



Underwritten by: **American Heritage Life Insurance Company**

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Hospital Indemnity Insurance

Protection for hospital stays when a sickness or injury occurs



Think About This



Americans pay nearly 60% more for hospital stays than patients in Europe and Canada[†]



\$11,700
The average cost of a 24-hour hospital stay in the U.S.^{††}



Two-thirds of Americans received an unexpected medical bill following a hospital stay in 2020^{†††}

A sickness or injury could land you in the hospital. Your medical insurance may only cover some of it, leaving you to pay for deductibles and coinsurance fees. Hospital Indemnity Insurance can help ease your financial burden so you can focus on recovery.

Here's How It Works

- Select the coverage that's right for you and your family
- If you or a family member requires a hospital stay, you file a claim
- A cash benefit is direct deposited or a check is mailed and can be used however you wish*

Protecting Your Finances

You've worked hard for your savings – don't let a hospital bill wipe them out.

- Protect your checking and savings
- Don't dip into your 401(k)



Meeting Your Needs

- Guaranteed Issue coverage with a Pre-Existing Condition Limitation*
- Coverage can include your dependents
- Premiums are affordable and can be conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details

[†]<https://www.healthsystemtracker.org/brief/what-drives-health-spending-in-the-u-s-compared-to-other-countries/>
^{††}<https://www.debt.org/medical/hospital-surgery-costs/> ^{†††}<https://newsroom.heart.org/news/poll-surprise-medical-bills-pose-significant-financial-burden> *Please refer to the Exclusions and Limitations section of this brochure.

Meet Tommy



Choose

Tommy's mom signed up for Hospital Indemnity Insurance during her employer's Open Enrollment.

Use

A few months later, Tommy complained of pain in his stomach. He has a fever and is vomiting. Here's his story:



Ambulance

Tommy's parents call an ambulance to take him to the hospital emergency room



Tests

After running some tests, the doctors determine that Tommy has appendicitis



Hospital Stay

An appendectomy is recommended and Tommy is admitted for an overnight stay



Surgery

Tommy has surgery the next day and spends another night in the hospital



Recovery

Tommy is released to recover and follow-up visits with his doctor are scheduled

Claim

Tommy's mom files a claim with her Hospital Indemnity coverage through the convenient web portal, **MyBenefits**. She receives cash benefits for:

- Variable Surgical Schedule
- Anesthesia
- First Day Hospital Confinement
- Daily Hospital Confinement

MyBenefits Claim Filing Portal

standard.com/ahl/mybenefits

Offers 24/7 access to important information about your benefits. eSign, submit and check your claims (including claim history), request cash benefits to be direct deposited, make changes to personal information, and more.

Here are some of the ways Tommy's mom can use the cash benefits



Finances

Can help protect savings, retirement plans and 401(k)s from being depleted



Travel

Can help pay for expenses while receiving treatment in another city



Home

Can help pay the mortgage, continue rental payments, or home repairs for after care



Expenses

Can help pay for her family's living expenses, such as bills, electricity, and gas

The example above details a fictional situation; your individual experience may vary. For a listing of benefits and benefit amounts, see pages 3 and 4.

Benefit Amounts

Hospitalization Benefits		Plan
First Day Hospital Confinement Limit to Number of Occurrences	\$1,000 Once/year	
Daily Hospital Confinement (daily) Maximum Number of Days	\$200 10	
Hospital Intensive Care (daily) Maximum Number of Days	\$200 10	
Surgery Benefits		Plan
Variable Surgical Schedule (daily, varies by surgery)	\$50-\$2,000	
Ambulatory Surgical Center (daily)	\$100	
Anesthesia (% of Surgical Schedule)	25%	
Outpatient Benefit		Plan
Outpatient Emergency Treatment (daily)	\$100	
Wellness Benefit		Plan
Fixed Wellness (daily)	\$50	
Miscellaneous Benefits		Plan
Mental/Nervous Disorder Maximum Number of Days	\$200 10	
Drug/Alcohol Rehabilitation Maximum Number of Days	\$200 10	
Benefit Limitations/Exclusions		Plan
Pregnancy Waiting Period	10 months	
Pre-Existing Condition Limitation	Included	

