



Underwritten by *The Chesapeake Life Insurance Company*

Hospital Confinement Direct



**Manage unexpected hospitalization costs ...
with cash benefits paid directly to you.**

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 protection.
- 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.



SureBridge® is a registered trademark used for both insurance and non-insurance products offered by subsidiaries of HealthMarkets, Inc. Supplemental and life 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.



Hospital Confinement Direct

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

DID YOU KNOW?

More than

\$10,000

was the average cost of
a hospital stay in 2012.¹

Cash benefits can be used for:

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

No matter how good your medical insurance is, if you are hospitalized for an injury or illness there will likely be expenses that aren't covered.

The **Hospital Confinement Direct** plan offers **four budget-friendly benefit level options** that may help to provide **the extra layer of 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.

Hospital Confinement Direct At A Glance

- Pays up to a **\$1,000 daily cash benefit** per hospital confinement resulting from a covered illness or injury even if benefits are also paid under Workers' Compensation²
- Waiver of Premium benefit included
- Benefits paid directly to you - not your doctor or hospital
- Affordable premiums that do not increase as you get older with coverage **starting at \$6⁵⁷ per month³**

¹ Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project (HCUP), National (Nationwide) Inpatient Sample (NIS), 2003, 2008, and 2012. | ² Benefits are not coordinated with Worker's Compensation. Exclusions & Limitations and Policy provisions may apply. For a complete listing of benefits, exclusions and limitations, please refer to your Policy. | ³ 25 year old female at \$500 daily benefit level.

Hospital Confinement Direct

DAILY BENEFITS PER CONFINEMENT

	\$250 ¹	\$500	\$750	\$1,000
Hospital Confinement Benefit²				
• 1 - 5 days: 100% of daily benefit	\$250	\$500	\$750	\$1,000
• 6 - 10 days: 50% of daily benefit	\$125	\$250	\$375	\$500
• 11 - 365 days	\$100 per day	\$100 per day	\$100 per day	\$100 per day

ICU/CCU Confinement Benefit (paid in lieu of Hospital Confinement Benefit)

• 1 - 2 days: 200% of daily benefit	\$500	\$1,000	\$1,500	\$2,000
• 3 - 10 days: 100% of daily benefit	\$250	\$500	\$750	\$1,000
• 11 - 30 days: 50% of daily benefit	\$125	\$250	\$375	\$500
• 31 - 365 days	\$100 per day	\$100 per day	\$100 per day	\$100 per day

WAIVER OF PREMIUM BENEFIT

After a period of hospital confinement for at least 30 consecutive days, 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. Once premiums resume, any new hospital confinements are subject to a 30 day continued confinement without discharge, before premiums are waived.

MONTHLY PREMIUMS

30 Year Old Female	\$5 ²⁴	\$8 ³⁸	\$12 ⁵⁷	\$16 ⁷⁶
30 Year Old Male	\$6 ⁶⁷	\$10 ⁶⁸	\$16 ⁰²	\$21 ³⁶
45 Year Old Female	\$10 ³⁷	\$16 ⁵⁹	\$24 ⁸⁹	\$33 ¹⁸
45 Year Old Male	\$13 ⁴⁵	\$21 ⁵²	\$32 ²⁸	\$43 ⁰⁴

¹ This benefit level is guaranteed acceptance regardless of health or medical history; subject to eligibility requirements.
² Subject to a lifetime maximum of 365 days, per insured person. | The chart above is only an illustration of benefit and premium options per covered person.

This brochure provides only summary information. The information contained herein is accurate at the time of publication. This plan is not intended as a replacement for accident and sickness health insurance and should not be construed as such. 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. This is a Hospital Confinement Indemnity Policy, form CH-26116-IP (01/10) NH (03/14).

THE CHESAPEAKE LIFE INSURANCE COMPANY®

A Stock Company

(Hereinafter called: the Company, We, Our or Us)

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Customer Service: 1-800-815-8535

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HOSPITAL CONFINEMENT INDEMNITY POLICY

THIS POLICY PROVIDES LIMITED BENEFITS

BENEFITS PROVIDED ARE SUPPLEMENTAL AND ARE NOT INTENDED TO COVER ALL MEDICAL EXPENSES

OUTLINE OF COVERAGE FOR POLICY FORM CH-26116-IP (01/10) NH (03/14)

THIS IS NOT A MEDICARE SUPPLEMENT POLICY. If you are eligible for Medicare review the Guide to Health Insurance for People with Medicare available from the company.

- 1. READ YOUR POLICY CAREFULLY** – This outline of coverage provides a very brief description of the important features of Your Policy. This is not the insurance contract and only the actual Policy provisions will control. The Policy itself sets forth, in detail, the rights and obligations of both You and Us. It is, therefore, important that You **READ YOUR POLICY CAREFULLY!**
- 2. HOSPITAL CONFINEMENT INDEMNITY POLICY** – The Hospital Confinement Indemnity plan pays a daily benefit for hospital confinement resulting from a Sickness or Injury. This coverage is NOT intended to cover all medical expenses.
- 3. BENEFITS** - Benefits are payable under the Policy for each day an Insured Person is Hospital Confined due to Sickness or Injury. All benefits are subject to the Lifetime Maximum shown in the POLICY SCHEDULE – SCHEDULE OF BENEFITS, the Daily Benefit Amount shown in the POLICY SCHEDULE – SCHEDULE OF BENEFITS, any benefit limitations shown in the POLICY SCHEDULE – SCHEDULE OF BENEFITS, the Exclusions and Limitations shown below, and all other provisions of the Policy.

