



Complete Direct Bundle

Cash to help cover expenses while you are recovering from illness or injury

DID YOU KNOW?

Critical illness costs cause more than

60%

of all bankruptcies.¹

Cash benefits can be used for:

- Co-pays or co-insurance
- Rent/mortgage
- Car payments
- Child care
- Everyday living expenses

When **serious accidents and illness** occur, the cost of care and recovery can quickly **impact your financial stability**. The **Complete Direct Bundle** combines selected benefit levels from our most popular injury, illness and disability plans to help provide **the money you need during your recovery**. The money can be used to **pay unexpected medical costs or everyday living expenses**.

Applying is simple and can be completed in minutes.

Complete Direct Bundle At A Glance

- Coverage for every member of your family
- Pays up to a:
 - **\$10,000 lump-sum cash benefit** based on the number of days of hospital confinement resulting from injuries
 - **\$500 monthly cash benefit** for periods of total disability
 - **\$5,000 lump-sum cash benefit** upon a first diagnosis of a qualified critical illness
 - **\$250 daily cash benefit** for hospital confinement
- 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 \$32³⁴ per month²**

Cash benefits paid directly to you. Apply today!

¹ Clinical Research Study. Harvard University, 16 March 2011. www.pnhp.org/new_bankruptcy_study/Bankruptcy-2009.pdf | ² 30 year old female, white collar, non-tobacco. CH COM DIR BUN B 315

Complete Direct Bundle



Make sure you are protected with other popular SureBridge products:



Simplified Issue Term Life



Dental



Vision

DESCRIPTION	BENEFIT		
<p>Accident Direct: An accidental injury only insurance Policy which pays a lump-sum cash benefit based on number of days of hospital confinement resulting from injuries caused by an accident. Confinement must begin within 45 days of the injury. Injury must first occur after the Policy is in force. Benefits renew annually.</p> <p>14+ days: 100% of benefit 7 – 13 days: 60% of benefit 3 – 6 days: 30% of benefit 1 – 2 days: 15% of benefit, surgery required Common Accident benefit when two or more covered persons are injured in same accident.</p> <p style="text-align: right;">CH-26118-IP (01/10), or its state variation</p>	<p>\$10,000 lump-sum</p>		
<p>Income Protection Direct: A disability income insurance Policy which pays a monthly cash benefit during times of total disability due to an illness or injury. Medical advice, consultation or treatment must commence within 30 days of the illness or Injury which caused your total disability. Benefit cannot exceed 60% of gross monthly earnings.</p> <p>Maximum Period Payable: 24 months Elimination Period: 30 days</p> <p style="text-align: right;">CH-26115-IP (01/10), or its state variation</p>	<p>\$500 monthly</p>		
<p>Critical Illness Direct: A specified disease/condition and major organ transplant Policy which pays a lump-sum cash benefit upon a first diagnosis of the qualified event or diagnosis listed below. Subject to a 30-day waiting period.¹ Benefits reduce 50% at age 70.</p> <p>Diagnosis paid at 100%: Advanced Alzheimer's, ALS, life-threatening cancer, coma (illness induced), heart attack, major organ transplant, stroke, end-stage renal failure.</p> <p>Diagnosis paid at 25%: Benign brain tumor, cancer in situ, coronary bypass.</p> <p style="text-align: right;">CH-26113-IP (03/14), or its state variation</p>	<p>\$5,000 lump-sum</p>		
<p>Hospital Confinement Direct: A hospital confinement indemnity insurance Policy which provides a daily cash benefit on confinement to hospital due to illness or injury. Subject to a 30-day waiting period for illness and a 365 day lifetime maximum.</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"> <p>Hospital Confinement Benefit Schedule</p> <ul style="list-style-type: none"> • 1-5 days: 100% of the benefit • 6-10 days: 50% of the benefit • 11-365 days: \$100 per day </td> <td style="width: 50%;"> <p>ICU/CCU Confinement Benefit Schedule (Paid in lieu of Hospital Confinement Benefit)</p> <ul style="list-style-type: none"> • 1-2 days: 200% of the benefit • 3-10 days: 100% of the benefit • 11-30 days: 50% of the benefit • 31-365 days: \$100 per day </td> </tr> </table> <p style="text-align: right;">CH-26116-IP (01/10), or its state variation</p>	<p>Hospital Confinement Benefit Schedule</p> <ul style="list-style-type: none"> • 1-5 days: 100% of the benefit • 6-10 days: 50% of the benefit • 11-365 days: \$100 per day 	<p>ICU/CCU Confinement Benefit Schedule (Paid in lieu of Hospital Confinement Benefit)</p> <ul style="list-style-type: none"> • 1-2 days: 200% of the benefit • 3-10 days: 100% of the benefit • 11-30 days: 50% of the benefit • 31-365 days: \$100 per day 	<p>\$250 daily</p>
<p>Hospital Confinement Benefit Schedule</p> <ul style="list-style-type: none"> • 1-5 days: 100% of the benefit • 6-10 days: 50% of the benefit • 11-365 days: \$100 per day 	<p>ICU/CCU Confinement Benefit Schedule (Paid in lieu of Hospital Confinement Benefit)</p> <ul style="list-style-type: none"> • 1-2 days: 200% of the benefit • 3-10 days: 100% of the benefit • 11-30 days: 50% of the benefit • 31-365 days: \$100 per day 		

