



Group Hospital Indemnity Insurance

Keep your finances on track when you're in the hospital.

Medical insurance is important. Especially when you have a hospital stay – planned or unplanned. But it can leave you with unexpected bills and out-of-pocket costs. Group Hospital Indemnity insurance can help cover unexpected out-of-pocket expenses such as copays, deductibles and out-of-network charges, as well as everyday living expenses. It pays a benefit directly to you for hospital stays, regardless of your treatment costs or other insurance coverage you might have.



Hospital costs averaged

\$3,949
per day.*



Each hospital stay
costs an average of

\$15,734.

Complement your HSA Account

Contributing to an HSA is a great way to save for medical expenses. It can, however, take a long time to save enough to fully cover your medical deductible and out-of-pocket maximum. Hospital Indemnity insurance provides financial protection while you are building your HSA assets. Contact your employer to determine if this Hospital Indemnity plan impacts the taxability of your contributions to an HSA. It's protection that's also convenient: Your premium payments can be deducted directly from your paycheck.

* Debt.org, Hospital and Surgery Costs, 2020 <https://www.debt.org/medical/hospital-surgery-costs/>

A cash benefit when you need it.


Even the best budgeters can forget to set aside money for medical expenses. Hospital Indemnity insurance provides a way to cover unexpected out-of-pocket expenses when you end up in the hospital. It also allows you to:

- **Choose how to spend your benefit.** It's your money — spend it however you want, whether it's to pay for your groceries, rent or medical bills.
- **Take it with you.** If you leave your job, you can take your coverage with you.
- **Receive a benefit for taking care of your health.** You can get a Health Maintenance Screening Benefit of \$50 once a calendar year just for going to the doctor for a covered wellness screening, which may include a novel infectious disease test (including COVID-19) or a mammogram — that typically cost you nothing under your medical plan.
- **Get a break from paying premiums during long hospital stays.** If you are in the hospital for more than 30 days, you will be able to stop making premium payments until you're discharged.

Regardless of what other insurance coverage you may have, Hospital Indemnity insurance pays you a fixed benefit for every day you are in the hospital.

Here's how it works:

Kim is out of town on a business trip when she experiences abdominal pain and a racing heartbeat. Diagnosis: ruptured gastric ulcer. She is rushed to the hospital, admitted and taken into surgery. She ends up being hospitalized for 10 days, three of which are in a critical care unit.



Kim's husband leaves their two kids with their daycare provider and flies to be at her side. The family now faces additional costs for travel and childcare.

SAMPLE OUT-OF-POCKET EXPENSES	
Medical plan deductible/coinsurance	\$3,000
Other non-medical expenses	\$475
Travel expenses (flights, change fees, etc.).....	\$350
Childcare.....	\$500
Total Expenses.....	\$4,325
Benefit for:	
Hospital admission.....	\$1,500
Hospital confinement (10 days x \$350 per day).....	\$3,500
CCU confinement (3 days x \$50 per day)	\$150
Total paid to you.....	\$5,150
Remaining Benefit for Other Expenses.....	\$825

Costs are hypothetical. Actual costs will vary by state, condition, treatments received and personal factors.

Affordable Group Rates

Because you'll be buying this insurance through Bryan Independent School District, you'll have access to affordable group rates. You'll also have the convenience of having your premiums deducted directly from your paycheck.

Monthly coverage rates for:			
You	You and your spouse	You and your children	You, your spouse and your children
\$24.85	\$43.19	\$34.86	\$63.21

Bills are the last thing you want to worry about when you're in the hospital. With Hospital Indemnity insurance, you'll be paid a benefit regardless of what your medical insurance does or doesn't cover. It can make a big difference in your total out-of-pocket expenses. You'll receive \$350 for each day you're hospitalized, up to a maximum of 15 days. And if you are confined for more than 30 days, your premium payment will be waived until the last day of the month of your hospitalization.

