



Critical Illness Direct

Cash benefits paid directly to you not your doctor or hospital

DID YOU KNOW?

62%

of bankruptcies in 2007
were due to illness ...

78%

of those filers had
health insurance.¹

Cash benefits can be used for:

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

A **critical illness** can strike suddenly and **disrupt your life** physically and financially. **Critical Illness Direct**, underwritten by The Chesapeake Life Insurance Company® and brought to you by Priority Health, offers seven affordable benefit level options that pay **lump-sum cash benefits** directly to you. The money can be used to **pay unexpected medical costs or everyday living expenses**.

Applying is simple and can be completed in minutes.

Critical Illness Direct At A Glance

- Pays up to a **\$100,000 lump-sum cash benefit** upon a first diagnosis of a covered critical illness or qualifying event
- Benefits are paid directly to you - not your doctor or hospital
- Coverage is available for the whole family - you, your spouse and your kids
- Affordable premiums that do not increase as you get older with coverage **starting at \$2⁹¹ per month²**

Cash benefits paid directly to you. Apply today!

¹ The American Journal of Medicine, August 2009 | ² For 25 year old female, non-tobacco at \$10,000 benefit level.

Insurance policy underwritten by The Chesapeake Life Insurance Company®



Underwritten by The Chesapeake Life Insurance Company®



Critical Illness Direct

Pays a lump-sum benefit upon a first diagnosis of the qualifying event or diagnosis listed below, subject to a 30-day waiting period.

BENEFIT OPTIONS	\$10,000 ¹	\$20,000	\$30,000	\$40,000	\$60,000	\$80,000	\$100,000
Qualifying Event paid at 100% Advanced Alzheimer's, ALS, life threatening cancer, coma (illness induced), heart attack, major organ transplant, stroke, end-stage renal failure.	\$10,000	\$20,000	\$30,000	\$40,000	\$60,000	\$80,000	\$100,000
Qualifying Event paid at 25% Benign brain tumor, cancer in situ, coronary bypass.	\$2,500	\$5,000	\$7,500	\$10,000	\$15,000	\$20,000	\$25,000
MONTHLY PREMIUMS							
35 Year Old Male	\$7 ⁸⁵	\$15 ⁶⁹	\$23 ⁵⁴	\$31 ³⁹	\$47 ⁰⁸	\$62 ⁷⁸	\$78 ⁴⁷
35 Year Old Female	\$5 ²⁷	\$10 ⁵⁴	\$15 ⁸¹	\$21 ⁰⁷	\$31 ⁶¹	\$42 ¹⁵	\$52 ⁶⁹
40 Year Old Male	\$11 ²¹	\$22 ⁴²	\$33 ⁶³	\$44 ⁸⁴	\$67 ²⁶	\$89 ⁶⁸	\$112 ¹⁰
40 Year Old Female	\$7 ⁸⁵	\$15 ⁶⁹	\$23 ⁵⁴	\$31 ³⁹	\$47 ⁰⁸	\$62 ⁷⁸	\$78 ⁴⁷

This is only an illustration of benefit and premium options per non-tobacco covered person. Benefits reduce by half at age 70 | ¹This benefit level is guaranteed acceptance regardless of health or medical history; subject to eligibility requirements and pre-existing condition limitations.

Apply today for Critical Illness Direct and get cash to help cover your expenses while you recover

Questions?

Please contact your Priority Health agent.



CRITICAL ILLNESS DIRECT: OTHER IMPORTANT INFORMATION

Definitions (See Policy for Other Important Definitions):

- **First Diagnosis or First Diagnosed** 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.
- **Qualifying Event** means one of the diseases, conditions or procedures listed for which positive diagnosis is made by a legally qualified physician based on diagnostic criteria generally accepted by the medical profession.
- **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.

EXCLUSIONS AND LIMITATIONS

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

An injury or accident | 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 | 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 | Intentionally medically induced qualifying event, except in the case of a major organ transplant | Cosmetic surgery | Any diagnosis, as defined, which is made by you or a member of your immediate family or household | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated | Committing or trying to commit a felony.

Benefits will not be payable for: The first diagnosis of a qualifying event, which occurs within the waiting period as specified in the Policy schedule | Any qualifying event caused directly or indirectly by Acquired Immune Deficiency Syndrome (AIDS) or AIDS related complex | 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. | 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.

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 75, subject to Chesapeake's right to discontinue or terminate 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.
- **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 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 termination | 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 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 75 | Your dependent's coverage will terminate at the end of the month following the date such dependent ceases to be an eligible dependent.

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 Specified Disease/Condition and Major Organ Transplant Policy, Form CH-26113-IP (03/14) MI. 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®. "We," "our" or "us" refers to The Chesapeake Life Insurance Company. The Chesapeake Life Insurance Company compensates Priority Health for marketing services. The Chesapeake Life Insurance Company and Priority Health are separate companies and are not affiliated with one another.