



## Knowing you're covered always feels so good

We're focused on you — all of **you**: body, mind and spirit. And that includes your financial well-being. With the **Hospital Indemnity Plan**, we pay you cash to use on medical expenses, like your deductible. Or everyday expenses, like groceries. You can access your benefits through a personalized website — and a whole lot more.

**You can focus more on your health**, no matter what happens. Enroll in the **Hospital Indemnity Plan** today.

The Aetna **Hospital Indemnity Plan** is offered and/or underwritten by Aetna Life Insurance Company (Aetna).



# We've got your back



## Hospital Indemnity Plan overview

When the unexpected happens, we want you to focus on what matters most — your health. So whether it's a planned hospital stay or an unplanned one, the Aetna Hospital Indemnity Plan pays you cash benefits for services such as admission and daily stay. You can use the benefits to pay for medical expenses, such as your medical deductible, or for everyday expenses, such as food and childcare. Below are examples of the services covered and the cash benefit amount you'd receive. For more in-depth plan details, just view the Hospital Indemnity Plan benefits summary.

### Services

- Lump sum — admission
- Daily room and board (R&B)/ICU
- Observation
- Substance use disorder
- Mental health

### Benefits

- \$1,000 lump sum when admitted to hospital
- \$100 daily R&B (2x for ICU)
- \$100 daily observation
- \$100 daily substance use disorder and mental health



## Find what you need, when you need it

Your member website is your one-stop shop for all things related to your plan. You can do things like:

- File a new claim or view the status of submitted claims
- See coverage or claims information for yourself or your dependent(s)
- Review plan documents, including your benefits summary and certificate of coverage
- Sign up to receive your benefits via direct deposit



## Savor the savings

Aetna offers access to exclusive discounts on health products and programs, including gym memberships, fitness products, weight-loss programs and much more.



## We've got your back

Email customer service through the member website anytime. Or connect with us via phone at **1-800-607-3366 (TTY: 711)**, Monday through Friday, 8 a.m. – 6 p.m. your local time.

**THIS PLAN IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE. THIS PLAN DOES NOT COUNT AS MINIMUM ESSENTIAL COVERAGE UNDER THE AFFORDABLE CARE ACT.** This plan provides limited benefits. It pays fixed-dollar benefits for covered services without regard to the health care provider's actual charges. This benefit payment is not intended to cover the full cost of medical care. You are responsible for making sure the providers' bills get paid. These benefits are paid in addition to any other health coverage you may have.

This plan has exclusions and limitations. Refer to the actual policy and certificate to determine which benefits are not payable. 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.

**Hospital Indemnity Plan:** Benefits under the Policy will not be payable for any stay resulting in whole or in part from the following: 1. Suicide or attempt at suicide, intentionally self-inflicted injury, or any attempt at self-inflicted injury, except when resulting from a diagnosed disorder in the most current version of the Diagnostic and Statistical Manual (DSM). 2. Being under the influence of a stimulant, depressant, hallucinogen, narcotic or any other drug intoxicant, including those prescribed by a physician, that are misused by the insured person, except when resulting from a diagnosed disorder in the most current version of the DSM. 3. Engaging in an assault, felony, illegal occupation or other criminal act. 4. Any act of war, whether declared or not, or voluntary participation in a riot, rebellion or civil insurrection. 5. Services ordered or performed by a physician, or supplies purchased from a provider, who is an insured person, the insured person's immediate family member, or someone who resides with or is employed by or who employs an insured person. 6. Any form of intentional asphyxiation. 7. Outpatient care, services, prescription medications or supplies. 8. Custodial care.

**Financial Sanctions Exclusion:** If coverage provided by this policy violates or will violate any U.S. economic or trade sanctions, the coverage is immediately considered invalid. For example, Aetna companies cannot make payments or reimburse for health care or other claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or entity, or a country under sanction by the United States, unless permitted under a valid written Office of Foreign Assets Control (OFAC) license. For more information on OFAC, visit [treasury.gov/resource-center/sanctions/Pages/default.aspx](https://www.treasury.gov/resource-center/sanctions/Pages/default.aspx).

**ATTENTION MASSACHUSETTS RESIDENTS:** As of January 1, 2009, the Massachusetts Health Care Reform Law requires that Massachusetts residents, eighteen (18) years of age or older, must have health coverage that meets the Minimum Creditable Coverage standards set by the Commonwealth Health Insurance Connector, unless waived from the health insurance requirement based on affordability or individual hardship. For more information, call the Connector at **1-877-MA-ENROLL (1-877-623-6765)** or visit the Connector website ([mahealthconnector.org](https://mahealthconnector.org)). **THIS POLICY ALONE DOES NOT MEET MINIMUM CREDITABLE COVERAGE STANDARDS.** If you have questions about this notice, you may contact the Division of Insurance by calling **617-521-7794** or visiting its website at [mass.gov/doi](https://mass.gov/doi).

This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Information is believed to be accurate as of the production date; however, it is subject to change.

