

**LUMICO LIFE INSURANCE COMPANY  
POLICY CHECKLIST – PLAN N**

Applicant's Name: \_\_\_\_\_  
 Policy Number: \_\_\_\_\_  
 Name of Existing Insurer: \_\_\_\_\_  
 Expiration Date of Existing Insurance: \_\_\_\_\_

SERVICE	BENEFIT	MEDICARE PAYS	EXISTING COVERAGE	PLAN N SUPPLEMENT PAYS	YOU PAY
Hospital Inpatient	First 60 Days	All But \$1484		\$1484	\$0
	61 <sup>st</sup> to 90 <sup>th</sup> Day	All But \$371 a Day		\$371 a Day	\$0
	91 <sup>st</sup> to 150 <sup>th</sup> Day (Lifetime Reserve)	All But \$742 a Day		\$742 a Day	\$0
	Beyond 150 Days	Nothing		100% of Medicare Eligible Expenses for an additional 365 days	\$0
Skilled Nursing Facility Care	First 20 Days	100% of Medicare Approved Amounts		\$0	\$0
	Additional 80 Days	All But \$185.50 a Day		Up to \$185.50 a Day	\$0
	Beyond 100 Days	Nothing		\$0	All Costs
Medical Expense	Physician's Services in hospital, office or home, inpatient and outpatient medical services and supplies at a hospital, physical and speech therapy and ambulance	Generally 80% of Medicare Determined allowable charges after \$203 Part B Deductible is paid		Balance, other than up to \$20 per office visit and up to \$50 per emergency room visit. The co-payment of up to \$50 is waived if the insured is admitted to any hospital and the emergency visit is covered as a Medicare Part A expense	\$203 Part B Deductible and up to \$20 per office visit and up to \$50 per emergency room visit. The co-payment of up to \$50 is waived if the insured is admitted to any hospital and the emergency visit is covered as a Medicare Part A expense
Prescription Drugs		Inpatient prescription drugs. 80% of allowable charges for immunosuppressive drugs during the first year following a covered transplant		Generally 20% of Medicare Approved Amounts for Inpatient prescription drugs	All Remaining Charges after Medicare and Medicare Supplement Pays

This Policy does comply with the minimum standards set forth in Section 363 of the Illinois Insurance Code.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Insurance Producer