MONTHLY PREMIUMS	Male	Female
40 Year Old Non-Tobacco	\$41 ⁴⁴	\$43 ⁵⁴
30 Year Old Non-Tobacco	\$28 ⁹⁹	\$32 ³⁴
Dependent 10 Year Old Child ²	\$6 ⁸³	\$6 ⁹⁷

Apply today for the Complete Direct Bundle and get cash when illness or injuries occur

¹ For MD, all references to Waiting Period are removed; for KS, all references to Waiting Period are removed for Hospital Confinement Direct only | ² Children are not eligible to receive the disability benefit. The information contained herein is accurate at the time of publication. This brochure provides only summary information and the benefits and rates may vary by state. The charts above are only an illustration of benefit and premium options per covered person. This plan is not intended as a replacement for accident and sickness health insurance and should not be construed as such.

COMPLETE DIRECT BUNDLE: OTHER IMPORTANT INFORMATION

Definitions (See Policy(s) for Other Important Definitions):

- **Accidental Injury** means sudden, non-recurrent, traumatic, accidental and unanticipated damage to the body, not of gradual onset requiring immediate medical attention, and not contributed to, directly or indirectly, by a sickness. The accidental injury must first occur after the insured person's coverage has become effective and while the coverage is in force under the Policy.
- **Actively at Work** means working on a permanent basis at least 25 hours per weeks 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.¹
- **Elimination Period** means the consecutive period of time beginning from the date you are considered totally disabled before the monthly benefit is payable.
- **First Diagnosis or First Diagnosed (for Critical Illness Direct)** means a diagnosis, as defined, which initially occurs for the first time in the insured person's lifetime after the waiting period and while the insured person's coverage is in effect under the Policy.
- **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 legally qualified physicians; 3) Provide 24 hour nursing care by or under the supervision of a registered graduate professional nurse (R.N.); and 4) Is accredited as a hospital by the Joint Commission on Accreditation of Hospitals.²
- **Qualifying Event** means one of the diseases, conditions or procedures listed which positive diagnosis is made by a legally qualified physician based on diagnostic criteria generally accepted by the medical profession.
- **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.³

¹TN: revises 'job' to 'gainful occupation' | ²AK: removes last provision for Accident Direct only IA: 1) is revised to 'be operated pursuant to Iowa law,' 2) is revised to 'be primarily and continuously engaged in providing and operating, either on its premises or in facilities available to the hospital on a prearranged basis and under the supervision of a staff of legally qualified physician, medical diagnostic and major surgical facilities for the medical care and treatment of sick or injured person on an inpatient basis for which a charge is made' and 4) is removed entirely LA: adds '5) is owned and operated by the State of Louisiana or any of its political subdivisions' | ³IA: adds 'under a legally qualified physician's care and have been diagnosed with a complication of pregnancy, as defined' MD: provision 1) adds 'such care will not be required if it is determined that such regular care would be of no benefit to you' and provision 2) is revised to read 'during the first 12 months for which benefits are payable and you are unable to perform each and every duty pertaining to your occupation. After the first 12 months, it means you are unable to perform each and every duty of any business or occupation for which the insured person is reasonably fitted by education, training and experience as certified by a legally qualified physician upon our request'.

