

Everyone deserves  
a better Tomorrow.

Hospital Select® II is hospital  
indemnity insurance

When Talia comes down with a particularly nasty cough, what she thought was just a cold soon turns into pneumonia that puts her in the hospital. She and her family are relieved that she responds well to treatment and is discharged within a few days without lasting effects.

Her finances would not recover nearly so easily if she hadn't signed up for her employer's hospital indemnity insurance. With benefits that help complement her major medical insurance, her family is able to overcome financial repercussions after her body overcomes the infection.

#### **Choose flexible benefits to manage health care expenses.**

Hospital indemnity insurance pays an amount for each day the insured is hospitalized, up to specific maximum limits. Because the benefits are paid to the insured directly, Talia can use them to help pay for her out-of-pocket expenses, such as her \$1,500 deductible and copays, as well as costs that would be hard to pay due to the work she missed, like her car payment, rent and childcare.

Hospital Select® II features:

- benefits for full-time, part-time, hourly, seasonal and temporary workers (as well as eligible family members)
- no coinsurance, co-pays, waiting periods or deductibles
- benefits paid in addition to other insurance the insured may have
- portability that allows employees to keep insurance after they retire or leave the job

#### **Qualify easily with broad eligibility.**

This policy is available for individuals, single-parent families, individuals with spouses or another adult dependent and families. There is no maximum issue age for employees and their adult dependents including common-law marriage partners, domestic partners or civil union partners. Children under the age of 26 can be insured.

THIS IS NOT MAJOR MEDICAL INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL INSURANCE.  
IT DOES NOT QUALIFY AS MINIMUM ESSENTIAL HEALTH COVERAGE UNDER THE FEDERAL AFFORDABLE CARE ACT.

#### **Product Highlights**

No lifetime maximum

No waiting period

Benefits paid directly to you

Payroll-deducted premiums

Family options available

## Product Details

The following benefits are included in your plan option(s). Unless otherwise noted, all benefits and maximums are per insured person.

Daily In-Hospital Indemnity Benefit		Plan Option 1
Pays each day an insured person is confined to a hospital (but not an emergency room, outpatient stay or stay in an observation unit) as the result of a covered accident or sickness.		\$100.00
Maximum		31 Days per confinement
<b>Intensive Care Indemnity Benefit Rider (Rider Form Series CRCICU00)</b>		
Pays each day an insured person is confined to an intensive care unit as the result of a covered accident or sickness.		\$200.00
Calendar Year Maximum		30 Days
<b>Ambulance Indemnity Benefit Rider (Rider Form Series CRAMB400)</b>		
Pays each day an insured person receives ambulance transportation as the result of a covered accident or sickness. Transportation must be provided by a licensed ambulance company within 96 hours of a covered accident or onset of sickness. Air ambulance pays 3 times the amount shown.		\$100.00
Maximum		3 days per calendar year/6 days per lifetime
<b>Hospital Confinement Indemnity Benefit Rider (Rider Form Series CRHA0400)</b>		
Pays each day an insured person is confined to a hospital (but not an emergency room, outpatient stay or stay in an Observation unit) as the result of a covered accident or sickness lasting a minimum of 24 continuous hours from time of admission.		\$2500.00
Maximum		1 day per confinement/1 day(s) per calendar year
<b>Inpatient Miscellaneous Indemnity Benefit Rider (Rider Form Series CRIPM400)</b>		
Pays each day an insured person is confined to a hospital as the result of a covered accident or sickness.		\$150.00
Maximum		31 days per confinement
<b>Surgical and Anesthesia Indemnity Benefit Rider (Rider Form Series CRSRGP00)</b>		
Pays each day an insured person undergoes surgery, as follows:		
Inpatient Surgery		\$1000.00
Calendar Year Maximum		1 day
Outpatient Surgery		\$500.00
Calendar Year Maximum		1 day
Outpatient Minor Surgery		\$100.00
Calendar Year Maximum		1 day
If anesthesia is administered, pays an additional		30%

Product Details

Plan Option 1 Weekly Rates Hospital Select® II					Ver 5.L3.00.0.00
Age	Employee	Employee and Spouse	Employee and Child	Family	
All Ages	\$13.32	\$29.37	\$21.72	\$34.79	

\*The illustrated rates DO contain a pre-existing condition limitation.

