

Aflac

GROUP BENEXTEND FOR DISEASES

*Hospital care and physician/clinical services combined account for over half (52%) of the nation's health expenditures**

We'd like to think science can stop contagious diseases in their tracks, but outbreaks such as the flu, SARS, and COVID-19 have shown that's not always the case. This program helps with the unexpected. That's where BenExtend® plan can help. BenExtend for Diseases helps address expenses health insurance doesn't cover.

How will you help protect your savings when you have a covered accident or sickness?

If you are confined to the hospital, major medical insurance will help with many medical expenses, but you could be left with out-of-pocket expenses like deductibles and co-pays. You could also lose pay while you're out of work. And you can be sure that the bills will keep coming. Aflac is here to help.

- Hospital Admission
- Hospital Confinement
- Critical Illnesses & Cancer
- Life
- Preventative Screening

Plan Features

- No pre existing condition limitation including pregnancy.
- Coverage is guaranteed-issue regardless of health.
- Benefits are paid regardless of any other medical insurance.
- Benefits are paid directly to you unless otherwise assigned.



Weekly BenExtend Rates

	High	Low
Employee Only	\$8.62	\$6.25
Employee & Spouse	\$17.27	\$12.51
Employee & Dependent Children	\$12.17	\$8.57
Family	\$20.82	\$14.83



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	<i>High</i>	<i>Low</i>
HOSPITAL ADMISSION (per full admission) Once per covered sickness or accident per calendar year	<i>\$1,500</i>	<i>\$1,000</i>
HOSPITAL CONFINEMENT (per day) Maximum confinement period: 15 days per covered sickness or covered accident	<i>\$200</i>	<i>\$125</i>
TERM LIFE RIDER Payable if an insured dies while covered under this plan.	<i>\$5,000</i>	<i>\$5,000</i>
CANCER (Internal or Invasive)	<i>\$5,000</i>	<i>\$5,000</i>
HEART ATTACK (Myocardial Infarction)	<i>\$5,000</i>	<i>\$5,000</i>
STROKE (Ischemic or Hemorrhagic)	<i>\$5,000</i>	<i>\$5,000</i>
MAJOR ORGAN TRANSPLANT	<i>\$5,000</i>	<i>\$5,000</i>
KIDNEY FAILURE (End-Stage Renal Failure)	<i>\$5,000</i>	<i>\$5,000</i>
BONE MARROW TRANSPLANT (Stem Cell Transplant)	<i>\$5,000</i>	<i>\$5,000</i>
SUDDEN CARDIAC ARREST	<i>\$5,000</i>	<i>\$5,000</i>
NON-INVASIVE CANCER	<i>\$1,250</i>	<i>\$1,250</i>
CORONARY ARTERY BYPASS SURGERY	<i>\$1,250</i>	<i>\$1,250</i>

INITIAL DIAGNOSIS

We will pay a lump sum benefit upon initial diagnosis of a covered critical illness when such diagnoses is caused by or solely attributed to an underlying disease. Cancer diagnoses are subject to the cancer diagnosis limitation.

ADDITIONAL DIAGNOSIS

We will pay benefits for each different critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months, and the new critical illness is not contributed to or caused by a critical illness for which benefits have been paid.

REOCCURRENCE

We will pay benefits for the same critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months, and the new critical illness is not contributed to or caused by a critical illness for which benefits have been paid.

SKIN CANCER BENEFIT

We will pay \$250 for the diagnosis of skin cancer. We will pay this benefit once per calendar year.

HEALTH SCREENING BENEFIT (Employee and Spouse only)

We will pay for health screening tests performed while an insured's coverage is in force. We will pay this benefit once per calendar year. This benefit is not paid for dependent children.

\$50

The information in this Benefits Summary is presented for illustrative purposes and does not include the limitations and exclusions. The text contained in this summary was taken from the full plan description and benefit information. For the full schedule of benefits and outline of coverages, please see the brochures provided by your employer. In case of discrepancy between the summary and the actual plan documents, the actual plan documents will prevail. If you would like a copy of your outline of coverage, please call **1.800.433.3036**