



UNL

Home Health Care Shield

Short-Term Home Health Care Insurance



*Hover with your
phone's camera to
scan/open.*

UNDERWRITTEN BY:
United National Life Insurance Company of America (UNL)

UADH101-18

UNB220
Kentucky (Rev. 8/22)

SHORT-TERM HOME HEALTH CARE INSURANCE



Why short-term Home Health Care Insurance from UNL?



Because, like most Americans, you would rather recuperate at home.



Benefits can help your health insurance cover deductibles and co-payments.



Benefits are paid directly to you, regardless of any other insurance you may have.



To collect Short-Term Home Health Care benefits, a prior hospitalization stay is not required.



You can combine your Short-Term Home Health Care Benefits with coverage for hospital stays and accidents to enhance your coverage!

SHORT-TERM HOME HEALTH CARE BENEFITS

UNL will pay a daily benefit for each day you receive the following home health care services. Daily benefit amounts will vary by plan selected* (maximum benefit period is 360 days). To qualify for benefits, a Licensed Health Care Practitioner must certify you as having a Cognitive Impairment or the inability to perform at least two (2) of six (6) Activities of Daily Living without substantial assistance (bathing, continence, dressing, eating, toileting and transferring).

Benefit	Plan B	Plan C
Skilled nursing care, RN	\$150	\$200
General nursing care, (LPN/LVN)	\$120	\$200
Physical Therapy	\$150	\$200
Speech Pathology	\$150	\$200
Occupational Therapy	\$150	\$200
Chemotherapy Specialist	\$120	\$200
Enterostomal Therapy	\$100	\$200
Respirational Therapy	\$100	\$200
Medical Social Services	\$200	\$300

** Total benefits payable for all of the home health care services listed are limited to a combined maximum daily benefit. The combined maximum daily benefit for Plan B is \$300 and for Plan C is \$450.*

SHORT-TERM HOME HEALTH CARE AIDE BENEFIT

Plan B	Plan C
\$80	\$120
<i>Per Day</i>	<i>Per Day</i>

UNL will pay a daily benefit for each day you require the services of a Home Health Care Aide. Daily Benefit Amounts vary by selected plan as shown above. Benefits are payable should you have an inability to perform two or more Activities of Daily Living or have a Cognitive Impairment. A prior hospitalization stay is not required. The maximum benefit period is 60 days.

RESTORATION OF BENEFITS



Benefits restore after 180 consecutive days

Benefits restore if covered home health care services have not been received for 180 consecutive days AND a Licensed Health Care Practitioner has certified that you have sufficiently recovered to no longer require home health care or nursing care services.

RETURN OF PREMIUM DEATH BENEFIT RIDER

This rider provides a return of premium benefit in the event of your death prior to attained age eighty-six (86).



Exclusions



SHORT-TERM HOME HEALTH CARE BENEFIT EXCLUSIONS

THE POLICY DOES NOT PAY BENEFITS FOR LOSS DUE TO:

1. Mental or nervous disorders, but this shall not permit exclusion or limitation of benefits on the basis of Alzheimer's disease;
2. Alcoholism and drug addiction;
3. Illness, treatment, or medical condition arising out of:
 - a. War or act of war (whether declared or undeclared);
 - b. Participation in a felony, riot, or insurrection;
 - c. Service in the armed forces or auxiliary units;
 - d. Suicide (sane or insane), attempted suicide, or intentionally self-inflicted injury; or
 - e. Aviation (this exclusion shall apply only to nonfare-paying passengers); or
4. Treatment provided in a government facility (unless otherwise required by law), services for which benefits are available under Medicare or other governmental program (except Medicaid), any state or federal workers' compensation, employer's liability, or occupational disease law, services

provided by a member of the covered person's immediate family, and services for which no charge is normally made in the absence of insurance. Coverage is subject to a pre-existing condition limitation. Refer to the outline of coverage for more details.

This is not long-term care insurance. Coverage is subject to a pre-existing condition limitation. Short-term home health care insurance, is issued on Policy Form Series U1670 and Rider Form Series RU17RPD by United National Life Insurance Company of America, Glenview, IL. This product, its features, and riders are subject to state availability and may vary by state. Certain exclusions and limitations may apply. For cost and complete details of coverage, please refer to the outline of coverage. Exclusions are for the base home health care only. See policy for specifics.



United National Life Insurance Company of America
P.O. Box 1154 • Glenview, IL 60025-1154 • (800) 207-8050
www.unlinsurance.com