The above rates are quoted for this group with 50 eligible lives.  
Should this plan design sell and the submitted group size is different, rates may be different.

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## Limitations and Exclusions

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### Hospital Select® II

Confinement for the same or related condition within 30 days of discharge will be treated as a continuation of the prior confinement. Successive confinements separated by more than 30 days will be treated as a new and separate confinement.

No benefits under this contract will be payable as the result of the following:

- an insured person's suicide or any attempt threat while sane.
- intentionally self-inflicted injury.
- rest care or rehabilitative care and treatment.
- immunization shots and routine examinations such as: physical examinations, mammograms, Pap smears, immunizations, flexible sigmoidoscopy, prostate-specific antigen tests and blood screenings (unless Wellness Indemnity Benefit Rider is included).
- an insured person's abortion, except for medically necessary abortions performed to save the mother's life.
- treatment of mental or emotional disorder (unless Inpatient Mental and Nervous Disorder Indemnity Benefit Rider is included).
- treatment of alcoholism or drug addiction (unless Inpatient Drug and Alcohol Addiction Indemnity Benefit Rider is included).
- dental care or treatment, except for such care or treatment due to accidental injury to sound natural teeth within 12 months of the accident and except for dental care or treatment necessary due to congenital disease or anomaly.
- sex change, reversal of tubal ligation or reversal of vasectomy.
- artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications or physician's services, unless required by law.
- traveling in or descending from any vehicle or device for aerial navigation, except as a fare-paying passenger in an aircraft operated by a commercial airline (other than a charter airline) on a regularly scheduled passenger trip.
- any loss incurred on active duty status in the armed forces. (If you notify us of such active duty, we will refund any premiums paid for any period for which no insurance is provided as a result of this exception.)
- an accident or sickness arising out of or in the course of any occupation for compensation, wage or profit or expenses which are payable under Workers' Compensation Law, Employer's Liability Law or similar legislation, to the extent the insured is reimbursed or entitled to reimbursement or in any way indemnified for the services by or through any public program (other than medical assistance).
- involvement in any war or act of war, whether declared or undeclared.
- payment of any claim, bill or other demand or request for payment for health care services that the appropriate regulatory board determines were provided as a result of a prohibited referral.

### Pre-Existing Condition Limitations

A pre-existing condition is a sickness or physical condition for which medical advice or treatment was recommended by or received from a physician, or for which the person incurred expenses or took medication, within 12 months before the person's insurance becomes effective.

### Portability Option

If the employee loses eligibility for any reason other than nonpayment of premiums, insurance can be continued by paying premiums directly to us within 31 days after termination. We will bill the employee directly once we receive notification to continue insurance.

## Limitations and Exclusions

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### Termination of Insurance

The insurance terminates on the earliest of:

- the insured's death.
- the last day of the grace period, if the premium due is not paid by the last day of the grace period.
- the date of written notice to cancel insurance.
- the date the policy terminates.
- the date the insured ceases to be eligible for insurance.

Dependent insurance ends on the earliest of:

- the date the insured's insurance terminates for any of the reasons above.
- the date the dependent no longer meets the definition of a dependent.
- the last day of the grace period, if the premium due is not paid by the last day of the grace period.
- the date of written notice to cancel insurance.
- the date the policy is modified so as to exclude dependent insurance.

The insurance company has the right to terminate the insurance of any insured who submits a fraudulent claim. Termination will not impact any claim which begins before the date of termination.

### Surgical and Anesthesia Indemnity Benefit Rider:

As an exception to the dental care or treatment exclusion above, we will pay the following dental or oral surgery procedures under this rider:

- excision of impacted third molars.
- closed or open reduction of fractures or dislocation of the jaw.