

Your choices for your comfort and care

Protection SeriesSM—
Recovery Care
Insurance Plans
Texas

**Continental Life Insurance Company
of Brentwood, Tennessee**
An Aetna Company



Because you care about your care

You can plan now for the level of care and comfort you deserve in case of an accident or illness that requires assistance and care during recovery.

Expecting the unexpected

Whether you are working or retired, it's important to consider the cost of health care and how an unexpected accident or illness could impact you and your family's finances. Even those who lead a healthy lifestyle may be at risk of experiencing an unexpected need for recovery care due to the onset of health issues and disabilities.



At least **70%** of people over 65 will need long-term care services and support at some point.¹

Health care is constantly changing and the costs are increasing

Hospital confinement is expensive, sometimes resulting in shorter hospital stays followed by costly rehabilitation and therapy. Skilled nursing facilities (nursing homes) provide another option for recovery and care, offering a wide range of medical, health, and personal care services.



The average cost of a private room at a skilled nursing facility is nearly \$112,000/year and is projected to be over \$141,000/year by 2030.¹

Assisted living facilities provide yet another option for those who need limited help with daily care and are ideal for socialization activities to help prevent isolation and withdrawal.



The average cost of a one bedroom at an assisted living facility is over \$55,000/year and is projected to be over \$70,000/year by 2030.¹



Every 65 seconds someone is diagnosed with dementia or Alzheimer's disease. 12.7 million people age 65 and older will have Alzheimer's by 2050.¹

Source: ¹<https://www.seniorliving.org/memory-care/costs/>



Freedom to choose

Who would choose the hospital or facility for your recovery and care if needed? Just the thought of being in unfamiliar surroundings may be uncomfortable. But an accident or illness may leave you with no other choice for receiving care.

Your choice of solutions

A **Recovery Care insurance plan** gives you the freedom to choose how you want to receive care and recover, along with where. You choose the hospital or nursing facility based on the insurance plan options selected. Benefits are paid directly to you, or a medical provider that you designate, and are paid in addition to any other health care coverage.



More to consider

It's important to know and understand your health insurance coverage before you need to use it. And we can help. Here's a simple look at the importance of our **Recovery Care insurance plans**.

Place of recovery and care	Medicare coverage*	Recovery Care coverage**
Nursing Facility	Medicare pays the first 20 days of skilled care only if admitted as an inpatient for at least 3 days. It does not pay for intermediate or custodial care.	The Daily Nursing Facility coverage will pay benefits for all levels of nursing facility care: skilled, intermediate, and custodial. The nursing facility does not have to be approved by Medicare.
Assisted Living Facility	Medicare does not pay for any services or costs.	The Daily Nursing Facility coverage will pay benefits for services in an assisted living facility.

* This coverage will pay if the insured cannot perform two or more activities of daily living (ADL) or has a cognitive impairment.

** This coverage will pay if the insured cannot perform two or more ADL or has a cognitive impairment; and receives three weekly one-hour home care agency visits on separate days.

Recovery Care Insurance Plans



Plan benefits

Daily Nursing Facility*

Including assisted living and bed reservation

The benefit is available:

- up to \$400 daily maximum
- with choice of covered days: 90, 180, 270, or 360 days
- with choice of waiting period: 0, 20, or 100 days
- for issue ages 50-89 (age at last birthday)

This coverage will pay a daily benefit for confinement in a nursing or assisted living facility, provided you cannot perform two or more activities of daily living (ADL) or you have a cognitive impairment. No prior hospital stay is required.

The bed reservation coverage will pay up to a maximum benefit of 10 days if you return to the facility where you resided prior to your hospital confinement.

Daily Hospital Indemnity*

The benefit is available:

- up to \$400 daily maximum (for each day of confinement)
- with 31 days per period of care
- with a lifetime maximum of 365 days
- for issue ages 50-89 (age at last birthday)

This coverage will pay a daily hospital benefit if you are confined in a hospital, including observation stays in a hospital.

*At least \$20 per day of Hospital Indemnity must be purchased with the Daily Nursing Facility benefit.

For complete details of all provisions or benefits, please read your policy carefully.

More about the plans

- Benefits are paid directly to you, or a medical provider that you designate.
- Benefits are paid in addition to any other health care insurance coverage.
- Benefits are non-taxable.
- The insurance policy is guaranteed renewable as long as the premiums are paid on time.
- Return any policy for any reason within 30 days after receipt for a full refund of all premiums paid.

Our solutions for protection. Your choices for comfort and care.



Did you know?

