

The "YOU" in United Security

You may be young or in good health, but no one is invincible. Accidents happen. And they don't wait until you have the financial resources to combat them. If you are in need of a temporary solution for health insurance, make sure you have low cost coverage to fill the gap. **Short Term Medical** from United Security Life and Health provides you with the temporary coverage needed to prevent an unexpected threat to your health from becoming a financially-crippling incident as well.



Short-Term Medical is the Perfect Solution for:

- ✓ Recent college graduates
- ✓ Individuals waiting for group coverage
- ✓ Temporary or seasonal workers
- ✓ Individuals between jobs or laid off
- ✓ Recent military discharges
- ✓ Retired and waiting for Medicare coverage

Who's Eligible for Short Term Medical?

- Individuals between the ages of 30 days and 64 years, 6 months.
- Dependent children through 24 may be covered as dependents on their parent's plan, regardless of student status.
- Foreign residents living in the U.S. for at least one year at the time of application, with proof of Alien Registration Receipt Card, visa or other appropriate documentation.



The "US" in United Security

United Security Life and Health Insurance Company is a life and health insurer that specializes in providing coverage to individuals and families. Our products, friendly service, and decades of experience in creating products for people like you help to distinguish us from our competitors.

Limitations & Exclusions

What Short Term Medical Does Not Cover

The USL&H **Short Term Medical** plan does not cover: pre-existing conditions* (including those not listed on the Application); preventative or wellness doctor visits; dental or optical treatments; routine physical exams; normal pregnancy or childbirth; well child care; inter-scholastic and intercollegiate sports injuries; expenses incurred outside the United States, its possessions, territories or Canada, unless otherwise indicated. **Other exclusions are listed in detail in the Certificate you will receive when you purchase the plan.**

*Pre-existing Condition: A medical condition due to sickness or injury for which the insured received medical treatment or advice from a provider within the 12 month period immediately preceding the effective date of coverage, regardless of whether the condition was diagnosed or not diagnosed; or that produced signs or symptoms within the 6 month period immediately preceding the effective date of coverage, which should have caused an ordinarily prudent person to seek diagnosis or treatment.



IMPORTANT NOTE

The information shown in this brochure and in any accompanying literature is not intended to provide full details of USL&H plans and may change at the discretion of USL&H. Complete terms of coverage are outlined in the Certificate and set forth in the applicable insurance Policy. In applying for coverage, the primary insured agrees to be bound by the Certificate. The benefits described in this brochure and any accompanying literature are the standard benefits offered by USL&H. Policy provisions vary in some states.

Short Term Major Medical Insurance

Effective As Early As Next Day

\$2 Million Lifetime Maximum

Visit Any Doctor, Any Hospital

Prescription Drugs Covered

Get a free quote
and apply
online at
www.unitedsecuritylandh.com

*Always the perfect fit
for your temporary
health insurance needs*

Marketed by:

Plan Highlights

- ✓ \$2 million lifetime maximum
- ✓ Effective as early as next day
- ✓ Visit any doctor/any hospital
- ✓ Limited benefits while outside the U.S.
- ✓ Prescription drug coverage

What Short Term Medical Covers

- Hospital semi-private room and board and intensive care charges
- Rehabilitation programs
- Hospital outpatient charges
- Organ transplants
- Skilled nursing facility care
- Durable medical equipment & supplies
- Other miscellaneous hospital and health care practitioner services
- Home health care
- Prescription drugs
- Physical medicine services
- Miscellaneous diagnostic services and medical supplies
- X-ray & laboratory services

Some plan benefits may not be available in all states. Contact your agent to review a copy of the Certificate of Coverage. Your state's benefits are also detailed in the Certificate of Insurance you will receive when you purchase the plan.

When Short Term Medical Pays

Before the **Short Term Medical** plan pays any benefits, you must pay the deductible you selected for your policy (\$500, \$1,000 or \$2,500). After your deductible has been satisfied, the **Short Term Medical** plan will pay 80% of the next \$10,000 of covered expenses. After that, **Short Term Medical** will pay 100% of covered expenses up to \$2,000,000 per insured. In other words, the most you will ever pay out-of-pocket on covered expenses will be your deductible, plus \$2,000.

