

HOSPITAL
INDEMNITY



Hospital Indemnity

An insurance policy designed to pay cash benefits directly to you for hospital admission and confinement, ICU confinement, x-ray and lab services, health tests, and more.

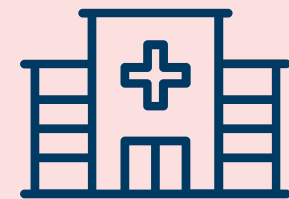




No One Expects an Accident or Illness

Even a brief hospital stay can get expensive:

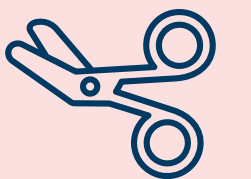
Overnight Stays



ICU Confinement



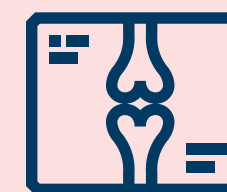
Surgery



Diagnostic Tests



X-Rays



Lab Tests



Health Screenings



Follow-up Physician's
Office Visits



Rehabilitation Stays





...Or the Potential Income Loss that Can Accompany It.

- ∞ Lost income if you can't work
- ∞ High-deductible or co-insurance costs can quickly add up
- ∞ Some treatments may not be covered by medical insurance
- ∞ Health care services may be required for recovery

Nearly one third of Americans report being unable to cover an unexpected \$400 medical expense without having to borrow or sell something.¹

1/3
OF AMERICANS

All this may lead you to focus on how to pay your bills instead of recovery.



¹www.FederalReserve.gov, 2022 Report on Economic Well-Being of U.S. Households in 2021

Do You Qualify?

- ∞ Have you or your spouse, if any, ever been treated for or diagnosed with AIDS/ARC (or ever tested positive for antigens or antibodies to an AIDS virus)?
- ∞ Within the past 12 months, have you been off work for 10 or more work days due to an illness, other than colds, common influenza virus or normal pregnancy?
- ∞ Have your or your spouse, if any, received treatment in an outpatient or emergency facility or been hospitalized during the past 12 months for anything other than injury?

HOSPITAL
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Hospital Indemnity Lets You Focus on Getting Better, Not on the Bills

It pays you cash benefits for covered losses that you can use however you see fit. It helps ease your mind in a difficult time.

Choose from two benefit plans:

BASE PLAN

Hospital Admission

Observation Room

Rehabilitation Unit
Confinement

Waiver of Premium

Health Test/Screening

ENHANCED PLAN

The Base Plan benefits
(excluding Rehabilitation
Confinement), plus...

Hospital Confinement

ICU Confinement

Physician's Office Visits

X-ray/Lab Services



Enhance Your Plan with Additional Benefits

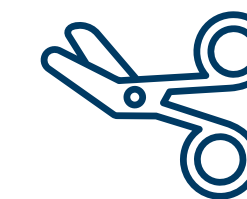
On top of the benefits you receive, both Plans have optional additional benefits you can add to tailor the coverage to suit your family's unique needs.

BASE PLAN

ENHANCED PLAN



Diagnostic Test Benefit



Surgery Benefit



Pick the Hospital Admission Benefit Right for You

Three options are available. Decide which is right for you based on your medical insurance deductible and personal preferences.

\$500

\$1,000

\$1,500

Protection for You and Your Whole Family

∞ You can choose to cover just yourself, add your spouse or keep your entire family protected.

- You, the Primary Insured only
- Primary Insured and Spouse
- Primary Insured and Children
- Entire Family

∞ Benefits are paid in addition to other coverage you may already have

**HOSPITAL
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Build Your Coverage in 4 Easy Steps

STEP 1

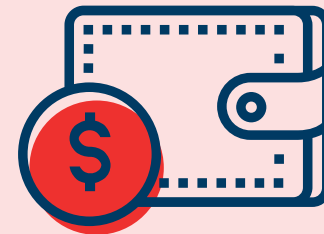
Pick the Plan: Base or Enhanced

☐

Base Plan

☐

Enhanced Plan



STEP 3

Decide the Hospital Admission Benefit Amount:

☐

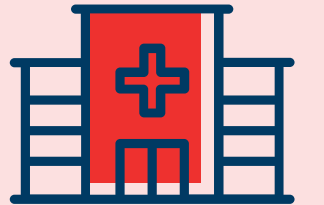
\$500

☐

\$1,000

☐

\$1,500



STEP 2

Choose the Optional Additional Benefits:

