



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)



Protecting insureds for over 60 years

Meeting Your Needs

- Guaranteed Issue coverage without 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.

Coverage offered to the employees of:



Health

Meet Adam



Choose

Adam signed up for Hospital Indemnity Insurance during his employer's Open Enrollment.

Use

A few months later, Adam is taken to the hospital with debilitating abdominal pains. Here's his story:



Ambulance

Adam's wife calls an ambulance to take him to the hospital emergency room



Tests

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



Hospital Stay

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



Surgery

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



Recovery

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

Claim

Adam files a claim with his Hospital Indemnity coverage through the convenient web portal, **MyBenefits**. He receives cash benefits for:

- Hospital Admission
- 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 Adam 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 afford home repairs for after care



Expenses

Can help pay for his 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.

Hospital Indemnity (GHI3)

Group Hospital Indemnity Insurance from The Standard

BENEFIT AMOUNTS

HOSPITAL CARE SERVICE BENEFIT[S]	PLAN 1	PLAN 2
Admission Benefit[s]		
Hospital Admission	\$1,500	\$2,500
Limit to Number of Occurrences (per coverage year)	1/Year	1/Year
Hospital Admission - Newborn Routine Nursery Care	\$200	\$400
Limit to Number of Occurrences (1 per NewBorn)	1	1
Intensive Care Unit Admission	\$2,500	\$3,500
Limit to Number of Occurrences (per coverage year)	1/Year	1/Year
Confinement Benefit[s] (once per day)		
Daily Hospital Confinement	\$200	\$400
Maximum Number of Days	30	30
Daily Hospital Confinement - Newborn Routine Nursery Care	\$50	\$100
Maximum Number of Days	5	5
Daily Intensive Care Unit Confinement	\$300	\$500
Maximum Number of Days	30	30
Observation Care Benefit		
Observation Unit		
Observation Lasting [1] to [24] hours	\$100	\$200
Number of Days Between Each Occurrence	None	None
Limit to Number of Occurrences (per coverage year)	1/Year	1/Year
ADDITIONAL CARE SERVICES BENEFIT[S]	PLAN 1	PLAN 2
Confinement Benefit[s] (once per day)		
Rehabilitation or Subacute Rehabilitation Unit Confinement	\$100	\$200
Maximum Number of Days	10	10
Skilled Nursing Facility Confinement	\$100	\$200
Maximum Number of Days	10	10
BEHAVIORAL HEALTH BENEFIT[S]	PLAN 1	PLAN 2
Confinement Benefit[s] (once per day)		
Mental or Nervous Disorder Confinement	\$100	\$200
Maximum Number of Days	10	10
Substance Abuse Confinement	\$100	\$200
Maximum Number of Days	10	10
OPTIONAL/ADDITIONAL RIDER BENEFIT[S]	PLAN 1	PLAN 2
Critical Support Confinement*	10%	10%
Automobile Accident*	10%	10%
Fixed Health Screening Services (once per year)	\$50	\$50
BENEFIT LIMITATIONS	PLAN 1	PLAN 2
Pregnancy Waiting Period	None	None
Pre-Existing Condition Limitation	No Pre-Ex	No Pre-Ex

* Critical Support Confinement Rider

Pays an additional percentage of the benefit amounts paid for Hospital Admission, Intensive Care Unit Admission, Daily Hospital Confinement or Daily Intensive Care Unit Confinement.

* Automobile Accident Rider

Pays an additional percentage of the benefit amounts paid for Hospital Admission, Intensive Care Unit Admission, Step-Down Intensive Care Unit Admission, Daily Hospital Confinement, Daily Intensive Care Unit Confinement, Daily Step-Down Intensive Care Unit Confinement, Observation Unit or Additional Care Services.



The Standard is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Standard Corporation.
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Benefits - Benefits are payable for the following conditions (subject to maximums as listed on page 3)

How We Pay Same-Day Benefits - Benefits are only payable one time per day even if the covered person is transferred to another facility on the same day. If the loss would be payable on the same day under the Hospital Care Services Benefits, Additional Care Services Benefits and Behavioral Health Benefits categories, **we only pay the benefit with the highest amount.**

Hospital Care Services Benefit(s)

The Hospital Care Services Benefits listed below do not include visits to emergency departments or visits to a hospital as an outpatient, unless the visit meets the definition of admission or confinement (see the Definitions category) or can be covered under the Observation Unit benefit.

Newborn child coverage for intensive care unit confinements due to sickness or injury following childbirth may be payable under the Intensive Care Unit Admission or the Daily Intensive Care Unit Confinement.