Individual Plan

Your Deductible	+ 20% of Next \$10,000	= Maximum Out-of-Pocket
\$ 500	\$2,000	\$2,500
\$1,000	\$2,000	\$3,000
\$2,500	\$2,000	\$4,500

The above chart shows the most you will ever pay per person, per period (excluding premium payments), based on your deductible and eligible expenses.

The maximum number of deductibles to be met on a Family Plan is three, regardless of the total number of insureds.

When Coverage Begins

Provided that your Application is complete, meets the requirements for acceptance and the full initial premium is received, your coverage will begin at 12:01 a.m. the day of your approved Effective Date. Your approved Effective Date will be the later of:

- a) 12:01 a.m. on the day following the postmark date stamped on the application envelope addressed to USL&H;
- b) 12:01 a.m. on the requested Effective Date; or
- c) the date following the date we receive your electronic/faxed application in our Home Office.

When Coverage Ends

Your coverage ends the earlier of:

- a) 11:59 p.m. Standard Time on the last day of the Benefit Period *or*
- b) the date you become eligible for Medicare *or*
- c) the date your coverage is terminated due to non-payment or a cancellation request.

Extension of Benefits

Your coverage may be extended for up to 60 days beyond the Benefit Period for certain sicknesses or injuries that began while the policy was in force. The Extension of Benefits provision is subject to the Deductible, the Lifetime Maximum Benefit and all other terms, limits and conditions of the Policy.

Applying for a Second Short Term Medical Plan

The **Short Term Medical** plan is Not Renewable. If your temporary need continues beyond your policy term, you may apply for a new plan as long as no claims were incurred under a previous USL&H **Short Term Medical** plan and there has been no significant change in your health. The **Short Term Medical** plan is not designed to cover pre-existing conditions nor does it provide continuous coverage from term to term. Any medical condition that began while the applicant was insured during a previous term on a USL&H **Short Term Medical** plan policy, will not be covered under a new plan.

While use of network providers is not required in this plan, you can maximize your benefits and save money by receiving your healthcare from a provider in the PHCS Healthy Directions Network. To find out if your healthcare provider is a member of the PHCS Healthy Directions Network:

Visit www.phcs.com or call 800-678-7427.

It's Easy – Three Strikes You're In

You can make several choices to ensure the plan is tailored to your needs. Read your choices below and put a strike through the best option for you. When you have completed your three selections, you have all the information you need to apply for coverage.

1. Payment Options: Single Pay vs. Monthly

- Single Pay** – If you are interested in saving money on your premium, know how long you will need coverage, and have the money to pay up front – choose the single payment option. We accept single payments by credit card, check or one-time bank draft. The single premium payment is non-refundable.
- Monthly Pay** – If you aren't exactly sure how long you will need temporary medical coverage, or enjoy the flexibility of spreading out your payments – choose our monthly pay option. With monthly pay, you have the option to cancel coverage, but you must request cancellation to USL&H in writing at least 7 business days before your payment due date to ensure that you are not charged the following month's premium. Your coverage will then remain in force up to the paid-to-date. Premiums will not be refunded.

2. Length of Coverage: 1 month – 6 months

If you aren't sure exactly how long you will need coverage, apply for a longer coverage period just to be safe. You can cancel coverage at any time if you select our monthly pay option. Mark your selection below.

- 1 month
- 3 months
- 5 months
- 2 months
- 4 months
- 6 months

3. Deductible Amounts: \$500, \$1,000 or \$2,500

Select the deductible that's best for you:

- \$500 Deductible** – If you can afford a slightly higher premium rate, you can set yourself up for a lower out-of-pocket expense should an accident or illness occur.
- \$1,000 Deductible** – The most common option; provides you a great premium rate with a manageable out-of-pocket expense should an accident or illness occur.
- \$2,500 Deductible** – The best option for low cost coverage needed in case of major accident or illness.

That was easy! So is obtaining a quote and applying for coverage.

Open brochure here to apply.
Or, get a free quote & submit your information electronically at www.unitedsecuritylandh.com.

