



Hospital Confinement Plan

Now's the time.... an opportunity to cover those "out-of-pocket" expenses.



You'll Choose Us For Life

READ YOUR POLICY CAREFULLY — This outline of coverage provides a very brief description of the important features of the coverage. 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 your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY**.

Hospital Confinement Indemnity Coverage — Policies of this category are designed to provide, to persons insured, coverage in the form of a fixed daily benefit during periods of hospitalization resulting from a covered accident or sickness, subject to any limitations set forth in the policy. Such policies do not provide any benefits other than the fixed daily indemnity for hospital confinement and any *additional benefits described below*.

BENEFITS	PLAN 1	PLAN 2	PLAN 3
Daily Hospital Confinement Pays a daily benefit for inpatient hospital confinement or physician-prescribed home health care due to a covered accident or sickness. <i>Maximum 31 days per confinement.</i>	\$50 per day	\$100 per day	\$200 per day
Surgery and Anesthesia Pays according to the policy surgical schedule, up to the amount selected, for a surgical procedure when surgery is due to a covered accident or sickness. Anesthesia pays 25% of the amount payable under the surgical benefit.	Up to \$1,000 per operation	Up to \$1,500 per operation	Up to \$2,500 per operation
Ambulance Pays for ground ambulance or air ambulance to a hospital if the transportation results in hospital admission as a resident inpatient. <i>Pays only one benefit, whichever occurs first, per calendar year per person.</i>	Ground Ambulance \$250 Air Ambulance \$500	Ground Ambulance \$250 Air Ambulance \$500	Ground Ambulance \$500 Air Ambulance \$1,000

You choose
 coverage that best
fits your needs

- coverage from \$50 to \$200 for inpatient hospital stays
- coverage for surgery and anesthesia
- family coverage available

plus
 choose optional benefits for:

- initial hospitalization
- intensive care/coronary care



ADDITIONAL COVERAGE OPTIONS	YOUR CHOICES
<p>Annual Hospital Admission Pays an annual benefit if the insured person is admitted to a hospital and confined as a resident bed patient because of a covered accident or sickness. <i>This benefit is payable only once per calendar year for each insured person.</i></p>	<p>\$500 \$750 \$1,000</p>
<p>Hospital Intensive Care Confinement Pays a daily benefit when an insured person is confined in a hospital intensive care or coronary care unit, due to a covered injury or sickness. <i>Limited to 30 days for any one period of confinement.</i></p>	<p>\$200 \$400 \$600</p>

RENEWABILITY AND CONTINUATION

The Hospital Confinement Plan (HCP) and riders are guaranteed renewable during your lifetime. The company may change the established premium rate, but only if the rate is changed for all policies and riders like yours in your state. This coverage will not be issued to anyone 65 years of age or over. If you purchase the HCP and/or riders prior to your 65th birthday, you may continue coverage after age 65, except for disability riders, as long as you continue to pay the premium by the due date or during the 31 days that follow. Covered dependents who no longer meet eligibility requirements, may convert to a comparable individual HCP without evidence of insurability. A spouse can continue coverage under this policy upon your death.

EXCEPTIONS AND LIMITATIONS

The policy pays only for loss resulting from a covered sickness or accident as defined in the policy. It DOES NOT cover loss due to:

1. War or any act of war, declared or undeclared.
2. Intentional self-inflicted injury or attempted suicide.
3. Participation in a felony.
5. Custodial care.
6. Mental, nervous, or emotional disorder without organic origin.
7. Alcoholism or drug addiction, except benefits will be paid for accidental bodily injury sustained as a consequence of an insured person being intoxicated or under the influence of a narcotic.
8. The use of alcohol or drugs, unless taken as prescribed by a physician.
9. Dental, elective, or cosmetic surgery or treatment, except as a result of a covered injury or congenital defect of a newborn child.
10. Hernia, tonsils or adenoids during the first six months of coverage, unless treated on an emergency basis.
11. Well baby care, except for the first five days of routine newborn nursery care.
12. Voluntarily acting as an organ donor.

PRE-EXISTING CONDITIONS

Benefits will not be paid for pre-existing conditions during the first twelve months the coverage is in force. A "pre-existing condition" means a sickness or injury which was diagnosed or treated within twelve months before the effective date of coverage, or a pregnancy existing on the effective date of coverage. After the coverage has been in force for twelve months, we will pay benefits for any pre-existing condition not specifically excluded.

COVERAGE EFFECTIVE DATE

Effective date means the date shown on the Policy Schedule page for all persons accepted for coverage at the time of issue, provided the application has been accepted and approved by us; the policy is issued; and the first premium has been paid; or the date shown by endorsement for all persons added to coverage after the policy has been issued. The effective date is assigned by the Company in accordance with our policy dating rules in effect at the time your policy is issued. The coverage provided by the policy will not be effective unless there has been no change since the date of the application and the effective date of the policy in the health of any proposed insured person listed on the application.

USable Life will mail your policy and purchased riders to you. If you do not receive your policy, please call our Customer Service Department at 1-800-370-5856.



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A Rating and Analysis from the A.M. Best Rating Company represents an independent opinion from the leading provider of insurer ratings of a company's financial strength and ability to meet its obligations to policyholders. Upon completion of evaluations, A.M. Best assigns the following Best's Ratings: A++ and A+ (Superior); A and A- (Excellent); B++ and B+ (Very Good); B and B- (Fair); C++ and C+ (Marginal); C and C- (Weak); D (Poor); E (Under Regulatory Supervision); F (In Liquidation); S (Rating Suspended). **Based on this analysis, USable Life is rated "A" (Excellent).**

Standard & Poor's Insurer Financial Strength Ratings provide powerful decision-making tools for anyone interested in buying insurance. Standard & Poor's ratings are prospective evaluations of an insurer's financial security to its policyholders. Standard & Poor's Insurer Financial Strength Ratings range from "AAA" to "CC". An insurer rated "BBB" and higher ("A", "AA", "AAA") is regarded as having financial security characteristics that outweigh any vulnerabilities and is highly likely to have the ability to meet financial commitments. An insurer rated "BB" or lower is in the "vulnerable" range and is regarded as having vulnerable characteristics that may outweigh its strengths. "BB" indicates the least degree of vulnerability within the range. "CC" the highest degree of vulnerability. **Based on this analysis, USable Life is rated "A" (Strong).**