Nursing Facility Care can include:

- 24-hour medical care
- Post-stroke recovery
- Cardiac care
- Skilled, intermediate, and custodial care
- Rehabilitation services
- Wound care

Assisted Living Care can include:

- Daily meals
- Housekeeping and laundry
- Medical services and medication monitoring
- Personal care (such as dressing and bathing)
- 24-hour emergency care
- Social and recreational activities



Policy exclusions



We will not pay for losses caused by or resulting from:

- A.** Confinement for the following treatment, procedures, conditions, disorders or services - including:
1. Allergy testing and allergy injections;
 2. Cosmetic surgery, routine foot care, dental services, acne or varicose veins;
 3. Diagnostic lab testing, x-rays, advanced studies and venipuncture;
 4. Experimental or investigational procedures or participation in clinical trials;
 5. Infertility and impregnation procedures, such as but not limited to, artificial insemination, in-vitro fertilization, embryo and fetal implantation and G.I.F.T. (gamete intrafallopian transfer);
 6. Mental or nervous disorders without demonstrable organic disease or substance use disorders;
 7. Obesity, extreme obesity, morbid obesity or weight reduction, including, but not limited to, wiring of the teeth and all forms of surgery including, but not limited to, bariatric surgery, intestinal bypass surgery and complications resulting from any such surgery;
 8. Pregnancy and related services; except for complications of pregnancy;
 9. Programs, treatment or procedures for tobacco cessation;
 10. Routine newborn care, including routine nursery charges;
 11. Sex transformation; treatment of sexual function, dysfunction or inadequacy; or treatment to enhance sexual performance or desire;
 12. Therapy or treatment of learning disorders or disabilities, developmental delays or sleep disorders;
 13. Voluntary abortion, except with respect to the insured: (a) where such insured's life would be endangered if the fetus were carried to term; or (b) where medical complications have arisen from an abortion; and
 14. Voluntary sterilization or reversal thereof.
- B.** Outpatient treatment, services or supplies of any type.
- C.** Confinement in a hospice care facility.
- D.** Stay in a community living center or a place that primarily provides domiciliary, retirement or educational care.
- E.** Participation in a war or an act of war, riot or international armed conflict.
- F.** The commission or attempted commission of a crime or felony or while engaged in an illegal act; or while imprisoned.
- G.** Suicide or attempted suicide or intentionally self-inflicted injury, whether while sane or insane.
- H.** Injury sustained while operating a motor vehicle where the Insured's blood alcohol level, as defined by law, exceeds that level permitted by law or otherwise violates legal standards for a person operating a motor vehicle in the state where the injury occurred.
- I.** Treatment or services provided by a member of your immediate family.
- J.** Urgent care provided on the premises of, or physically a part of, a hospital.

Pre-existing condition

Pre-existing condition means a condition for which the insured has been medically diagnosed, treated by, or sought advice from, or consulted with, a physician during the six months before the insured's coverage effective date. Pre-existing conditions are not covered unless the loss begins more than six months after the coverage effective date.

Reference the policy and outline of coverage for complete details.

Policy definitions



Activities of daily living (ADL)

Basic activities necessary for independent living at home: bathing, toileting, continence, dressing, eating and mobility.

Cognitive impairment

The deterioration or loss of intellectual capacity, requiring substantial supervision for protection of self or others, as established by the clinical diagnosis of any licensed physician authorized to make such a diagnosis.

Confined/confinement

The insured is formally admitted to a nursing facility, assisted living facility, or a hospital on an inpatient basis or receives necessary and continuous observation in a hospital for at least 24 hours.

Nursing facility

A place which is a separate facility or distinct part of a health care facility which is licensed as a nursing home and provides continuous accommodations to persons who require daily nursing care services, and maintains records of each resident.

Period of care (hospital benefit)

The period of time that begins with the first day of hospital confinement due to a covered illness or injury. It ends when the insured is out of the hospital and does not require medical care for 60 continuous days.

Reference the policy for complete definitions.

Notice to buyer:

- This is not a Medicare Supplement policy.
- This is not a Major Medical policy.
- This is not a Long Term Care policy.
- This policy may not cover all of your medical or health care expenses.
- This policy should not be purchased as a substitute for Medicare or Medicare related health plans.
- This is a supplement to health insurance and is not a substitute for major medical coverage. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.
- Premiums may increase upon renewal.

This policy may not cover all costs associated with short term recovery care incurred by you during the period of care. you are advised to review carefully all policy limitations. In addition, You are advised that based on current health care cost trends, the benefits provided by this policy may be significantly diminished in terms of real value to you, depending on the amount of time which elapses between the date of purchase and the date upon which you first become eligible for those benefits.

This brochure is an illustration for policy form CLIREC14 TX and is not a contract of insurance.

Underwritten by

Continental Life Insurance Company of Brentwood, Tennessee

An Aetna Company

We have an unwavering commitment to providing the best service possible, quick claims payment, quality products with solid financial backing, and friendly associates with extensive knowledge and experience. For almost 40 years, policyholders have relied on our company to be there when they need us. We take those obligations very seriously and everything we do is focused on fulfilling our commitments in a timely, hassle-free manner – so you can have the best experience possible.

[AetnaSeniorProducts.com](https://www.aetna.com/seniorproducts)

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