**Policy forms issued in Idaho include:** AL VOL HPOL-Hosp 01, AL VOL HCOG-Hosp 01.

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

**Policy forms issued in Oklahoma include:** AL VOL HPOL-Hosp 01, AL VOL HCOG-Hosp 01.





## Hospital Indemnity Plan – Frequently Asked Questions

### **How does the Hospital Indemnity Plan work?**

The Hospital Indemnity Plan pays cash benefits directly to you for services related to a planned or unplanned covered inpatient hospital stay while you are covered under the plan.

### **Who can be covered under the plan?**

Coverage is available for employees, their spouse and dependent children under the age of 26 (state mandates may apply).

### **Do I have to be actively at work to enroll in coverage?**

Yes, you must be actively at work in order to enroll and for coverage to take effect. You are actively at work if you are working, or are available to work, and meet the criteria set by your employer to be eligible to enroll.

### **Do I need to answer medical questions to enroll in this coverage?**

No, you do not have to answer any questions about your health to enroll.

### **How soon after I enroll do my benefits start?**

Your benefits will start based on the beginning date set by your employer.

### **Can I have more than one Hospital Indemnity Plan?**

No, you are not allowed to have more than one Hospital Indemnity Plan.

### **Is the Hospital Indemnity Plan compatible with a Health Savings Account (HSA)?**

Yes, the Hospital Indemnity Plan is compatible with Health Savings Accounts.

### **Is there a member website?**

Yes, you can see your plan information anytime once you register at [myaetnasupplemental.com](http://myaetnasupplemental.com). From there you can find important plan documents, file a claim online, view the status of current and past claims, and contact customer service.

### **How do I submit a claim? When can I submit a claim for benefit payment under my coverage?**

You can submit a claim online through the member website at [myaetnasupplemental.com](http://myaetnasupplemental.com). Or you can download a paper claim form or request one be sent to you by our customer service and mail it to: Aetna Voluntary Plans, PO Box 14079, Lexington, KY 40512-4079.

You can submit a claim as soon as a covered event occurs. If we need supporting documentation from you, such as a hospital bill, we can't process your claim until we have all the documentation in hand.

**When a claim is filed and benefits are paid, who receives the benefits: me or my doctor?**

You, the member, receive the benefits directly. You can sign up for direct deposit in the member website or a check will be mailed to you.

**If I leave the company, can I keep my coverage? What is the cost, and how do I go about keeping the plan?**

Yes. The Hospital Indemnity Plan allows you to keep your existing coverage for the same rate and make direct payments to the carrier. We call this “a portability option.” You may exercise this option if your employment ends for any reason other than for gross misconduct. The portability form is in the plan documents section of the member website. Refer to your certificate of coverage for more portability provisions. The portability option is not available in New York and Vermont.

**Do benefits pay for a pregnancy stay?**

Yes. The Hospital Indemnity Plan pays admission and daily stay benefits.

**How does the Therapy Services benefit work if I receive multiple therapies in one day?**

Only one Therapy Services benefit will be paid per day, no matter how many different Therapy Services you receive.

**What happens if a covered person dies while covered under the Hospital Indemnity Plan?**

Benefits will be paid to the member’s beneficiary on file. If one isn’t on file, payment will go to the member’s estate.

**What if I don’t understand something I’ve read here, or have more questions?**

We want you to understand these benefits before you decide to enroll. Reach out to us. Call us toll-free at 1-800-607-3366, (TTY: 711), Monday through Friday, 8 a.m. to 6 p.m your local time. We’re here to answer questions before and after you enroll.

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**THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.**

The Aetna Hospital Indemnity Plan is a hospital confinement indemnity plan. This plan provides limited benefits. It pays fixed daily dollar benefits for covered services without regard to the health care provider's actual charges. 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 material is for information only. These are sample plan designs. Benefits paid vary by specific services. Coverage is subject to applicable laws and regulations. Plan features, rates, eligibility and availability may vary by location and are subject to change. Investment services are independently offered by the health savings account (HSA) administrator. 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. 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**.

This plan has exclusions and limitations and is subject to United States economic and trade sanctions. See the plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. 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 payable for any Stay resulting in whole or part from the following: 1. Suicide or attempt at suicide, intentionally self-inflicted injury, or any attempt at self-inflicted injury, except when resulting from a diagnosed disorder in the most current version of the Diagnostic and Statistical Manual (DSM) 2. Being under the influence of a stimulant, depressant, hallucinogen, narcotic or any other drug intoxicant, including those prescribed by a physician that are misused by the insured person, except when resulting from a diagnosed disorder in the most current version of the DSM 3. Engaging in an assault, felony, illegal occupation or other criminal act 3. Any act of war, whether declared or not, or voluntary participation in a riot, rebellion or civil insurrection 4. Services ordered or performed by a physician, or supplies purchased from a provider, who is an insured person, the insured person's immediate family member, or someone who resides with or is employed by or who employs an insured person 5. Any form of intentional asphyxiation 6. Outpatient care, services, prescription medications or supplies 7. Custodial care. **Financial Sanctions Exclusion** If coverage provided by this policy violates or will violate any US economic or trade sanctions, the coverage is immediately considered invalid. For example, Aetna companies cannot make payments or reimburse for health care or other claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or entity, or a country under sanction by the United States, unless permitted under a valid written Office of Foreign Assets Control (OFAC) license. For more information on OFAC, visit <http://www.treasury.gov/resource-center/sanctions/Pages/default.aspx>.

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