surebridge®

Underwritten by *The Chesapeake Life Insurance Company®*

Fixed Indemnity Direct

Cash benefits for covered healthcare services ... with no deductible.

THIS POLICY PROVIDES LIMITED BENEFITS. This type of plan is not considered "minimum essential coverage" under the Affordable Care Act and therefore a Fixed 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.

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.

IMPORTANT NOTICE TO PERSONS ON MEDICARE
THIS INSURANCE DUPLICATES SOME MEDICARE BENEFITS

This is not Medicare Supplement Insurance

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

This insurance duplicates Medicare benefits when:

• any expenses or services covered by the policy are also covered by Medicare

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

• hospitalization

• physician services

• outpatient prescription drugs if you are enrolled in Medicare Part D

• hospice

• other approved items and services

Before You Buy This Insurance

✓ Check the coverage in **all** health insurance policies you already have.

✓ For more information about Medicare and Medicare Supplement insurance, review the *Guide to Health Insurance for People with Medicare*, available from the insurance company.

✓ For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

MED DISC HC/FI (03/15)

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.

Fixed Indemnity Direct

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

The Fixed Indemnity Direct offers six, budget-friendly benefit levels that provide **cash benefits without having to worry about meeting a deductible**. The money can be used to **pay unexpected medical costs or everyday living expenses**.

Applying is simple and can be completed in minutes.

Cash benefits can be used for:

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

Fixed Indemnity Direct At A Glance

- **No Annual Deductible**
- Affordable plan that supplements other health insurance you may have[1]
- Pays a benefit for a covered sickness or injury even if benefits are also paid under Workers' Compensation[2]
- Benefits are paid directly to you - not your doctor or hospital
- Flexible benefit options with six plans to choose from
- Affordable premiums with coverage **starting at $18[81] per month**[3]

[1] **This type of plan is not considered "minimum essential coverage" under the Affordable Care Act.** Plans, benefits and rates may vary by state. Plan availability may be limited by age of applicant | [2] Benefits are not coordinated with Workers' Compensation. Exclusions & Limitations and Policy provisions may apply. For a complete listing of benefits, exclusions and limitations, please refer to your Policy. | [3] Based on 30 year old non-tobacco male for Plan 1.

Fixed Indemnity Direct

DAILY BENEFITS[1]	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
Availability	Ages 1 - 83			Ages 1 - 64		
Hospital Confinement (Maximum 365 days per confinement.)						
Without Surgery	$100	$250	$500	$1,000	$2,000	$3,000
With Surgery	$200	$500	$750	$1,500	$2,500	$3,500
ICU/CCU Confinement (Paid in lieu of hospital confinement benefit. Maximum 30 days per confinement.[2])						
	$200	$500	$1,000	$2,000	$4,000	$6,000
Outpatient Surgery (Maximum three days per calendar year.)						
	$350	$500	$750	$1,500	$2,500	$3,500
Continuous Care (Paid in lieu of hospital confinement or ICU/CCU confinement benefit. Care must begin within seven days of a hospital confinement. Maximum 30 days per calendar year.)						
	$50	$125	$250	$250	$250	$250
Emergency Room (Maximum two days per calendar year.)						
	$50	$50	$50	$75	$100	$150
Outpatient X-Ray and Laboratory Procedures (Maximum five days per calendar year.)						
	$50	$50	$50	$100	$100	$100
Outpatient Diagnostic Imaging Procedures (Maximum two days per calendar year.)						
	$100	$250	$250	$500	$500	$500
Ambulance (Ground, water or air. Paid up to a maximum $2,400 per lifetime.)						
	$100	$200	$200	$200	$200	$200
Physician Office Visit (Maximum four days per calendar year.)						
	Not Available in Plans 1, 2 or 3			$75	$75	$75

[1] Subject to a 30-day waiting period for sickness. In MD, MO and ND, waiting periods are removed | [2] UT revises 30 days to 31 days.

This brochure provides only summary information. 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 Fixed Indemnity Insurance Policy, Form CH-26126-IP (10/13), or its state variation. Plans, benefits and rates may vary by state. Plan availability may be limited by age of applicant.

