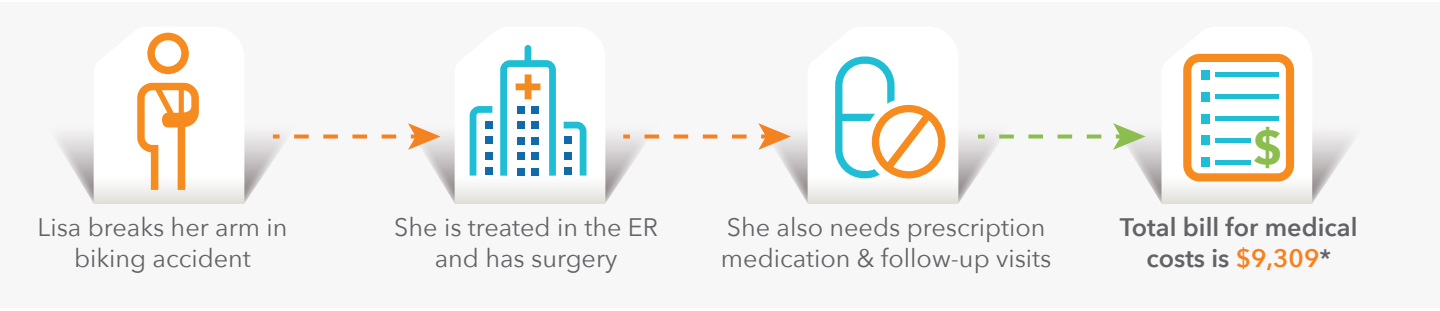
LIFESECURE INSURANCE COMPANY

LifeSecure's Accident Insurance – Benefit Payout Example



LifeSecure's Accident Insurance pays cash benefits based on actual medical and/or recovery expenses* regardless of any other insurance you have. While your health plan covers certain medical costs after an accident, your Accident Insurance benefits extend protection to help with unexpected out-of-pocket expenses (up to your Annual Benefit Bank amount).

Covered Medical Services* (see reverse for details)	
Hospital Services, which include:	
Head CT	$206
X-ray (arm)	$38
Broken arm/surgery	$7,648
ER and other Hospital Services	$1,417
	$9,309

Lisa's Accident-related Out-of-Pocket Expenses	
Medical Deductible	$1,500
Coinsurance	$1,000
Two follow-up doctor visits & prescriptions	$100
Lost wages for three days of work	$450
Carry out meals for a family of four	$280
Child care (two weeks)	$450
	$3,780

$9,309 Covered Medical Services − **$0** Accident Insurance Deductible = **$9,309** Lisa's Cash Benefit Payout − **$3,780** Out-of-Pocket Expenses = **$5,529** Lisa's Remaining Cash

Thanks to Lisa's Accident Insurance with a $15,000 Annual Benefit Bank, she can use her benefit payout to help cover her out-of-pocket expenses and still have **$5,529** left to help offset any additional expenses. Plus she has more than **$5,600** available in her Benefit Bank, should she suffer another accidental injury within the calendar year.

** Benefits pay the amount charged for covered services, less any adjustments and discounts negotiated between the health insurance plan and providers for services received, as detailed on the Explanation of Benefits (EOB).*

*** Examples shown are for illustrative purposes only.*

See next page to find these amounts on Lisa's health insurance Explanation of Benefits.

SAMPLE – Explanation of Benefits Statement

HEALTH INSURANCE EXPLANATION OF BENEFIT PAYMENTS
THIS IS NOT A BILL

Statement Date: 01/27/21

Claim Summary (for Claim Detail, see below)

Hospital, Doctor or Other Health Care Provider	Total Charges		Discount*		Health Plan Paid		Insurance Paid		Amount You Pay
ABC HOSPITAL	$16,292	–	$6,983	–	$6,809	–	$0	=	$2,500

* Discounts are negotiated with hospitals, doctors and other health care providers which saves you money.

Summary of Deductibles and Out-of-pocket Maximums
(These totals are based on our information to date and may not reflect all outstanding claims)

BENEFIT PERIOD:
Jan. 01, 2021 through Dec. 31, 2021

In-network out-of-pocket maximum:	$6,600
Combined amount applied to date:	$2,500
Drug amount applied to date:	$0

In-network deductible:	$3,000	In-network deductible:	$1,500
Amount applied to date:	$1,500	Amount applied to date: *Patient deductible is met.*	$1,500

Statement Date: 01/27/21

Summary of Deductibles and Out-of-pocket Maximums
(These totals are based on our information to date and may not reflect all outstanding claims)

BENEFIT PERIOD:
Jan. 01, 2021 through Dec. 31, 2021

Totals for:		**Totals for:**	
In-network co-insurance maximum:	$2,000	In-network co-insurance maximum:	$1,000
Amount applied to date:	$1,000	Amount applied to date: *Patient maximum is met.*	$1,000

Statement Date: 01/27/21

Claim Detail

Provider Name:	ABC Hospital
Provider Status:	PARTICIPATING
Service Dates:	01/14/21 to 01/15/21
Service Type:	HOSPITAL SERVICES

Total Charge	$16,292
Amount approved for this service	$9,309
In-network deductible you pay	– $1,500
Co-insurance you pay	– $1,000
Insurer paid this provider on 01/27/21	$6,809
Insurer discount	+ $6,983
Total Covered	$13,792
Amount You Pay	**$2,500**

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