



Peace of mind

Aetna[®] Hospital Indemnity Plan
Coverage that works with your health plan

aetna[®]

[aetna.com](https://www.aetna.com)

The Aetna Hospital Indemnity Plan is underwritten by Aetna Life Insurance Company (Aetna).

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Protection when it's most needed

Whether it's planned or unplanned, hospital stay costs can add up quickly.

That's why we offer the Aetna Hospital Indemnity Plan. It helps your employees manage their costs and protect their savings, with cash benefits paid directly to them, no matter what other coverage they may have. So they can keep their focus on their recovery instead of financial burdens.

Employees can use the cash to pay for things like:

- Medical expenses, deductibles or coinsurance
- Everyday expenses, such as mortgage payments, day care and other bills

It's your choice

You can pay any percentage of the premium you choose.

Or you can opt for your employees to pay the full cost of the plan. It's all paid by convenient payroll deduction.

Your plan, your way

Customize the Aetna Hospital Indemnity Plan to offer additional coverage that fits your benefits strategy:



Choose

From four base plan options covering admission, daily care, ICU and more



Mix and match

Optional inpatient and outpatient benefits packages



Select add-ons

Including a health screening, employer facilities and building benefits (admission or daily)

Your truly tailored plan

Fully portable, with the option to be health savings account (HSA) compatible.

Claims made simple

It's easy for employees to submit claims under the Aetna Hospital Indemnity Plan. And, when they're enrolled in one of our medical plans, we can reduce the paperwork needed to process their claims.



Employee has a covered hospital stay.



Employee submits claim using an online form.



Our system matches this claim to the medical claim.*



The medical info is used to process the hospital indemnity claim.



Cash payment is sent directly to employee.



Viewing claims and finding detailed plan documents is easy through our member website. Employees can access their plan information online with their same medical log-in or by signing up through [aetna.com](https://www.aetna.com).

Gain flexibility and get a great deal

Teaming up with us for hospital indemnity coverage has its advantages, including:

- Waived participation requirements with active engagement
- Freedom to use any enrollment platform
- Flexible billing options
- Customized member communications support
- Discounts for bundling medical and/or dental with our supplemental products
- Dedicated implementation and account management team

More member benefits, more savings

Employees who have the Aetna Hospital Indemnity Plan also get access to discounts and savings on many of our other products and services, including:

- Blood pressure monitors
- Weight-loss programs and meal plans
- Gym memberships
- Health and wellness products
- Eye care, hearing and dental products
- Books and magazine subscriptions from the American Cancer Society and Mayo Clinic online bookstores
- **Aetna Institutes™ Program** — access to high-performing hospitals, clinics and health care facilities that offer specialized care

*Employees not enrolled in an Aetna medical plan will need to upload supporting documents.



For more details, you can call your broker or Aetna representative or email aetnavoluntary@aetna.com.

THIS IS A SUPPLEMENTAL INSURANCE PLAN.

This plan provides limited benefits. The benefits payments are not intended to cover the full cost of medical care. Members are responsible for making sure the providers' bills get paid. These benefits are paid in addition to any other health coverage members may have.

THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE. THIS IS NOT QUALIFYING HEALTH COVERAGE ("MINIMUM ESSENTIAL COVERAGE") THAT SATISFIES THE HEALTH COVERAGE REQUIREMENT OF THE AFFORDABLE CARE ACT. IF YOU DON'T HAVE MINIMUM ESSENTIAL COVERAGE, YOU MAY OWE AN ADDITIONAL PAYMENT WITH YOUR TAXES.

Pre-existing condition limitation

If a member has a prior medical condition, they must be covered under the hospital plan for 365 days before the plan will provide coverage for that condition. This exclusion applies only to conditions for which medical advice, diagnosis, care or treatment was recommended or received within the 365 days prior to their effective date of coverage under this plan. The pre-existing condition exclusion applies to maternity (where allowed by law). In some states, this exclusion may not apply to all conditions, and time frames may differ.

This material is for information only. Health insurance plans contain exclusions and limitations and are subject to United States economic and trade sanctions. Refer to the actual policy and Booklet-Certificate to determine which health care services are covered and to what extent. The following is a partial list of services and supplies that are generally not covered. However, the plan may contain exceptions to this list based on state mandates or the plan design purchased. Benefits will not be paid for any stay or other service for an illness or accidental injury related to the following: 1) Certain competitive or recreational activities, including but not limited to, ballooning, bungee jumping, parachuting, and skydiving; 2) Any semi-professional or professional competitive athletic contest, including officiating or coaching, for which you receive any payment; 3) Acts of war or riot; 4) Operating, learning to operate or serving as a pilot or crew member of any aircraft, whether motorized or not; 5) Assault, felony, illegal occupation or other criminal act; 6) Care provided by a spouse, parent, child, sibling or any other household member; 7) Cosmetic services and plastic surgery, with certain exceptions; 8) Custodial care; 9) Hospice services, except as specifically provided in the Schedule of Benefits; 10) Self-harm or suicide, except when resulting from a diagnosed disorder; 11) Violating any cellular device use laws of the state in which the accident occurred, while operating a motor vehicle; 12) Care or services received outside the United States or its territories; 13) Experimental or investigational drugs, devices, treatments or procedures; 14) Education, training or retraining services or testing.

Providers are independent contractors and are not agents of Aetna. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Discount programs provide access to discounted prices and are NOT insured benefits. The member is responsible for the full cost of the discounted services. Investment services are independently offered by the HSA administrator. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to aetna.com.

Policy forms issued in Missouri include: AL VOL HPOL-Hosp 01 and AL VOL HCOG-Hosp 01.

Policy forms issued in Idaho include: GR-96172, AL VOL HPOL-Hosp 01.

Policy forms issued in Oklahoma include: GR-96172, GR-96173, AL VOL HPOL-Hosp 01.



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