Admission Benefits

Hospital Admission - payable once per day per covered person (other than a newborn child) for the first day of hospital admission, up to the limit stated (see page 3). This benefit is not payable for a newborn child's first admission for routine nursery care after birth. A newborn child's first admission includes any transfers to another hospital before being discharged to go home (see Hospital Admission - Newborn Routine Nursery Care for more details).

Hospital Admission - Newborn Routine Nursery Care - payable once per day for a newborn child's initial admission to a hospital for routine nursery care following childbirth. This benefit is payable up to the limit stated on page 3.

Intensive Care Unit Admission - payable once per day per covered person for the first day of admission to a hospital intensive care unit due to sickness or injury or a combination of the two, up to the limit stated on page 3.

Daily Hospital Confinement - payable once per day per covered person for continuous hospital confinement due to sickness or injury or a combination of the two, up to the maximum number of days stated on page 3. Hospitalization due to pregnancy is covered. This benefit is not payable for a newborn child's initial hospital confinement for routine nursery care following childbirth, including any transfers to another hospital before the newborn is discharged to go home (see Daily Hospital Confinement - Newborn Routine Nursery Care for more details).

Daily Hospital Confinement - Newborn Routine Nursery Care - payable once per day for a newborn child's confinement in a hospital for routine nursery care following childbirth. This benefit is payable in addition to the Hospital Admission - Newborn Routine Nursery Care benefit, up to the maximum number of days stated on page 3, if both confinements occur on the same day.

Daily Intensive Care Unit Confinement - payable once per day per covered person for each day of intensive care unit confinement, up to the maximum number of days stated on page 3.

Observation Care Benefit

Observation Unit - payable once per covered person for 1 hour to 24 hours of monitored care in an observation unit, up to the limit stated on page 3. Observations lasting more than 24 hours are not payable under the Observation Unit benefit, but would be payable under the appropriate Confinement benefit. Not payable for pre-operative or post-operative care.

Additional Care Services Benefit(s)

Rehabilitation or Subacute Rehabilitation Unit Confinement - payable once per day per covered person for each rehabilitation or subacute unit confinement due to sickness or injury or a combination of the two, up to the maximum number of days stated on page 3.

Skilled Nursing Facility Confinement - payable once per day per covered person for each skilled nursing facility confinement due to sickness or injury or a combination of the two, up to the maximum number of days stated on page 3.

Behavioral Health Benefit(s)

Mental or Nervous Disorder Confinement - payable once per day per covered person for each hospital or residential treatment facility confinement for more than one mental or nervous disorder, up to the maximum number of days stated on page 3.

Substance Abuse Confinement - payable once per day per covered person for each hospital or residential treatment facility confinement for treatment of substance abuse, up to the maximum number of days stated on page 3.

Optional/Additional Rider Benefit(s)

Critical Support Confinement Rider - payable for each day a covered person is confined and treated using critical support equipment designed to assist or replace the regular function of the heart, brain, kidneys, liver, and lungs, including invasive ventilators, ECMO oxygen machines, and hemofiltration machines. Pays an additional percentage of the benefit amounts paid for certificate benefits for Daily Hospital Confinement

Automobile Accident Rider - payable for injuries caused by a covered accident while driving or traveling as a passenger in an automobile.

Fixed Health Screening Services Rider - payable for one eligible service performed each calendar year for each covered person. Covered services include:

Biopsy for cancer and skin cancer; Blood Chemistry Panel; Blood Tests for Triglycerides, CA15-3 (breast cancer), CA125 (ovarian cancer), CEA (colon cancer), or PSA (prostate cancer); Chest X-ray; Clinical Testicular Exam; CBC (blood count); Colonoscopy; Dental Exam; Doppler Screening (cancer, carotids or peripheral vascular disease); Echocardiogram; EKG (Electrocardiogram); EEG (Electroencephalogram); Endoscopy; Eye Exam; Fasting Blood or Plasma Glucose test; Flexible Sigmoidoscopy; Hearing Test; Hemoglobin A1C; Hemocult Stool Analysis; HPV (Human Papillomavirus) vaccination; Immunization; Inpatient Visit for routine newborn care; Lipid Panel (total cholesterol count); Mammography (including breast ultrasound); Mental Health

Assessments, including Patient Health Questionnaire-9 (PHQ-9), Beck Depression Inventory (BDI-II), and Hamilton Depression Rating Scale (HAM-D); Novel infectious disease immunization; Office Visits for Preventative Care; Oral Cancer Screening; Pap Smear, including ThinPrep Pap Test; Sampling of blood or tissue for genetic testing for cancer risk; Serum Protein Electrophoresis (test for myeloma); Sexually Transmitted Infections (STI) test; Skin Cancer Screening; Skin Exam; Stress Test (bike or treadmill); Testing for Donation of Bone Marrow (includes HLA - Human Leukocyte Antigen); Thermography; Two-Hour Post-Load Plasma Glucose Test; Ultrasound Screening of abdominal aorta for aortic aneurysms; or Ultrasound for cancer detection.