COMPLETE DIRECT BUNDLE: OTHER IMPORTANT INFORMATION (continued)

Coverage Information:

- **COVERAGE BEGINS:** Chesapeake requires evidence of insurability before coverage is provided. 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 guaranteed renewable to age 65 (age 75 for the Critical Illness Direct), subject to Chesapeake's right to discontinue or terminate coverage as provided in the termination of coverage section of the Policy.¹
- **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. Such change will be on a class basis. The premium for the Policy is based on the issue age of the insured person at the time in which the policy becomes effective.²
- **TERMINATION OF COVERAGE (for Hospital Confinement Direct, Accident Direct and Income Protection Direct):** 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, for Income Protection Direct and Hospital Confinement Direct only)³ | At the end of the month following the date of our receipt of your request of termination | On the date of fraud or material misrepresentation by you⁴ | On the date we elect to discontinue this plan or type of coverage or all coverage in your state⁵ | 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 only be refunded for any full months paid beyond the termination date.
- **TERMINATION OF COVERAGE (for Critical Illness Direct):** 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 the age of 75 | on the date the lifetime maximum benefit amount has been reached | if your mode of premium is monthly, at the end of the period through which premium has been paid following our receipt of your request of termination⁶ | if your mode of premium is other than monthly, upon the next monthly anniversary day following our receipt of your request of termination. Premium will be refunded for any amounts paid beyond the termination date | On the date of fraud or material misrepresentation by you⁷ | On the date we elect to discontinue this plan or type of coverage or all coverage in your state⁸, or | On the date an insured person is no longer a permanent resident of the United States.

¹IA: revises 'guaranteed renewable to age 65' to 'conditionally renewable to age 65, or Medicare eligibility, whichever occurs first' KS, TN: revises 'guaranteed' to 'conditionally' MD: adds 'or 66 if coverage is issued at the age of 64' after '65' | ²AK: changes '31 days' to '45 days' LA: changes '31 days' to '45 days' and adds 'such rates will not increase more than once each six month period, following the initial twelve-month period' except for Critical Illness Direct, which revises '31 days prior to the effective date of new rates' to read '45 days prior to the effective date of the new rates. Such rates will not be increased during the initial twelve-months of coverage and not more than once in any six-month period following the initial twelve-month period, except for increases in premium amount due to the addition of a newly covered dependent or a change in age or geographic location of an insured person or an increase in the Policy benefit levels. MD: changes '31 days' to '40 days' MS, NM, WI: changes '31 days' to '60 days' | ³AK: adds 'subject to the grace period' for Accident Direct only MD: revises 'except as provided in the Waiver of Premium provision' to 'subject to the Grace Period Provision' | ⁴AL, MD: adds 'subject to the Time Limit on Certain Defenses provision in the General Provisions section' | ⁵RI: for Accident Direct and Income Protection Direct, deleted entirely | ⁶OH: revised to 'on the date we receive your request of termination' | ⁷AL, MD: adds 'subject to the Time Limit on Certain Defenses provision in the General Provisions section' | ⁸AK: adds 'we will give you at least 45 days notice before the date coverage will be discontinued' TN: adds 'laterally' after 'discontinue'.

COMPLETE DIRECT BUNDLE: OTHER IMPORTANT INFORMATION (continued)

EXCLUSIONS AND LIMITATIONS

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

For All Plans: Any act of war, declared or undeclared | Active military duty in the service of any country | Participation in a riot, civil commotion or insurrection¹ | Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane² | Operating any motorized passenger vehicle for wage, compensation or profit (Not applicable Critical Illness Direct) | Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly³ | An overdose of drugs, being intoxicated or under the influence of intoxicants, hallucinogens, narcotics or other drugs, directly or indirectly⁴ | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated⁵ | Committing or trying to commit a felony⁶ | Mountaineering using ropes and/or other equipment, parachuting, hang gliding, officiating or coaching, racing any type of vehicle in an organized or unorganized event, sky diving, scuba diving below 50 feet, motorized racing, para-sailing, experimental aviation, ultra-light flying, base jumping, bungee jumping, heli-skiing or heli-snowboarding (Not applicable Critical Illness Direct)⁷ and | 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 U.S. Federal Aviation Administration (FAA), on a regularly scheduled passenger trip (Not applicable Critical Illness Direct).

