

# Home Health Care Benefits



- **Daily Maximum Benefit of up to \$150/\$300 (Classic/Deluxe) for the following services in your home from an Approved Home Health Care Practitioner, subject to the eligibility conditions:**

	Classic	Deluxe
Skilled Nursing Care (RN)	\$75	\$150
General Nursing (LPN/LVN)	\$60	\$120
Physical Therapy	\$75	\$150
Speech Pathology	\$75	\$150
Occupational Therapy	\$75	\$150
Chemotherapy Specialist	\$60	\$120
Enterostomal Therapy	\$50	\$100
Respiration Therapy	\$50	\$100
Medical Social Services	\$100	\$200

- **Home Health Care Aide:**  
Daily benefit of \$40/\$80 (Classic/Deluxe) for each day you require services immediately following a hospital confinement of not less than three days.
- **Prescription Drug Benefit:**  
Per prescription benefit of \$10/Generic or \$25/Brand, limited to a maximum benefit of \$300/\$600 (Classic/Deluxe) per policy year.
- **Restoration of Benefits:**  
The Maximum Benefit Period for Home Health Care and Aide benefits will be restored if the benefits have not been paid or required for 180 consecutive days.

# Optional Benefits

- Annual Physical Examination Benefit: \$150
- Accidental Death & Dismemberment:

Accidental Death	\$10,000.00
Maximum Dismemberment Benefit, for losses shown below:	
Sight, both eyes	\$5,000.00
Sight, one eye	\$2,500.00
Hand, arm, foot or leg (multiple)	\$5,000.00
Hand, arm, foot or leg (single)	\$2,500.00
Finger or toe (multiple)	\$1,000.00
Finger or toe (single)	\$500.00

- Home Medical Equipment Benefit: Up to \$500

**Covered Home Medical Equipment:**

**Mobility Assistance:** Wheelchairs, walkers, rollators, canes, crutches (similar walking aids)

**Transfer Aids:** Gait/transfer belts, transfer benches, transfer boards, transfer mats

**Bathroom Safety:** Shower chairs, elevated toilet seats, commode chairs

**Home Accommodations:** Hospital beds, patient lifts, trapezes

**Personal Medical Equipment:** Braces (arm, leg, back and neck)