Plan Premiums

Mode	EE	EE + SP	EE + CH	F
Bi-Weekly	\$20.70	\$39.20	\$28.70	\$44.62

EE = Employee; EE + SP = Employee + Spouse;
EE + CH = Employee + Child(ren); F = Family

Benefit - Benefits paid for the following conditions (subject to limits listed on page 3)

Hospitalization Benefits

First Day Hospital Confinement -

once per continuous confinement per covered person, up to the limit stated (see pg. 3). Not paid for newborn child's initial confinement after birth (see Hospitalization Due to Pregnancy)

Daily Hospital Confinement - up to the maximum number of days for each confinement (see pg. 3). Hospitalization due to pregnancy is covered, subject to the Pre-Existing Condition Limitation. Not paid for any day the First Day Hospital Confinement benefit is paid (see How We Pay the Daily Hospital Confinement Benefit)

Hospitalization Due to Pregnancy - your First Day Hospital Confinement does include hospitalization due to normal pregnancy or complications of pregnancy, subject to the Pre-Existing Condition Limitation. A newborn child's initial confinement in a hospital is not payable for First Day Hospital Confinement. A newborn child's initial confinement in a hospital includes any transfers to another hospital before being discharged to go home. A newborn child's routine nursing or well-baby care during the initial confinement in a hospital is not payable for Daily Hospital Confinement

How We Pay the Daily Hospital

Confinement Benefit - the Daily Hospital Confinement Benefit pays for each day of a continuous confinement in a hospital for the maximum number of days (see pg. 3)

Hospital Intensive Care - up to the maximum number of days stated on page 3 for each confinement. Payable in addition to the First Day Hospital Confinement benefit and Daily Hospital Confinement benefit

Surgery Benefits

Variable Surgical Schedule - surgery performed in a hospital or ambulatory surgical center, based on the amount shown in the certificate Surgical Schedule. See the full schedule located under the Benefit Information section in your certificate; ask your benefits representative for details. Two or more surgeries performed at the same time through one incision are considered one surgery. Payable once per day per covered person

Ambulatory Surgical Center - surgery performed at an ambulatory surgical center. Not paid for any day the Outpatient Emergency Treatment benefit is paid. Payable once per day per covered person, up to 2 days per person per year

Anesthesia - 25% of the Variable Surgical Schedule benefit

Outpatient Benefit

Outpatient Emergency Treatment - medical treatment received in an emergency treatment center. Not paid for any day the Ambulatory Surgical Center benefit is paid. Payable once per day per covered person, up to 2 days per person per coverage year

Wellness Benefit

Fixed Wellness - once per day per covered person per coverage year, if one of the following services is received: Biopsy for skin cancer; Blood test for triglycerides; Bone Marrow Testing; CA15-3, CA125, CEA, and PSA (blood tests for breast, ovarian, colon, and prostate cancer); Chest X-ray; Colonoscopy; Doppler screenings for

carotids and peripheral vascular disease; Echocardiogram; EKG (Electrocardiogram); Flexible sigmoidoscopy; Hemocult stool analysis; HPV Vaccination (Human Papillomavirus); Lipid panel (total cholesterol count); Mammography, including Breast Ultrasound; Pap Smear, including ThinPrep Pap Test; Serum Protein Electrophoresis

(test for myeloma); Stress test on bike or treadmill; Thermography; or Ultrasound screening for abdominal aortic aneurysms

Miscellaneous Benefits

Mental/Nervous Disorder - confinement in a hospital or residential treatment facility for treatment of mental and/or nervous disorders, up to the maximum number of days for each confinement (see maximum number of days for each confinement on page 3). Not paid for any day the Daily Hospital Confinement benefit or Drug/Alcohol Rehabilitation benefit is paid

Drug/Alcohol Rehabilitation - daily confinement in a hospital or residential treatment facility for treatment of drug and/or alcohol addictions, up to the maximum number of days for each confinement (see maximum number of days for each confinement on page 3). Not paid for any day the Daily Hospital Confinement benefit or Mental/Nervous Disorder benefit is paid



Protecting individuals & families for over 60 years

Beneficial insurance coverage to **help you and your family enjoy greater financial peace of mind** when the unexpected happens.

