LIFESECURE INSURANCE COMPANY



Personal Accident Insurance Monthly (Unisex) Rates - **MICHIGAN** with Accidental Death Benefit

	\$0 Deductible			
Annual Benefit Bank	Self	Self + Spouse	Self + Child(ren)	Self + Family
\$2,500	\$23.41	\$26.81	\$29.37	\$30.06
\$3,000	\$25.72	\$29.49	\$33.16	\$33.92
\$4,000	\$28.01	\$32.16	\$36.93	\$38.94
\$5,000	\$30.27	\$34.81	\$40.68	\$43.93
\$6,000	\$31.28	\$37.22	\$43.73	\$47.92
\$7,000	\$32.87	\$39.62	\$46.76	\$51.88
\$8,000	\$34.45	\$42.00	\$49.77	\$55.82
\$9,000	\$36.01	\$44.37	\$52.77	\$59.74
\$10,000	\$39.24	\$49.21	\$58.87	\$67.69
\$11,000	\$40.22	\$50.87	\$61.31	\$70.55
\$12,000	\$41.19	\$52.52	\$63.74	\$73.40
\$13,000	\$42.15	\$54.16	\$66.16	\$76.23
\$14,000	\$43.10	\$55.79	\$68.56	\$79.05
\$15,000	\$45.12	\$59.18	\$73.51	\$84.85
\$16,000	n/a	\$60.16	\$75.55	\$86.94
\$17,000	n/a	\$61.13	\$77.58	\$89.02
\$18,000	n/a	\$62.10	\$79.60	\$91.09
\$19,000	n/a	\$63.06	\$81.61	\$93.15
\$20,000	n/a	\$64.02	\$83.61	\$95.19
\$21,000	n/a	\$64.98	\$85.60	\$97.24
\$22,000	n/a	\$65.93	\$87.58	\$99.27
\$23,000	n/a	\$66.88	\$89.56	\$101.29
\$24,000	n/a	\$68.50	\$92.43	\$106.43
\$25,000	n/a	\$70.55	\$96.59	\$110.79
\$30,000	n/a	n/a	n/a	n/a
\$40,000	n/a	n/a	n/a	n/a
\$50,000	n/a	n/a	n/a	n/a

To review monthly premiums for different benefit amounts, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

LIFESECURE INSURANCE COMPANY



Personal Accident Insurance Monthly (Unisex) Rates - **MICHIGAN** with Accidental Death Benefit

	\$500 Deductible			
Annual Benefit Bank	Self	Self + Spouse	Self + Child(ren)	Self + Family
\$2,500	\$16.99	\$20.48	\$22.91	\$24.05
\$3,000	\$18.93	\$22.76	\$26.08	\$27.31
\$4,000	\$20.91	\$25.06	\$29.29	\$31.55
\$5,000	\$22.93	\$27.40	\$32.53	\$35.82
\$6,000	\$23.92	\$29.52	\$35.21	\$39.30
\$7,000	\$25.38	\$31.67	\$37.90	\$42.80
\$8,000	\$26.85	\$33.84	\$40.62	\$46.33
\$9,000	\$28.34	\$36.03	\$43.36	\$49.88
\$10,000	\$31.18	\$40.27	\$48.70	\$56.85
\$11,000	\$32.17	\$41.88	\$51.01	\$59.56
\$12,000	\$33.17	\$43.49	\$53.34	\$62.29
\$13,000	\$34.17	\$45.12	\$55.68	\$65.03
\$14,000	\$35.19	\$46.75	\$58.03	\$67.79
\$15,000	\$37.09	\$49.89	\$62.58	\$73.13
\$16,000	\$38.00	\$50.98	\$64.65	\$75.30
\$17,000	\$38.92	\$52.08	\$66.73	\$77.48
\$18,000	\$39.85	\$53.19	\$68.82	\$79.67
\$19,000	\$40.78	\$54.30	\$70.92	\$81.86
\$20,000	\$41.72	\$55.42	\$73.03	\$84.07
\$21,000	\$42.65	\$56.54	\$75.14	\$86.29
\$22,000	\$43.58	\$57.65	\$77.25	\$88.51
\$23,000	\$44.52	\$58.78	\$79.37	\$90.74
\$24,000	\$45.92	\$60.51	\$82.32	\$95.80
\$25,000	\$47.70	\$62.63	\$86.44	\$100.20
\$30,000	n/a	\$67.20	\$92.65	\$109.33
\$40,000	n/a	\$76.34	\$105.06	\$127.60
\$50,000	n/a	\$85.48	\$117.48	\$145.87