PRIMARY INSURED & SPOUSE INDIANA MONTHLY BASE RATES			
Chart 1 – Zip Codes 462-466			
Age	Deductible		
	\$500	\$1,000	\$2,500
0 - 14	\$ 62.00	\$ 53.32	\$ 39.68
15 - 19	\$ 79.98	\$ 66.65	\$ 53.32
20 - 24	\$ 75.33	\$ 66.65	\$ 48.98
25 - 29	\$ 71.30	\$ 57.66	\$ 39.68
30 - 34	\$ 79.98	\$ 57.66	\$ 44.33
35 - 39	\$ 97.65	\$ 75.33	\$ 53.32
40 - 44	\$106.33	\$ 84.32	\$ 62.00
45 - 49	\$124.31	\$106.33	\$ 75.33
50 - 54	\$168.64	\$141.98	\$106.33
55 - 59	\$230.64	\$186.31	\$137.64
60 - 64	\$310.62	\$257.61	\$186.31
Per Child	\$ 39.68	\$ 35.65	\$ 22.32

PRIMARY INSURED & SPOUSE INDIANA MONTHLY BASE RATES			
Chart 2 – All Zip Codes Except 462-466			
Age	Deductible		
	\$500	\$1,000	\$2,500
0 - 14	\$ 53.32	\$ 45.88	\$ 34.10
15 - 19	\$ 68.20	\$ 57.04	\$ 45.88
20 - 24	\$ 64.79	\$ 57.04	\$ 41.85
25 - 29	\$ 61.07	\$ 49.29	\$ 34.10
30 - 34	\$ 68.20	\$ 49.29	\$ 38.13
35 - 39	\$ 83.70	\$ 64.79	\$ 45.88
40 - 44	\$ 91.14	\$ 72.23	\$ 53.32
45 - 49	\$106.33	\$ 91.14	\$ 64.79
50 - 54	\$144.46	\$121.83	\$ 91.14
55 - 59	\$198.09	\$159.96	\$118.11
60 - 64	\$266.29	\$220.41	\$159.96
Per Child	\$ 34.10	\$ 30.38	\$ 18.91

How to Apply

1. Calculate your premium using the charts to the left and Premium Calculation Instructions below.

Note: Additional premium is required for optional riders. Call your agent or the number below to obtain the premium amount for the optional rider(s) selected.

2. Complete all information on the application. If you have questions about which plan options to select, see the **Build Your Plan Here** section on the opposite side of this panel.

3. Sign and date the application. Mail the application **with your form of payment** to United Security Life and Health, 6640 South Cicero Avenue, Attention: New Business Department, Bedford Park, IL 60638.

If you have any questions, please contact the agent listed on your brochure or United Security Life and Health at **800-875-4422**.

Premium Calculation Instructions		
Step 1. Choose Payment Option Single or Monthly	SINGLE PAYMENT <i>(Credit Card, PAC or Check Accepted)</i>	MONTHLY PAYMENT <i>(Credit Card or PAC only)</i>
Step 2. Determine Monthly Base Rate From the chart(s) provided to the left, determine the monthly base rate for all insureds. The rate chart is set up by age, deductible† and zip code. Primary Insured Base Rate _____ Spouse Base Rate + _____ Dependent 1 Base Rate + _____ Dependent 2 Base Rate + _____ Dependent 3 Base Rate + _____ YOUR TOTAL MONTHLY BASE RATE = _____		
YOUR MONTHLY PAYMENT FACTOR =	× 1.00	× 1.25
Step 3. Determine Adjusted Monthly Base Rate Multiply Your Total Monthly Base Rate by Your Monthly Payment Factor to get your ADJUSTED MONTHLY BASE RATE = _____		
Step 4. Multiply Months for Single Pay For single payments, multiply your Monthly Premium Rate by the number of months (1-6) you wish to be covered. CUMULATIVE PREMIUM RATE = _____	× _____ # of Months	
Step 5. Determine Total Premium Due For single payments, add Policy Fee to Your Cumulative Premium Rate to determine your Total Premium Due to activate your policy. For monthly payments, add Policy Fee to Your Adjusted Monthly Base Rate to determine your Total Premium Due to activate your policy. TOTAL PREMIUM DUE = _____	+ \$25.00 Policy Fee	+ \$25.00* Policy Fee

† Choose only one deductible amount per policy.

* Policy Fee is added to the first month's premium only. Application Fee is waived when applying online at www.unitedsecuritylandh.com

