

PROFESSIONAL
INSURANCE
COMPANY



Hospital Indemnity Plans

The Finest in Supplemental Health Benefits

Health Savings Account (HSA)

Traditional/Co-pay Supplement

Catastrophic (Cat) Value

Max Plan

Underwritten by Professional Insurance Company
(In California, PIC Life Insurance Company)

Sun 
Life Financial®

Choose the Professional Insurance Company (PIC) for the finest in Supplemental Health Benefits!

The gaps are getting bigger. Health plans have higher deductibles and larger out-of-pocket limits annually, while hospital and medical expenses increase tremendously each year. You can protect yourself from the potentially devastating expense of a hospital confinement or surgical procedure with any of the following four plan designs that make up PIC's Hospital Indemnity Plan:

- **Health Savings Account (HSA).** You can keep your existing HSA and purchase this added protection against hospital confinement costs.
- **Traditional/Co-Pay Supplement.** If you have a traditional health plan, this plan design protects you against hospital confinement costs.
- **Catastrophic (Cat) Value.** You can
 1. insure several family members on a limited budget, or
 2. protect yourself from high deductibles.
- **Max Plan.** Get maximum protection against hospital and surgical expenses, outpatient sickness and wellness.

Guaranteed Issue

PIC Hospital Indemnity Plans are automatically "Guaranteed Issue" to full-time workers in FL, GA and NC, meaning you can not be turned down for coverage based on your health status. However, this Guarantee Issue program can be discontinued at the discretion of PIC. Once your policy has been approved for Guarantee Issue, it cannot be cancelled except for nonpayment of premium.

For information about PIC plans in FL, GA and NC, please contact TGAR/BMC Agency, Inc. at 1-800-357-2242.

To qualify for Guarantee Issue, you must:

- Be actively employed 30+ hours per week at a job that you have held for over 30 days, receiving a W2.
- Be "self-employed" or a 1099 contract employee, you must have a business address that is not your home address.

Policies are Guaranteed Renewable until age 65, and through age 69 if you are continuously employed 30+ hours per week.

PIC Hospital Indemnity Insurance (HPHI2000)

When used with your group or individual major medical plan, every PIC supplement health plan will allow you to leave the hospital after a period of average confinement with significantly reduced or no out-of-pocket expenses.

- Plans are Guaranteed Renewable to age 65, and conditionally renewable through age 69
- Plans covers any licensed doctor. You can use any doctor or hospital of your choice
- Pays over and above any other insurance benefits that you may have (other than Workers Comp)
- Benefits are paid first dollar with no deductibles and no coinsurance
- Plans cover maternity as any illness
- Issued Primary Insured age 18-69

PIC Hospital Indemnity Insurance (HPHI2000)

HSA Supplement

- \$30 Per Day Daily Room Benefit
- Up to \$5,000 First Hospital Confinement
- \$500 Lump Sum upon Admission
- Specific Injury Rider
- \$100 Per Accident

Traditional/Co-pay Supplement

- \$30 Per Day Daily Room Benefit
- Up to \$5,000 First Hospital Confinement
- Up to \$2,500 per Surgery
- \$100 Per Day Private Duty Nursing
- Specific Injury Rider
- \$100 Per Accident

Cat Value

- \$500 Lump Sum upon Admission
- \$100 Per Day Daily Room Benefit
- \$500 Per Day in ICU
- Up to \$5,000 First Hospital Confinement
- Up to 5,000 per Surgery
- Anesthesia at 25% amount paid for Surgery
- Specific Injury Rider
- \$100 Per Accident

Max Plan

- \$500 Lump Sum upon Admission
- \$300 Per Day Daily Room Benefit
- Up to 5,000 per Surgery
- \$100 Per Day Private Duty Nursing
- \$100 Per Accident
- \$1,000 Per Day in ICU
- Up to \$5,000 First Hospital Confinement
- Anesthesia at 25% amount paid for Surgery
- Specific Injury Rider
- \$50 Per Outpatient Sickness visit per insured category (for employee, for spouse and for all children, not each child)

	Monthly Plan Rates			
	HSA Supplement	Traditional/Co-pay Supplement	Cat Value	Max Plan
Employee	\$ 29.91	\$ 35.41	\$ 70.54	\$ 113.64
Employee + Spouse	58.07	69.07	139.33	225.33
Employee + Child(ren)	45.57	54.37	107.08	180.78
Full Family	73.73	88.03	175.37	292.67

Outpatient Sickness Benefits

You can purchase this Outpatient Sickness benefit in addition to any of the four plan designs listed above; it pays for up to four different covered sicknesses in a calendar year per insured category (4 for employee, 4 for spouse and 4 for all children, not each child)

	Monthly Plan Rates
Employee	\$ 7.30
Employee + Spouse	14.60
Employee + Child(ren)	19.30
Full Family	26.60

NOTICE to BUYER: This policy provides limited benefits and is not a replacement/substitute for comprehensive medical coverage. Benefits provided are supplemental, and are not intended to cover all medical expenses. The coverage(s) described herein contain certain exclusions and limitations as well as terms under which such coverage can be continued or discontinued. For costs and complete details of the plans and services advertised, including availability, please contact your insurance representative.

For information about PIC plans in FL, GA and NC, please contact TGAR/BMC Agency Inc. at 1-800-357-2242.