To review monthly premiums for different benefit amounts, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

What type of services does Personal Accident Insurance pay benefits for?

- ambulance (once per covered accident, per covered family member)
- initial services (received within one week of covered accident in a hospital, urgent care center or physician's office)
- hospitalization, including intensive care unit (ICU)
- major diagnostic exams: CT, MRI, EEG, diagnostic X-ray (covered up to \$750 per exam; one per covered accident*)
- tests and X-rays, other than diagnostic X-rays: (one test or one set of X-rays within 90 days of covered accident)
- surgery (up to two per covered accident, per covered family member; performed within six months of covered accident)
- drugs (administered in a hospital, urgent care center or physician's office at time of initial care)

- physician follow-up services, including chiropractic (up to one visit per day, with a maximum of three visits per covered accident, within 30 days of covered accident)
- rehabilitative therapy: physical, occupational and speech therapy, or chiropractic services (one visit per day, with a maximum of 10 visits per covered accident, per covered family member; visits must begin within 90 days of covered accident and occur within six months of covered accident)
- durable medical equipment (rental or purchase of qualified equipment prescribed within 30 days of covered accident)
- prosthetic devices (must be received within one year of covered accident)
- * Per covered family member; within 30 days of covered accident.

	Accidental Death Benefit Payouts
For you	\$10,000
For your spouse/partner	\$10,000
For each dependent child	\$5,000

Note: Benefits pay if death occurs within 90 days of the covered accident.

Accidental Death Benefit

Following the loss of a loved one, families often face final expenses, medical bills and other unexpected costs. In the unfortunate event that an accidental injury results in the death of a covered family member, your Personal Accident Insurance policy will pay a lump sum cash benefit to provide additional financial support when it's needed the most.

Limitations or Conditions on Eligibility for Benefits

Exclusions: Care must be provided within the United States, its territories or possessions or Canada to be considered eligible for benefits.

No benefits of this Policy are payable when the loss is contributed to or caused by: operating, learning to operate, or serving as a crew member of any aircraft; or engaging in hang-gliding, hot air ballooning, bungee jumping, parachuting, scuba diving, sail gliding, or parasailing; or riding in or driving any motor-driven vehicle in a race, stunt show or speed test; or officiating, coaching, practicing for or participating in any semi-professional or professional competitive athletic contest for which any type of compensation or remuneration is received; or any act of war whether declared or undeclared; or engaging in any "willful criminal activity", at the level of misdemeanor or a felony; or commission of or attempt to commit a felony or to which a contributing cause was the Covered Person being engaged in an illegal occupation or other willful criminal activity; or hernia of any kind.

Willful criminal activity includes but is not limited to operating a vehicle while intoxicated in violation of Michigan law, or similar law in a jurisdiction outside of this state, or operating a methamphetamine laboratory as defined by law. Willful criminal activity does not include a civil infraction or other activity that does not rise to the level of a misdemeanor or felony.

No benefits of this Policy are payable for: any illness, loss, or condition specifically excluded from the definition of Accidental Injury; dental care or treatment unless caused by Accidental Injury to natural teeth; or treatment for a mental or nervous disorder or disease.

This is an accident only policy and provides limited benefits.

For more information, contact your agent or visit us at YourLifeSecure.com

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