☐

Diagnostic Test Benefit

☐

Surgery Benefit



STEP 4

Select Who Is Covered:

☐

You, Primary Insured only

☐

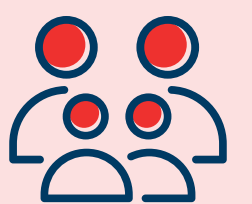
Primary Insured and Spouse

☐

Primary Insured and Children

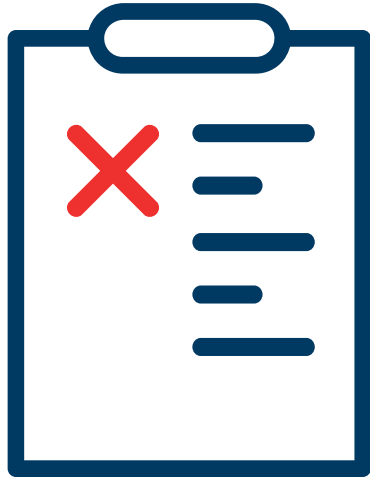
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Family





Limitations and Exclusions



Limitations

PRE-EXISTING CONDITION

A Pre-existing Condition is not covered unless the date of diagnosis for such condition is at least 12 months after the Policy Effective Date. Pre-existing Condition means a condition for which a Covered Person received medical advice or treatment within the 12 months preceding the Policy Effective Date.

CHILDBIRTH LIMITATION

Loss due to Hospital Admission and/or Hospital Confinement due to pregnancy, childbirth or Complications of Pregnancy during the first 10 months of the Policy are not covered.

Underwritten by Combined Insurance Company of America, Chicago, Illinois, a Chubb company.

Exclusions

No benefits will be paid for services rendered by a member of the Immediate family of a Covered Person.

No benefits will be paid for any Covered Accident or Covered Sickness that is caused by, or occurs as a result of, a Covered Person's:

- Being intoxicated, or being under the influence of any narcotic or other prescription drug unless administered on the advice of a Physician and taken according to the Physician's instructions (the term "intoxicated" means the minimum blood alcohol level required to be considered operating an automobile under the influence of alcohol in the jurisdiction in which the accident occurred);
- Participating in an illegal occupation or attempting to commit or actually committing a felony ("illegal occupation" and "felony" is as defined by the law of the jurisdiction in which the activity takes place);
- Committing or attempting to commit suicide or intentionally injuring himself or herself;
- Having dental treatment, except for such care or treatment due to Injury to sound natural teeth within twelve (12) months of the Covered Accident;
- Being exposed to war or any act of war, declared or undeclared, or serving in any of the armed forces or units auxiliary thereto;
- Services performed by a family member;
- Participation in any contest using any type of motorized vehicle;
- Alcoholism;
- Loss that occurs while a Covered Person is legally incarcerated in a penal or correctional institution;
- Voluntary inhalation of or asphyxiation by gas or fumes;
- Cosmetic surgery, except when due to reconstructive surgery needed as the result of an Injury or Sickness, or is related to or results from a congenital disease or anomaly of a covered Dependent Child; and congenital defects in newborns;
- Services related to sterilization, reversal of a vasectomy or tubal ligation; in vitro fertilization and diagnostic treatment of infertility or other problems related to the inability to conceive a child, unless such infertility is a result of a covered Injury or Sickness;
- Participating in any organized sport in a professional or semi-professional capacity;
- Mental and nervous disorders (except as provided in the Policy);
- Surgery to correct vision or hearing, except when required for appropriate care —unless medically necessary surgery for glaucoma, cataracts or other sickness or injury;
- Elective surgery;
- Any pregnancy or childbirth of a Dependent Child, including services rendered to the child after birth;
- Routine newborn care;
- Rest or custodial care.

No benefits will be payable for sickness or infection, including physical or mental condition, that is not caused solely by or as a direct result of a Covered Accident or Covered Sickness.



IMPORTANT This presentation contains a brief description of policy benefits. See the policy for complete details of benefits, exclusions and limitations.

POLICY #

Form No. 32100

“Hospital indemnity coverage provides a benefit for covered loss; neither the product name nor benefits payable are intended to provide reimbursement for medical expenses incurred by a covered person or to result in any payment in excess of loss.

THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL OR OTHER MINIMUM ESSENTIAL COVERAGE.

Insurance underwritten by _____.”