LIFETIME MAXIMUM 365 Days

DAILY BENEFIT AMOUNT \$250 \$500 \$750 \$1,000

HOSPITAL CONFINEMENT BENEFIT

Day 1 - 5	100% of the Daily Benefit Amount
Day 6 – 10	50% of the Daily Benefit Amount
Day 11 and over	\$100 per day

INTENSIVE CARE/CARDIAC CARE UNIT CONFINEMENT BENEFIT

(Paid in lieu of Hospital Confinement Benefit)

Day 1 - 2	200% of the Daily Benefit Amount
Day 3 - 10	100% of the Daily Benefit Amount
Day 11 - 30	50% of the Daily Benefit Amount
Day 31 and over	\$100 per day

- 4. EXCLUSIONS AND LIMITATIONS.** We will not provide any benefits for any loss caused by, resulting from or in connection with:

1. Any care or benefits which are not specifically provided for in the Policy;
2. War or act of war, declared or undeclared;
3. Service in the armed forces or units auxiliary to it;
4. Participation in a riot, civil commotion or insurrection;
5. Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane;

6. Mental or Nervous Disorders;
7. Cosmetic surgery, except reconstructive surgery incidental to or following surgery resulting from trauma, infection or other diseases of the involved part, and reconstructive surgery due to a congenital disease or anomaly of a Covered Dependent child that has resulted in a functional defect;
8. Drug abuse or addiction including alcoholism;
9. Committing or trying to commit a felony;
10. Normal pregnancy, except for Complications of Pregnancy while Hospital Confined; and
11. 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.

5. **RENEWAL CONDITIONS.** The Policy is guaranteed renewable to age 65, subject to the Company's right to discontinue or terminate the coverage as provided in the TERMINATION OF COVERAGE section of the Policy. The Company reserves the right to change the applicable table of premium rates on a Class Basis.

**6. TERMINATION OF COVERAGE –
You**

Your coverage will terminate and no benefits will be payable under this Policy:

1. At the end of the month for which premium has been paid, except as provided in the Waiver of Premium provision;
2. On the date You reach age 65;
3. At the end of the month following the date of Our receipt of Your request of termination;
4. On the date of fraud or material misrepresentation by You, subject to the Incontestability provision in the General Provision section;
5. On the date We elect to discontinue this plan or type of coverage;
6. On the date We elect to discontinue all coverage in Your state; or
7. On the date an Insured Person is no longer a permanent resident of the United States.

We will promptly return any unearned portion of the premium paid, but in any event shall return the unearned portion of the premium within 30 days. The earned premium shall be computed on a pro-rata basis.

Covered Dependents

Your Covered Dependent's coverage will terminate under this Policy on:

1. The date Your coverage terminates;
2. At the end of the month following the date such dependent ceases to be an Eligible Dependent;
3. At the end of the month following the date of Our receipt of Your request of termination; or
4. On the date the Covered Dependent:
 - a. performs an act or practice that constitutes fraud; or
 - b. has made an intentional misrepresentation of material fact, relating in any way to the coverage provided under the Policy, including claims for benefits under the Policy.

We will promptly return any unearned portion of the premium paid, but in any event shall return the unearned portion of the premium within 30 days. The earned premium shall be computed on a pro-rata basis.

The attainment of the limiting age for an Eligible Dependent will not cause coverage to terminate while that person is and continues to be both:

1. Incapable of self-sustaining employment by reason of mental or physical handicap; and
2. Chiefly Dependent on You for support and maintenance. For the purpose of this provision "Chiefly Dependent" means the Eligible Dependent receives the majority of his or her financial support from You.

We will require that You provide written proof that the dependent is in fact a disabled and dependent person within 31 days after his or her attainment of the Limiting Age. Thereafter, We may require such written proof not more frequently than annually after the two-year period following the child's attainment of the Limiting Age. In the absence of such proof We may terminate the coverage of such person after the attainment of the Limiting Age.

7. **PREMIUMS.** We reserve 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, We have given You written notice of a least 31 days prior to the effective date of the new rates. Such change will be on a Class Basis.

About SureBridge


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 are available through HealthMarkets Insurance Agency, 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.

For more information on SureBridge's supplemental insurance products, please visit [SureBridgeInsurance.com](https://www.SureBridgeInsurance.com)



SureBridge® is a registered trademark used for both insurance and non-insurance products offered by subsidiaries of HealthMarkets, Inc. Supplemental and life 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.



Navigate life's twists and turns

with the SureBridge portfolio
of supplemental and life
insurance products

HOSPITAL CONFINEMENT DIRECT: OTHER IMPORTANT INFORMATION

Definitions (See Policy for Other Important Definitions):

- **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 organized facilities for medical, diagnostic and surgical care for sick and injured persons on an inpatient basis, either on its premises or in facilities available to the hospital on a prearranged 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) Is 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.
- **Sickness** means an illness or disease.

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.

Dental | Accident Direct | Accident Disability Direct | Critical Illness Direct
Critical Accident Direct | Accident Companion | Simplified Issue Term Life
Vision | Income Protection Direct | CancerWise® | Hospital Confinement Direct
ProtectFit Plus | Final Expense Whole Life | Fixed Indemnity Direct | Metal Gap

SureBridgeInsurance.com
800-815-8535

Weekdays, 8am to 5pm in all time zones



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