For the Hospital Confinement Direct Plan: Any care or benefits which are not specifically provided for in the Policy | 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 Policy⁸ | 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 for 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 medicine⁹ | Any treatment or procedure that either promotes or prevents conception or prevents childbirth, including but not limited to: 1) artificial insemination 2) in-vitro fertilization or other treatment for infertility 3) treatment for impotency 4) sterilization or reversal of sterilization or 5) abortion (unless the life of the mother would be endangered if the fetus were carried to term), unless otherwise stated in the Policy | Cosmetic surgery¹⁰ | Radial keratotomy or any eye surgery when the primary purpose is to correct nearsightedness, farsightedness, astigmatism, or any refractive error | Normal pregnancy, except for complications of pregnancy while hospital confined | Hospital confinement for routine or normal newborn child care.¹¹

For the Accident Direct Plan: Sickness | Pregnancy and childbirth, including routine or normal newborn child care¹² | Any sickness, disease, or other medical condition not the direct result of an accidental injury occurring while the insured person's coverage is in force | Accidental injuries that do not first occur while the Policy is in force for the insured person | Accidental injuries that do not result in a hospital confinement | Mental or nervous disorders | Cosmetic surgery.¹³

¹MD: removed entirely | ²CO, MO: removes 'or insane' MD: removes 'sane or' | ³AL, WY: adds 'unless taken as prescribed by a legally qualified physician' IN: adds 'unless administered on the advice of a legally qualified physician' for Critical Illness Direct only KS: removed entirely for Hospital Confinement Direct and Income Protection Direct only LA: revised to read 'addiction of alcohol, narcotics, or hallucinogens directly or indirectly' except for Critical Illness Direct MD: removed entirely MI: removed entirely for Critical Illness Direct only NE: for Critical Illness Direct only, revises 'drugs, narcotics, or hallucinogens' to 'illegal drugs, or being under the influence of any narcotic unless administered on the advice of a physician' | ⁴AK: for Accident Direct and Income Protection Direct, adds 'unless administered on the advice of a physician' after 'narcotics' AL, WY: adds 'unless taken as prescribed by a legally qualified physician' IN: deleted entirely except for Critical Illness Direct, which adds 'unless administered on the advice of a legally qualified physician' LA: revised to read 'being intoxicated or under the influence of intoxicants, hallucinogens or narcotics directly or indirectly' except for Critical Illness Direct, which adds 'unless administered by a legally qualified physician' MD: removed entirely MI: removed entirely for Critical Illness Direct only NE: for Critical Illness Direct only, revises 'intoxicants, hallucinogens, narcotics, or other drugs' to any narcotic unless administered on the advice of a physician' TN: adds 'for alcohol intoxication this means over the legal limit of .08' after 'intoxicants'; Critical Illness Direct also adds 'unless administered on the advice of a physician' after 'narcotics or other drugs' | ⁵IA: removes 'or your being incarcerated' for Hospital Confinement Direct and Critical Illness Direct only MD: removed entirely MO: removes 'or your being incarcerated' NE: revised to read 'engaging in an illegal occupation' and makes 'your being incarcerated' a separate exclusion for Critical Illness Direct only | ⁶MD: removed entirely | ⁷IA: revised to 'aviation, including experimental aviation, or ultra-light flying' | ⁸IN: removes 'performed while insured under the Policy' | ⁹MD: adds 'when the treating physician determines that the treatment is experimental or investigational medicine' | ¹⁰MD: adds 'when the treating physician determines that the treatment is cosmetic' | ¹¹KS: adds 'except if added by rider' | ¹²TN: adds 'except for complications of pregnancy' | ¹³MD: adds 'when the treating physician determines that the treatment is cosmetic'.

COMPLETE DIRECT BUNDLE: OTHER IMPORTANT INFORMATION (continued)

EXCLUSIONS AND LIMITATIONS (continued)

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

For the Critical Illness Direct Plan: An injury or accident | Any care or benefits which are not specifically provided for in the Policy | 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 medicine¹ | Intentionally medically induced qualifying event, except in the case of a major organ transplant | Cosmetic surgery² | The first diagnosis of a qualifying event, which occurs within the waiting period as specified in the Policy schedule of benefits³ | Any qualifying event caused directly or indirectly by Acquired Immune Deficiency Syndrome (AIDS) or AIDS related complex⁴ | Any condition that is not diagnosed as a qualifying event as defined in the Policy | Loss resulting from any other disease, sickness or incapacity, other than loss resulting from a qualifying event, as defined in the Policy. This includes any other disease or incapacity which may have been complicated or directly or indirectly affected or caused by a qualifying event or as a result of treatment of a qualifying event, or | Any amounts in excess of the lifetime benefit amount.

