

Heart & Stroke Plus



Policy Highlights



Liberty Bankers[®]
Insurance Group | Liberty Bankers Life

Unfortunately, we live in an age when almost everyone knows of someone who has had a heart condition or stroke. Liberty Bankers Life Insurance Company's Heart & Stroke Plus insurance can help with the financial burden after having a heart condition or stroke. It pays a lump sum directly to the policyholder and the benefits can be used any way the insured sees fit.

Policy Highlight	Policy Details		
ISSUE AGES	18-85		
COVERAGE TYPE	Individual, Individual & Spouse, Individual & Children, Family		
SIMPLIFIED ISSUE	e-Application		
RATES	Gender specific for Individual and Individual & Children Plans (nicotine and non-nicotine)		
POLICY DURATION	10-year Period or Lifetime		
PREMIUM	Automatic Bank Withdrawal: Monthly Direct Bill: Semi-Annual & Annual Credit Card: Monthly List Bill: Monthly \$25 Application Fee		
HOUSEHOLD DISCOUNT	10% Household Discount is available when the applicant lives in the same household with another person 50 years or older and has resided together for the past 12 months, regardless of whether they sign up for coverage. (May not be available in all states)		
WAITING PERIOD	30-day period beginning on the policy date		
PRE-EXISTING CONDITION	12 months after policy date		
LUMP-SUM BENEFIT	DESCRIPTION	AGES 18-64	AGES 65-85
	HEART ATTACK	UP TO \$75,000	UP TO \$60,000
	STROKE	UP TO \$75,000	UP TO \$60,000
	CORONARY ARTERY BYPASS *25% OF LUMP-SUM BENEFIT	UP TO \$18,750	UP TO \$15,000
	AORTIC SURGERY *25% OF LUMP-SUM BENEFIT	UP TO \$18,750	UP TO \$15,000
	HEART VALVE REPLACEMENT/ REPAIR SURGERY *25% OF LUMP-SUM BENEFIT	UP TO \$18,750	UP TO \$15,000
	CORONARY ANGIOPLASTY *10% OF LUMP-SUM BENEFIT	UP TO \$7,500	UP TO \$6,000
	STENT PLACEMENT *10% OF LUMP-SUM BENEFIT	UP TO \$7,500	UP TO \$6,000
	COVERED CHILD BENEFIT IS 50% OF THE POLICYOWNER BENEFIT		
RECURRENCE BENEFIT	<ul style="list-style-type: none"> Less than 2 Years: 0% 2-4 Years: 25% 5-9 Years: 50% 10+ Years: 100% Percentage of the benefit amount otherwise payable		
COMPANION TRAVEL BENEFIT	Pays \$100 per day for a maximum of 10 days per calendar year to cover expenses incurred by an adult family member for overnight stay to accompany the confined covered person at a hospital located more than 50 miles from policyowner's primary residence		
PET BOARDING BENEFIT	Pays \$50 per day for a maximum of 10 days per calendar year for boarding a family pet in a pet boarding facility while confined in a hospital		

