

Re: Medicare Supplement Policy #XXXXXXXXXX

Dear <Insured Name>:

We are pleased to provide you with an exciting new service, free of charge, in conjunction with your <Company Name> Medicare Supplement policy. We have an arrangement with a nationwide group of hospitals through USA SENIOR CARE NETWORK that can mean premium savings for you. If you require a hospital stay and you are admitted to one of the network hospitals and incur a Part A Deductible, you will receive a \$100 credit towards your next premium payment.

To identify the hospitals in your area that are part of USA SENIOR CARE NETWORK, please contact USA SENIOR CARE NETWORK at 1-800-872-3860 or visit their website at <USA/Client WebAddress>. You can also find a listing of USA SENIOR CARE NETWORK participating hospitals by logging in to our website as an Insured (<Client Gateway WebAddress>) and clicking on the link to Network Hospitals. Because the network hospitals may change, check to be sure that you have the most current information available. If your provider is not currently in the network, please contact USA SENIOR CARE NETWORK so they can contact the hospital and extend an invitation to join the network.

So that you may utilize this new service, we are providing you with a new <Company Name> Identification Card. This card replaces the Identification Card that you have today. **When you are admitted to the hospital or when you visit your doctor, please be sure to show this new card. This new service does not change any provisions of your policy.**

Once Medicare processes your claim, it is sent to us electronically. We will handle your claim for Medicare Supplement benefits. If there is an inpatient deductible applicable to your stay in a USA SENIOR CARE NETWORK participating hospital, you will receive a \$100 credit towards your next premium payment. If your premium is automatically deducted from your banking account, we will adjust the deduction by the premium credit. If you are on direct billing, your next premium notice will reflect the premium credit and the amount due will be less the premium credit.

If we can be of further assistance, please call us toll-free at <Client Phone>. Representatives are available Monday through Thursday from 9:00 AM to 5:00 PM, and Friday from 9:00 AM to 12:00 PM Eastern Time. You may also correspond with us by faxing to <Client Fax>, attention Customer Service Department. One of our representatives will be happy to assist you.

Sincerely,

<Company Name>

Customer Service Department