

Group Hospital Indemnity Insurance



What is Hospital Indemnity Insurance?

This plan provides financial assistance when you are confined to a hospital. It allows you to avoid dipping into savings, or having to borrow to cover out-of-pocket expenses that health insurance was never intended to cover, such as transportation, meals for family members, help with child care cost, and time away from work.

Hospital Admission

Payable when an insured person is admitted to a hospital and confined as an inpatient because of a covered accidental injury or because of a covered sickness. **Not payable for confinement to an observation unit, or for emergency room treatment or outpatient treatment.**

Hospital Confinement

Payable for each day that an insured person is confined to a hospital as an inpatient as the result of a covered accidental injury or because of a covered sickness. If we pay benefits for confinement and the insured person becomes confined again within six months because of the same or related condition, we will treat this

confinement as the same period of confinement. This benefit is payable for only one hospital confinement at a time even if caused by more than one covered accidental injury, more than one covered sickness, or a covered accidental injury and a covered sickness.

Hospital Intensive Care

Payable for each day that an insured person is confined in a hospital intensive care unit because of a covered accidental injury or because of a covered sickness. This benefit is payable in addition to the Hospital Confinement Benefit. We will pay benefits for only one confinement in a hospital's intensive care unit at a time, even if it is caused by more than one covered accidental injury, more than one covered sickness or a covered accidental injury and a covered sickness. If we pay benefits for confinement in a hospital's intensive care unit and an insured person becomes confined to a hospital's intensive care unit again within six months because of the same or related condition, we will treat this confinement as the same period of confinement.

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Intermediate Intensive Care Step-Down Unit

Payable for each day that an insured person is confined in an intermediate intensive care step-down unit because of a covered accidental injury or because of a covered sickness. We will pay benefits for only one confinement in an intermediate intensive care step-down unit at a time, even if it is caused by more than one covered accidental injury, more than one covered sickness or a covered accidental injury and a covered sickness. If we pay benefits for

confinement in a hospital's intermediate intensive care step-down unit and an insured person becomes confined to a hospital's intermediate intensive care step-down unit again within six months because of the same or related condition, we will treat this confinement as the same period of confinement.

This benefit is payable in addition to the Hospital Confinement Benefit.

The insured person must be admitted to a hospital within six months of the date of the covered accident for benefits to be payable.

Premium Rates* (post-tax)

Hospital Indemnity Insurance - Mid	
Coverage	BI-WEEKLY Premium
Employee	\$8.25
Employee & Spouse	\$15.73
Employee & Child(ren)	\$12.54
Family	\$20.02

Plan Benefits

Hospitalization Benefits - Mid	
Hospital Admission (per confinement) Once per covered sickness or accident per calendar year	\$1000
Hospital Confinement (per day) Maximum confinement period: 31 days per covered sickness or covered accident	\$100
Hospital Intensive Care (per day) Maximum confinement period: 10 days per covered sickness or covered accident	\$100
Intermediate Intensive Care Step-Down Unit (per day) Maximum confinement period: 10 days per covered sickness or covered accident	\$75

Premium Rates* (post-tax)

Hospital Indemnity Insurance - High	
Coverage	BI-WEEKLY Premium
Employee	\$14.58
Employee & Spouse	\$29.40
Employee & Child(ren)	\$23.05
Family	\$37.87

Plan Benefits

Hospitalization Benefits - High	
Hospital Admission (per confinement) Once per covered sickness or accident per calendar year	\$2000
Hospital Confinement (per day) Maximum confinement period: 31 days per covered sickness or covered accident	\$200
Hospital Intensive Care (per day) Maximum confinement period: 10 days per covered sickness or covered accident	\$200
Intermediate Intensive Care Step-Down Unit (per day) Maximum confinement period: 10 days per covered sickness or covered accident	\$100

* Rates shown may be different than the rates deducted based on the premium schedule shown on the enrollment site. Final rates will be included in your confirmation statement when your enrollment is complete.

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Limitations and Exclusions

We will not pay for loss due to:

- War – voluntarily participating in war, any act of war, or military conflicts, declared or undeclared, or voluntarily participating or serving in the military, armed forces, or an auxiliary unit thereto, or contracting with any country or international authority. (We will return the prorated premium for any period not covered by the certificate when the insured is in such service.) War also includes voluntary participation in an insurrection, riot, civil commotion or civil state of belligerence. War does not include acts of terrorism (except in Illinois).
 - In Connecticut: a riot is not excluded.
 - In Oklahoma: War, or any act of war, declared or undeclared, when serving in the military, armed forces, or an auxiliary unit thereto. (We will return the prorated premium for any period not covered by the certificate when the insured is in such service.) War does not include acts of terrorism.
- Suicide – committing or attempting to commit suicide, while sane or insane.
 - In Missouri, Montana, and Vermont: committing or attempting to commit suicide, while sane.
 - In Minnesota: this exclusion does not apply.
- Self-Inflicted Injuries – injuring or attempting to injure oneself intentionally.
 - In Missouri: injuring or attempting to injure oneself intentionally which is obviously not an attempted suicide.
 - In Vermont: injuring or attempting to injure oneself intentionally, while sane.
- Racing – riding in or driving any motor-driven vehicle in a race, stunt show or speed test in a professional or semi-professional capacity.
- Illegal Occupation – voluntarily participating in, committing, or attempting to commit a felony or illegal act or activity, or voluntarily working at, or being engaged in, an illegal occupation or job.
 - In Connecticut: voluntarily participating in, committing, or attempting to commit a felony.
 - In Illinois: committing or attempting to commit a felony or being engaged in an illegal occupation.
 - In Nebraska and Tennessee: voluntarily participating in, committing, or attempting to commit a felony or voluntarily working at, or being engaged in, an illegal occupation or job.
 - In Pennsylvania: committing or attempting to commit a felony, or being engaged in an illegal occupation.
 - In South Dakota: voluntarily committing a felony.
- Sports – participating in any organized sport in a professional or semi-professional capacity.
- Custodial Care – this is non-medical care that helps individuals with the basic tasks of everyday life, the preparation of special diets, and the self-administration of medication which does not require the constant attention of medical personnel.
- Treatment for being overweight, gastric bypass or stapling, intestinal bypass, and any related procedures, including any resulting complications.
- Services performed by a family member.
 - In South Dakota: this exclusion does not apply.
- Services related to sex or gender change, sterilization, in vitro fertilization, vasectomy or reversal of a vasectomy, or tubal ligation.
 - In Washington D.C. and Washington: Services related to sterilization, in vitro fertilization, vasectomy or reversal of a vasectomy, or tubal ligation.
- Elective Abortion – an abortion for any reason other than to preserve the life of the person upon whom the abortion is performed.
 - In Tennessee, or if the pregnancy was the result of rape or incest, or if the fetus is non-viable.
- Dental Services or Treatment.
- Cosmetic Surgery, except when due to:
 - Reconstructive surgery, when the service is related to or follows surgery resulting from a Covered Accidental Injury or a Covered Sickness, or is related to or results from a congenital disease or anomaly of a covered dependent child.
 - Congenital defects in newborns.