Fixed Indemnity Direct

MONTHLY PREMIUMS[1]	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6
30 Year Old Male						
Non-Tobacco	$18[81]	$27[46]	$38[43]	$91[09]	$128[17]	$165[81]
Tobacco	$26[33]	$38[44]	$53[80]	$127[53]	$179[44]	$232[13]
30 Year Old Female						
Non-Tobacco	$34[48]	$50[34]	$70[45]	$167[01]	$234[98]	$303[99]
Tobacco	$46[54]	$67[96]	$95[11]	$225[46]	$317[23]	$410[38]
45 Year Old Male						
Non-Tobacco	$31[62]	$46[17]	$64[62]	$153[18]	$215[52]	$278[81]
Tobacco	$44[27]	$64[64]	$90[47]	$214[45]	$301[73]	$390[34]
45 Year Old Female						
Non-Tobacco	$38[88]	$56[77]	$79[46]	$188[35]	$265[02]	$342[84]
Tobacco	$52[49]	$76[65]	$107[27]	$254[28]	$357[77]	$462[83]
65 Year Old Male				Not Available		
Non-Tobacco	$74[29]	$108[47]	$151[81]			
Tobacco	$104[00]	$151[86]	$212[54]			
65 Year Old Female						
Non-Tobacco	$75[07]	$109[61]	$153[40]			
Tobacco	$101[34]	$147[97]	$207[09]			
Dependent Child[2]	$14[37]	$25[82]	$41[69]	$107[81]	$165[57]	$224[26]

The chart above is only an illustration of benefit and premium options per covered person for plans. Premiums may vary by state | [1] An application fee of up to $20 may be applied at the time of application | [2] Dependent child is a male or female, 1 - 17 years of age.

FIXED INDEMNITY DIRECT: 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, a hospital intensive care/cardiac care unit, skilled nursing facility, rehabilitation facility, rehabilitation unit, or hospice unit, for which a daily charge for room and board is made for each day of confinement. Confinement for the same sickness or injury separated by less than 60 days are considered a continuation of the same confinement.
- **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) Is accredited as a hospital by the Joint Commission on Accreditation of Hospitals. Hospital does not include: a rehabilitation unit or facility; hospice; convalescent home; rest or nursing facility; extended care facility; skilled nursing facility; mental health facility; substance abuse treatment facility; military or veteran's hospital (unless insured is required to pay charges).[1]
- **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.[2]
- **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.[3]
- **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. [4]

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 85, subject to Chesapeake's right to discontinue or terminate coverage as provided in the termination of coverage section of the Policy.[5]
- **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.[6]
- **TERMINATION OF COVERAGE:** Your coverage will terminate and no benefits will be payable under the Policy[7]: At the end of the period for which premium has been paid (subject to the grace period)[8] | On the date you reach age 85 | 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[9] | 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[10] | On the date of fraud or material misrepresentation by you[11] | On the date we elect to discontinue this plan or type of coverage[12] | On the date we elect to discontinue all coverage in your state[12] | On the date an insured person is no longer a permanent resident of the United States.[13] | Your dependent's coverage will terminate at the end of the month following the date such dependent ceases to be an eligible dependent.

[1]IA: revises provisions (1) and (2) to read '(1) be operated pursuant to Iowa law; (2) 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 physicians, 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,' removes provision (4) and all 'military or veteran's hospital' information IL: adds 'or in facilities having an agreement to provide.' after 'organized facilities for' LA: adds 'is owned and operated by the state of Louisiana or any of its political subdivisions' UT: removes provision (4) | [2]IL: revises 'contributed to, direct or indirectly' to read 'directly related to' | [3]DC: removes 'an ordinarily prudent' MD: revises 'sickness or injury 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' and revises 'medical practitioner acting within the scope of his or her license' to 'physician' NM: revises 'one year' to '6 months' for all usages ND, NE: removes second provision WY: removes second provision and changes 'one year' to 'six month' | [4]MD, MO, ND: removed entirely | [5]IA: changes 'guaranteed' to 'conditionally' | [6]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' MD: changes '31 days' to '40 days' MS, NM, WI: changes '31 days' to '60 days' AK, UT: changes '31 days' to '45 days' | [7]MD: adds '(subject to the Extension of Benefits provision)' | [8]ND: adds 'not' before 'been paid' | [9]AK: revised to read 'on the date we receive your request of termination' | [10]AK: removed entirely | [11]AL, MD: adds 'subject to the Time Limit on Certain Defenses provision (AL adds 'in the General Provisions section')' IL: changes 'material' to 'intentional' | [12]AK: adds 'we will give you at least 45 days notice before the date coverage will be discontinued' ND: removes entirely | [13]AK: adds 'we will promptly return any unearned portion of the premium paid, but in any event shall return the unearned portion of the premium within 45 days. The earned premium shall be computed on a pro-rata basis.'