Your representative is:

Agent Name	Phone
------------	-------

LIMITATIONS & EXCLUSIONS

This Policy (including any Rider(s) attached) does not cover losses sustained while, (not applicable in IN), caused by, contributed to (not applicable in IL), or resulting from (in PA does not pay Benefits for loss from):

- a. being legally intoxicated as defined by state law where the loss occurred (not applicable in MN, OK; in SC where the Insured resides; in MN bodily injuries received while the insured was operating a motor vehicle under the influence of alcohol as evidenced by a blood alcohol level in excess of the state intoxication limit) or being (in WI, intentionally) under the influence of any narcotic unless administered on the advice of a Physician (not applicable in CT) (Item a. not applicable in DC, ID, MD, MI, SD, WA); or
- b. alcoholism (not applicable in MN; in PA treatment of) or drug addiction (Item b. not applicable in DC, MD, SD); or
- c. attempted suicide while sane or insane (insane does not apply in MO) or intentionally self-inflicted Injury (in CO suicide or attempted suicide while sane or intentionally self-inflicted injury while sane); or
- d. Mental or Nervous Disorders without demonstrable organic disease (not applicable in DC); or
- e. being exposed to (not applicable in MN) war or any act of war, declared or undeclared or while serving (in FL on active duty) in the armed forces; or (in OK war or act of war, declared or undeclared while serving in the armed forces or any auxiliary unit attached thereto);
- f. engaging in an illegal activity (not applicable in CT and MD; in CA engaging in a felony; in CT and ID participation in a felony, riot or insurrection; in OK participation in a felony, riot or insurrection; in SC engaging in an illegal occupation or committing or attempting to commit a felony) or
- g. conditions specifically excluded by amendment or Endorsement; or
- h. any Pre-Existing Conditions as defined in this Policy.

This Policy (including any Rider(s) attached) does not pay Benefits for:

- a. care that is primarily for 1) rest; or 2) convalescence; or 3) rehabilitation (not applicable in ID); or
- b. treatment which is rendered outside the United States, its possessions, or Canada, except for emergency care for acute onset of Sickness or Injury sustained while traveling for business or pleasure; or
- c. Dental Treatment or plastic surgery for cosmetic purposes. This exclusion does not apply if the treatment or surgery (in ID, IL reconstructive surgery) is: (1) due to an Injury (in ID, IL incidental to or follows surgery due to an injury, infection or other diseases of the involved part); or (2) to restore normal bodily functions. (In MD benefits will be paid for complications that oc-

cur during the surgery that have not been excluded in any part of this policy; or (d. Payment of health care services that the appropriate regulatory board determines were provided as a result of a prohibited referral); (In ID add: or (3) for congenital disease or anomaly of a newborn Eligible Dependent Child.

PRE-EXISTING CONDITIONS

This Policy and any attached Rider(s) do not cover pre-existing conditions whether disclosed in the application or not (In WI and MD, whether disclosed in the application or not does not apply), for the first 12 months (In NM, 6 months; in TX, 6 months for persons age 65 or older on the date coverage begins) beginning on the date that person becomes an Insured on this Policy or Rider. By pre-existing conditions, We mean:

- a. the existence of symptoms (In MN the existence of symptoms during the 2 years preceding the Policy Effective Date of Your coverage for which medical advice or treatment was recommended by or received from a physician) (In SC, a condition misrepresented or not revealed in the application for which symptoms exist) before the Policy Effective Date which would cause an ordinarily prudent (In DC, ordinarily prudent does not apply) person to seek medical advice, diagnosis, care, or treatment during the 2 years (In ID and NM, 6 months; in IL, SD and VA, 12 months) preceding the Policy Effective Date of Your coverage (In CA, MT, NC, PA and WY, not applicable); or
- b. a condition for which medical advice or treatment was recommended by or received from a Physician during the 2 years (In ID, NM and WY, 6 months; in CA, MT, SD and VA, 12 months) preceding the Policy Effective Date of Your coverage. (In NC, not applicable) (In NC, By pre-existing conditions, We mean: those conditions for which medical advice or treatment was received or recommended or that could be medically documented within the 12 months period immediately preceding the Policy Effective Date. Pre-existing conditions exclusions may not be implemented by any successor plan as to any Insureds who have already met all or part of the waiting period requirements under any previous plan. Credit must be given for that portion of the waiting period that was met under the previous plan.) Any person who was age 65 and over when they become an Insured under this Policy, pre-existing conditions shall mean only those conditions specifically excluded in any part of this contract or attached endorsement. Conditions specifically named or described as excluded in any part of this Policy are never covered. (In WY, credit shall be given to any Insured who was covered by a private or public health benefit plan if the previous coverage was continuous to the date not more than 90 days prior to the Effective Date of this Policy). (In WI and MD, any condition noted in the application and not specifically excluded in any part of the policy is not considered a pre-existing condition.)

Underwritten by Professional Insurance Company (In California, PIC Life Insurance Company) (Wellesley Hills, MA)
 Professional Insurance Company (In California, PIC Life Insurance Company) is a member of the Sun Life Financial group of companies.
 ©2009 Sun Life Assurance Company of Canada. All rights reserved.
 Sun Life Financial and the globe symbol are registered trademarks of Sun Life Assurance Company of Canada. Visit us at www.sunlife-usa.com

SLPC 20037 02/09 (exp. 02/11)