Pre-Existing Condition Limitation for Critical Illness Direct: Benefits will not be payable for a qualifying event resulting from a Pre-Existing Condition unless the first diagnosis of such qualifying event occurs more than 12 months after the insured person's effective date of coverage, including the waiting period. A pre-existing condition means a condition, disease, infection, or disorder not excluded by name or specific description for which: 1) medical advice, consultation or treatment was recommended by or received from a legally qualified physician within the two year period before the effective date of coverage; or 2) symptoms existed within the one year period before the effective date of coverage, which would cause an ordinarily prudent person to seek diagnosis, examination, care or treatment.⁵

For the Income Protection Direct Plan: Injuries that do not first occur while the Policy is in force for the insured person⁶ | Mental or nervous disorders | Having cosmetic surgery⁷ | Experimental or investigation medicine | Pregnancy and childbirth.⁸ We may require information regarding pre-tax personal income, allowable business expenses, and other plans 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 Limitations for Hospital Confinement Direct and Income Protection Direct: We will not provide benefits for any loss resulting from a pre-existing condition, unless the loss is incurred at least **one-year** after the effective date of coverage. A pre-existing condition means a medical condition, sickness or injury not excluded for which: 1) medical advice, consultation, or treatment was recommended by or received from a medical practitioner, 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.⁹

¹MD: adds 'when the treating physician determines that the treatment is experimental or investigational medicine' | ²MD: adds 'when the treating physician determines that the treatment is cosmetic' | ³KS: adds '(when the Policy replaces another specified disease policy, we will give credit for the expired portion of any waiting period, elimination period, probationary period or any similar provision. This credit will not exceed that time earned by the insured person under the replaced or previously existing policy. This credit will not be used to place the insured person in a more favorable position than would have been the case had a replacement or additional policy not been issued) MD: removes 'which occurs within the waiting period' MO: removed entirely | ⁴AZ, IA, MD, TN: removed entirely | ⁵MD: revises 'not excluded by name or specific description' to 'that was not revealed in the application for the Policy unless the condition is excluded by means of a signed waiver' NE: removes provision 2) NM: revises '12 months,' 'two year' and 'one year' to '6 month' WY: revises definition to 'a condition, disease, infection, or disorder not excluded by name or specific description for which medical advice, consultation or treatment was recommended by or received from a legally qualified physician within the six month period before the effective date of coverage' | ⁶MD: removed entirely | ⁷MD: revised to read 'any cosmetic surgery or surgical procedure except for disabilities arising directly from unplanned and unanticipated adverse consequences of such surgery' | ⁸KS, TN: adds 'except for complications of pregnancy' | ⁹AL: changes 'two-year' to 'five month' KS: changes 'two year' to 'one year' MD: revises 'sickness or injury not excluded by name or specific condition' to 'that was not revealed in the application for the Policy unless the condition is excluded by means of a signed waiver,' revises 'medical practitioner acting' to 'physician,' removes 'scope of his or her license, within the' and revises both uses of 'two year' to '12 month' MS: changes 'two-year' to 'one-year' WY: revises definition to 'a sickness not excluded by name or specific description for which 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 six month period before the effective date of coverage.'

For use in AK, AL, AR, AZ, CO, DE, IA, IN, KS, LA, MD, MI, MO, MS, NE, OH, RI, TN, WI and WY

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. Forms CH-26118-IP (01/10), CH-26115-IP (01/10), CH-26113-IP (03/14) and CH-26116-IP (01/10), or their state variation.

Navigate life's twists and turns with the SureBridge portfolio of supplemental and life insurance products



Dental



Vision



Accident Direct



Income Protection Direct



Accident Disability Direct



CancerWise®



Critical Illness Direct



Hospital Confinement Direct



Critical Accident Direct



ProtectFit Plus



Accident Companion



Final Expense Whole Life



Simplified Issue Term Life



Fixed Indemnity Direct

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800-815-8535

Weekdays, 8am to 5pm in all time zones

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