FIXED INDEMNITY DIRECT: OTHER IMPORTANT INFORMATION (continued)

EXCLUSIONS AND LIMITATIONS

We will not provide 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[1] | Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane[2] | 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[3] | 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[4] | 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[5] | 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[6] | 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[7] | Drug abuse or addiction including alcoholism, or overdose of drugs, narcotics, or hallucinogens, directly or indirectly[8] | An overdose of drugs, being intoxicated or under the influence of intoxicants, hallucinogens, narcotics or other drugs, directly or indirectly[9] | Directly or indirectly engaging in an illegal occupation or illegal activity or your being incarcerated[10] | Committing or trying to commit a felony[11] | Normal pregnancy, except for complications of pregnancy while hospital confined[12] | Hospital confinement for routine or normal newborn child care | 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[13] | 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; and | Care received outside of the United States.

Pre-Existing Conditions: 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 the effective date of coverage for an insured person.[14]

[1]MD: removed entirely | [2]MO: removes 'or insane' | [3]MD: removed entirely | [4]MD: removed entirely | [5]MD: adds 'when the treating physician determines that the treatment is experimental or investigational medicine' | [6]MD: adds 'or other modification of the physical body in order to improve the psychological mental or emotional well-being of the insured person, and/or when the treating physician determines that the treatment is cosmetic' | [7]IL: removed entirely | [8]AL, WY: adds 'unless taken ('used' for WY) as prescribed by a ('legally qualified' for AL) physician' DC, MI, MD: removed entirely IL: adds 'unless taken as prescribed by a physician' and removes 'directly or indirectly' NE: adds 'unless administered on the advice of a physician,' (this is added after 'narcotics' for NE) | [9]AL, WY: adds 'unless taken ('used' for WY) as prescribed by a ('legally qualified' for AL) physician' and AL removes 'or under the influence of intoxicants' DC: revised to read 'the voluntary use of illegal drugs; the intentional taking of over the counter medication not in accordance with recommended dosage and warning instructions; and the intentional misuse of prescripton drugs IL: revised to read 'being intoxicated or under the influence of intoxicants that which is defined and determined by the laws of the state where the loss or cause of the loss was incurred, hallucinogens, narcotics or other drugs, unless taken as prescribed by a physician' NE: adds 'unless administered on the advice of a physician' (this is added after 'narcotics' for NE) LA: adds 'unless administered by a physician' MD, MI: removed entirely UT: removes 'being intoxicated or under the influence of intoxicants' and adds the new exclusion 'the use of alcohol that substantially contributes to, causes the loss, or is over the legal limit' | [10]IL: removes 'or indirectly' and 'or illegal activity' MD: revised to read 'your being incarcerated' MO: removes 'or your being incarcerated' NE: removed and replaced with 'engaging in an illegal occupation' and 'your being incarcerated' UT: adds 'as a voluntary participant' after 'illegal activity' | [11]MD: removed entirely UT: adds 'as a voluntary participant' | [12]ND: removes 'while hospital confined' | [13]IA: revised to read 'Aviation, including experimental aviation or ultra light flying' IL: removed entirely. | [14]NM: revises 'one year' to '6 months'.

For use in AK, AL, AR, AZ, DC, DE, IA, IL, LA, MD, MI, MO, MS, ND, NE, NM, UT, WI and WY

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

SureBridgeInsurance.com
800-815-8535

Weekdays, 8am to 5pm in all time zones

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