Definitions

Admission - being admitted for confinement to a facility.

Confinement - confinement in a facility that lasts for at least 24 hours or includes a room and board charge.

Continuous Confinement - one uninterrupted confinement, or two or more consecutive confinements that are not separated by more than 24 hours each. Two or more confinements that are separated by more than 24 hours are considered to be separate confinements.

Rehabilitation Unit - a freestanding licensed institution that provides coordinated multidisciplinary physical restorative services to inpatients under the direction of a physician who is knowledgeable and experienced in rehabilitative medicine. To be considered a rehabilitation unit, the facility must provide treatment and care for ill and injured persons on an inpatient basis and it must provide 24-hour nursing services. A rehabilitation unit can also be a portion of a hospital that includes beds and is staffed specifically for rehabilitative medicine.

Mental or Nervous Disorders - a psychiatric or psychological condition (regardless of the cause), defined by categories listed in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders.



Certificate Specifications

Conditions and Limits - Benefits are payable for service and treatment a covered person receives for a sickness or injury while coverage is in force. A confinement is required for hospital admission and confinement benefits to be payable. **Treatment must be received in the United States or its territories, or Canada.**

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 civil union partner, or domestic partner, and children. Spouse, civil union partner and domestic partner coverage ends when your coverage ends, when you request to terminate coverage, upon valid decree of divorce or dissolution of partnership, upon your death, or when all available benefits under the certificate and riders have been exhausted. Coverage for children ends when your coverage ends, when you request to terminate coverage for your child, upon your death, when your child reaches age 26 (unless they are dependent on you for support or unless they are disabled or incapacitated and are allowed to continue coverage through the Continuation of Coverage provision), or when all available benefits under the certificate and riders have been exhausted.

When Coverage Ends - Coverage under the policy ends on the earliest of the following: the date the policy is terminated; the end of the grace period following non-payment of any required premiums; the last day you are in active employment or a member in an association, labor union or other entity, except as provided under the "Family and Medical Leave of Absence, Leave of Absence, Military Leave of Absence, Temporary Layoff, or Other Approved Leaves of Absences" provisions; the date you are no longer in an eligible class; the date your class is no longer eligible; your death; you exhaust all available benefits and riders; upon discovery of fraud or material misrepresentation when filing for a claim.

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

Exclusions And Limitations

Exclusions and Limitations for the Policy, Critical Support Confinement Rider, Automobile Accident Rider, and Fixed Health Screening Services Rider - Benefits are not payable for any loss that is caused by, contributed to by, or results from: any act of war, whether or not declared; participation in a riot, insurrection, rebellion, or terrorist act; suicide or attempt at suicide, while sane; engaging in an illegal occupation or committing or attempting an assault or felony; confinement that begins before the effective date of coverage; intentionally self-inflicted injury or action; participation in aeronautics except as a fare-paying passenger on a licensed common-carrier aircraft operating between definitely established airports; driving, operating, or riding in a vehicle in any race or speed test or testing any motorized vehicle on any course, racetrack or speedway; operating a vehicle with a blood alcohol level that equals or exceeds the legal limit for operating a vehicle in the jurisdiction in which the loss occurred; cosmetic dentistry or plastic surgery, except to treat an injury or correct a disorder of normal body function; 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; voluntary taking of any poison, gas, or fumes, whether by ingestion, injection, inhalation, or absorption; voluntary taking of any drug or sedative, unless taken as prescribed or administered by a physician (does not apply to any benefits in the Behavioral Health category).

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

This material is valid as long as information remains current, but in no event later than October 06, 2029. Group Hospital Indemnity benefits are provided under policy form GHIC3, or state variations thereof. Group Hospital Indemnity Rider benefits are provided under the following rider forms, or state variations thereof: Critical Support Confinement Rider (GHIC3CSCR); Automobile Accident Rider (GHIC3AAR); Fixed Health Screening Services Rider (GHIC3FHSR).

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.



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