective date of coverage.

#### 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, however, the premium table will not be increased within 12 months from date of issue or date of renewal. The premium for the Policy may also change in amount by reason of a change in occupation, the insured person's change in geographic location or an increase in the Policy benefit level. If Chesapeake changes the premiums, we will give the insured person written notice of at least 31 days prior to the effective date of the new rates.
- **TERMINATION OF COVERAGE:** Your coverage will terminate and no benefits will be payable under the Policy: At the end of the month for which premium has been paid, except as provided in the Waiver of Premium provision, subject to the grace period | At the end of the month following the date of our receipt of your request of termination | On the date of fraud or intentional misrepresentation of material fact under the terms of the Policy by you | On the date we elect 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 | On the date you reach age 65 | Premium will be refunded for any unearned premium paid beyond the termination date.



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