These are actual benefits each covered person could receive under a Hospital Indemnity plan:

Benefits	
Waiver of Premium	Premium waived if you are confined to a hospital for more than 30 days
Hospital Admission ¹ (maximum 1 per calendar year)	\$1,500 per day
Daily Hospital Confinement ¹ (maximum 15 days per stay)	\$350 per day
Daily Critical Care Unit Confinement ^{1,2} (maximum 15 days per stay)	\$50 per day
Health Maintenance Screening	\$50 once per calendar year when visiting the doctor for a covered wellness screening

¹ Defined as a stay for at least 20 consecutive hours in a hospital setting

² Payable in addition to the Hospital Admission and/or Daily Hospital Confinement benefit you may be eligible to receive.

Important Details

Here's where you'll find the nitty-gritty details about Hospital Indemnity insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage through direct bill if your employment ends, the group policy terminates or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be a regular employee of Bryan Independent School District, actively working in the United States at least 16 hours per week and a citizen or resident of the United States. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, a person to whom you are legally married. You can also cover your children from birth through age 25. Your child cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Hospital Indemnity insurance coverage can become effective.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Annual Open Enrollment

You may enroll for coverage for you and your dependents if you enroll within 31 days after becoming eligible. However, if you do not enroll during this period, you may do so during your employer's annual open enrollment period.

Family Status Change

In the event of a family status change, you and your spouse or domestic partner may enroll for coverage without evidence of good health if you or your spouse or domestic partner enroll within 31 days of the change. However, we will not waive evidence of good health if you or your spouse or domestic partner previously submitted evidence and it was not approved by us. Family status change include:

- Your marriage or divorce or dissolution of your domestic partner relationship
- The birth of your child
- The adoption of a child
- The death of your dependent
- The commencement or termination of your spouse's employment
- A change in employment from full-time to part-time by your spouse
- A loss of hospital indemnity insurance through your spouse's employment

Waiver of Premium

Your insurance will continue without payment of premiums if you are confined in a hospital for more than 30 days in a row. We will waive payment of premium for your insurance from the 31st day of your confinement until the last day of the month you are in the hospital.

Exclusions

Benefits are not payable if an injury or sickness is caused or contributed to by any of the following:

- War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit an assault, felony or act of terrorism
- Active participation in a violent disorder or riot
- Alcoholism, drug abuse, misuse of alcohol or any other substance, the voluntary use or consumption of any drug or alcohol in excess of the legal limit in the state in which an injury or sickness occurred, or taking of drugs unless used or consumed according to the directions of a healthcare provider
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a commercial aircraft

- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function resulting from an injury or sickness
- Any injury or sickness which arises out of or in the course of you or your dependent being incarcerated in a jail, penal or correctional institution
- Mental disorder
- Dental care or dental procedures, unless treatment is the result of an injury
- Routine newborn nursing or well-baby care
- Hospital confinement of a newborn child following the child's birth unless the confinement is as a result of an injury or sickness
- Riding in or driving any automobile in a race, stunt show or speed test

Preexisting Condition Limitation

Preexisting conditions can affect your coverage if they occurred at any time during the 365-day period just before the date your or your dependent's insurance or an increase in insurance becomes effective. Preexisting conditions are defined as any of the following:

- A mental or physical condition (whether or not diagnosed or misdiagnosed) for which you or your dependent consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures including self-administered procedures; or taken prescribed drugs or medications
- You or your dependent's pregnancy
- A mental or physical condition that was discovered or suspected as a result of any medical examination, including a routine examination

No benefits or insurance increase will be paid if the sickness triggering a benefit or confinement is caused or contributed to by a preexisting condition or medical or surgical treatment of a preexisting condition, unless on the date the benefit would first become payable or a period of confinement begins:

- You or your dependent have been continuously insured under the group policy for 12 months
- You have been actively at work for at least one full day after the end of that 12 months.

Any confinements for the same or related sickness that are separated by not more than 30 days of non-confinement will be treated as one continuous period of confinement.

When Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you reach age 80, you cease meeting the member definition or the group policy terminates.

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

About Standard Insurance Company

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at www.standard.com.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

This is a limited benefit policy.

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IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).