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OPTIONAL BENEFIT RIDERS	<p>ACCIDENT Assuming 10 units of coverage purchased, per covered accident, pays a lump sum benefit up to \$5,000 for fractures, dislocations, and burns, up to \$250 for lacerations, up to \$200 for eye injury, up to \$50,000 for accidental death, and up to \$20,000 for loss of limbs.</p> <p>ACCIDENT INCOME Pays \$100, \$200, \$400, or \$600 per week for certain injuries including: fractures, dislocations, burns, and dismemberments. The number of weeks is set out in the benefit schedule. Weekly dollar amount selected at time of application. Only available if the Accident Rider is selected.</p> <p>AMBULANCE SERVICES Pays \$250 per ground ambulance transport and \$500 for air ambulance transport as a result of injury or sickness. Maximum annual limit per calendar year: two ground transports and two air transports.</p> <p>CANCER Pays a lump sum benefit up to \$40,000 if you are diagnosed with cancer, 25% of the lump sum for carcinoma in-situ, an additional 25% of the lump sum benefit for experimental treatment, and 1% of the lump sum for skin cancer. After your recovery from cancer, your lump sum benefit starts to rebuild with the recurrence benefit – less than 2 Years: 0%, Years 2-4: 25%, Years 5-9: 50%, Years 10+: 100%.</p> <p>DENTAL, VISION, AND HEARING Pays \$75 for dental preventive services, \$50 for a vision exam, \$50 for a hearing exam, and \$200 for prescription eyewear or hearing aids. Applicant can elect a \$400, \$800, or \$1,200 annual rider maximum for dental, vision, and hearing benefits. The available benefit range for dental treatments is based on the percentage of charged amount: Year 1 - 60%, Year 2 - 70%, Years 3+ - 80%. All benefits and limits are per calendar year and non-preventive services are subject to a \$50 deductible. Longer waiting periods apply.</p> <p>EMERGENCY ROOM AND URGENT CARE Pays \$250 per emergency room visit and \$50 per urgent care visit as a result of an injury or sickness. Maximum limit: one visit per calendar quarter for emergency room and one visit per calendar quarter for urgent care.</p> <p>HOSPITAL INDEMNITY Pays a benefit of \$100-\$750 per day for each day of hospital confinement (days 2-10, 15, 20, 31) days depending on the benefits selected. Pays \$25 per day for each additional day of hospital confinement up to an additional 31 days beyond the hospital confinement benefit period selected. Pays an additional \$150 per day for a maximum of seven days per calendar year for each day of services in an intensive care unit of a hospital. Pays 100% of the hospital confinement benefit amount per day for up to ten days per calendar year while receiving services in a hospital observation unit. Pays \$175 per day for a maximum of seven days per calendar year for each day of confinement in a hospital due to a mental or nervous disorder.</p> <p>HOSPITAL INDEMNITY AUTOMATIC BENEFIT INCREASE The hospital confinement, extended hospital confinement, and observation unit benefits will increase 5% per year from the benefit amount payable, up to a maximum of 50%. Only available if the Hospital Indemnity Rider is selected.</p> <p>LUMP SUM HOSPITAL CONFINEMENT Pays \$500, \$1,000, or \$2,000 for up to two separate periods of confinement each calendar year as a result of an injury or sickness when the insured is admitted to a hospital.</p> <p>OUTPATIENT DIAGNOSTIC SERVICES AND WELLNESS Pays \$50 for basic diagnostic services and \$200 for advanced diagnostic services. Maximum annual limit: \$500 for diagnostic services. Pays \$25 per visit for wellness benefits up to a total of four visits per calendar year.</p> <p>OUTPATIENT SURGERY Pays \$250, \$500, \$750, or \$1,000 for up to two outpatient surgeries as a result of an injury or sickness in an ambulatory surgical center or outpatient facility of a hospital each calendar year.</p> <p>OUTPATIENT THERAPY AND MEDICAL DEVICES Following a hospital confinement or qualified outpatient surgery, pays \$50 per day with a choice of 5, 15, or 30 days per calendar year for outpatient therapy and 5 visits for chiropractic services. Pays \$50- \$200 for medical equipment and appliances, pays \$500-\$2,000 for home modifications, and pays \$2,000 for a prosthetic device.</p> <p>RETURN OF PREMIUM (ROP) UPON DEATH INDEMNITY Available for ages 18-80. Return of premium in the event of death is the sum of all premiums paid minus benefits paid while rider was in force times the ROP percentage. Ages 18-50: 100% ROP, Ages 51-60: 75% ROP, and Ages 61+: 50% ROP.</p> <p>RETURN OF PREMIUM (ROP) UPON DEATH WITH ACCELERATION INDEMNITY Available for ages 18-50. Return of premium in the event of death is the sum of all premiums paid minus benefits paid while rider was in force. Plus, after every 15 years, receive 50% of the sum of all premiums paid minus benefits paid while the rider is in force.</p> <p>SKILLED NURSING FACILITY AND HOSPICE Pays \$100 to \$300 per day for days 1-21, 21-100, or days 1-100 when the insured is confined to a skilled nursing facility. Hospice care in a hospice facility is paid at 25% for up to 14 days. Skilled nursing facility and hospice confinement must begin within 30 days of a hospital/skilled nursing confinement of three or more days.</p>	
	30 DAY RIGHT TO EXAMINE	If for any reason policyholder is not satisfied, they may return the policy to Liberty Bankers Life at the administrative office or the agent within thirty (30) days.