When you choose our
**Group Voluntary
Insurance Coverage**,
we can help give you financial
peace of mind.

We have been in the business of protecting America's families for over 60 years. Our valuable coverage options help empower people to make the best decisions for their finances and their futures.

Once you've elected coverage, register with our convenient customer service portal, MyBenefits, for anytime access to your coverage details and important documents. MyBenefits also allows you to file claims quickly and easily – and get benefits deposited directly into your bank account (authorization required).

Certificate Specifications

Conditions and Limits - We pay benefits as stated for service and treatment received by the covered person while coverage is in force for sickness or injury. Hospital room and board charges must be incurred for benefits to be payable. **Treatment must be received in the United States or its territories.**

Eligibility - Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

Dependent Eligibility/Termination of Coverage - Coverage may include you, your spouse or domestic partner, and children. Coverage for children ends upon your death or when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends upon termination of domestic partnership or your death.

When Coverage Ends - Coverage under the policy ends on the earliest of: the date the policy is canceled; the last day of the period for which you made any required contributions; the last day you are in active employment or a member in an association, labor union or other entity, except as provided under the "Temporary Layoff, Leave of Absence, or Family and Medical Leave of Absence" provision; the date you are no longer in an eligible class; the date your class is no longer eligible; upon discovery of fraud or material misrepresentation when filing for a claim; the date you request to discontinue coverage.

Portability - You may be eligible to continue your coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

Exclusions and Limitations

Pre-Existing Condition - We do not pay benefits due to a pre-existing condition if the loss occurs during the first 12 months of coverage. A pre-existing condition is a condition for which: medical treatment, consultation, care or services were received, including diagnostic measures, drugs or medicines were taken or prescribed, over-the-counter medications were taken or treatment recommendations were followed in the 12 months prior to the effective date or the date an increase in benefits would be effective; or symptoms existed within the 12 months prior to the effective date or the date an increase in benefits would be effective.

The limitation applies if the insured person is pregnant prior to the effective date.

Exclusions - Benefits are not paid for any loss caused by or resulting from (directly or indirectly): injury or sickness incurred before the effective date; any act of war or participation in a riot, insurrection or rebellion; suicide or attempt at suicide; engaging in an illegal occupation or committing or attempting an assault or felony; cosmetic dentistry or plastic surgery, except to treat an injury or correct a disorder of normal body function; intentionally self-inflicted injuries; confinement that begins before the effective date of coverage; the reversal of a tubal ligation or vasectomy; artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications or physician services, unless required by law; participation in aeronautics (including parachuting and hang gliding) unless a fare-paying passenger on a licensed common-carrier aircraft operating between established airports; a newborn child's routine nursing or well-baby care during the initial confinement in the hospital; driving in any race or speed test or testing any motorized vehicle on any racetrack or speedway; childbirth within the first 10 months of the covered person's effective date.

This brochure is for use in enrollments situated in GA. This advertisement is a solicitation of insurance; contact may be made by an Agent, Agency, or Representative of The Standard.

Rev. 1/26. This material is valid as long as information remains current, but in no event later than January 1, 2029.

Group Hospital Indemnity benefits are provided under policy form GVSP2, or state variations thereof.

The coverage provided is limited benefit hospital indemnity insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review the Medicare Supplement Buyer's Guide available from American Heritage Life Insurance Company. There may be instances when a law requires that benefits under this coverage be paid to a third party rather than to you. If you or a dependent have coverage under Medicare, Medicaid, or a state variation, please refer to your health insurance documents to confirm whether assignments or liens may apply.

This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office: Jacksonville, FL). Details of the coverage, including exclusions and other limitations, are included in the certificates issued. For additional information, you may contact your Representative at The Standard.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



The Standard is the marketing name used by American Heritage Life Insurance Company, a subsidiary of StanCorp Financial Group, Inc. standard.com or standard.com/ahl