



What is it?

Short-term disability insurance pays you a portion of your salary while you're away from work or recovering from a covered illness or injury.

Why is this coverage valuable?

When you're unable to collect your normal paycheck due to injury or illness, your disability policy provides money that can help you pay your bills.

Your short-term disability coverage

Eligibility description	All Full-Time Employees
Contribution	You pay the cost of your coverage
Coverage amount	60% of your weekly earnings to a maximum of \$2,500 per week
Maximum benefit period	26 weeks
Accident elimination period	7 days
Illness elimination period	7 days
Recurrent disability benefits	If you become disabled for the same condition within 2 weeks following your prior disability, your benefits will continue under the same claim.
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Health statement may be required.
Preexisting conditions: Any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months lookback; 12 months after effective date of coverage
Premium waived if disabled: Premium won't need to be paid when you're receiving benefits.	Yes

Exclusions, limitations, and reductions

Like any insurance, this short-term disability insurance policy does have exclusions. You won't receive benefits if: - Your disability is the result of a self-inflicted injury or act of war - Your disability occurs while you're committing a felony or misdemeanor, or participating in a riot This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.	Your benefits may be reduced if you're eligible to receive income or benefits from: - State disability or no-fault insurance - A retirement plan - Social Security - Any form of employment - Workers' compensation - Salary continuance plan - Sick leave - State paid family leave benefits - Any other group insurance plan - Unemployment - Recovery from third party State variations apply.
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This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial[®] companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



What is it?

Life insurance provides cash benefits in the unfortunate event that you or a covered family member passes away.

Why is this coverage valuable?

Life insurance can offer reassurance that you, or the people you love, will have access to money to help cover expenses during a challenging time.

Your life insurance coverage

Eligibility description	All Full-Time Employees
Contribution	You pay the cost of your coverage
Employee life coverage amount	Increments of \$10,000
Employee life coverage maximum	This amount may not exceed the lesser of 5 times annual earnings rounded to the next higher \$10,000 or \$500,000
Spouse coverage	The amount of dependent life insurance coverage cannot be greater than 100% of the employee benefit. Increments of \$10,000
Spouse coverage maximum	This amount may not exceed the lesser of 5 times annual earnings rounded to the next higher \$10,000 or \$500,000
Dependent child(ren) coverage	Day 1 to but less than 26 years, or 26 years if a full-time student: Increments of \$2,000 up to a maximum of \$10,000
Guarantee issue: You're not required to answer health questions to qualify for coverage up to and including the specified amount when you sign up for coverage during the initial enrollment period.	Employee: \$100,000 Spouse: \$50,000
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Health statement may be required.
Benefit reductions	Employee: 40% reduction at age 75, an additional 25% reduction of the original amount at age 80, an additional 7% of the original amount at age 85, an additional 8% of the original amount at age 90, and an additional 5% of the original amount at age 95. Benefits end when you retire. Spouse: 40% reduction at age 75, an additional 25% reduction of the original amount at age 80, an additional 7% of the original amount at age 85, an additional 8% of the original amount at age 90, and an additional 5% of the original amount at age 95. Benefits end upon the employee's retirement.
Portability: Allows you to continue maintaining coverage if you terminate your employment.	Yes
Conversion: Allows you to continue coverage after your group plan has been terminated.	Yes, with restrictions. See certificate of benefits.
Accelerated life benefit: A lump-sum benefit is paid to you if you're diagnosed with a terminal condition as defined by the plan.	Yes. See certificate of benefits.
Waiver of premium: Relieves you from paying premiums during a period of disability that's lasted for a specific length of time.	Included



LifeKeys[®] services: Access to counseling, financial, and legal support services.

Included

TravelConnect[®] services: Access to emergency medical assistance for you and your family when you're on a trip 100 or more miles from home.

Included

Benefit exclusions

Like any insurance, this life insurance policy does have exclusions.

For life insurance, a suicide exclusion may apply.

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.



Reminder: Please review your beneficiary(ies) to ensure they're up to date. It's good practice to review, and if necessary, update your beneficiary(ies) annually.

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

LifeKeys[®] services are provided by ComPsych[®] Corporation, Chicago, IL. ComPsych[®] is not a Lincoln Financial[®] company. Coverage is subject to actual contract language. Each independent company is solely responsible for its own obligations (except in Vermont).

State limitations apply. Beneficiary grief counseling is the only benefit available to a beneficiary(ies) of policies issued in the state of New York. Online will prep is the only benefit available to insured employees and dependents of policies issued in the state of Washington.

TravelConnect[®] services are provided by On Call International, Salem, NH. On Call International is not a Lincoln Financial[®] company and Lincoln Financial[®] does not administer these services. Each independent company is solely responsible for its own obligations.

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On Call International must coordinate and provide all arrangements in order for eligible services to be covered. Coverage is subject to contract language that contains specific terms, conditions, and limitations, which can be found in the program description.

The *TravelConnect*[®] program is not available to insured employees and dependents of policies issued in the state of New York and Washington. Access only program available to insured employees and dependents of policies issued in the state of Missouri and Texas. Benefits provided under the Access only program exclude payment for paid services.

Not for use in New York or Washington.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial[®] companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



What is it?

Accidental death and dismemberment (AD&D) insurance provides a cash payout in the unfortunate event that you or a covered family member passes away or suffers a traumatic injury from certain covered accidents.

Why is this coverage valuable?

AD&D insurance can offer reassurance that you, or the people you love, will have access to money to help cover expenses during a challenging time.

Your AD&D coverage

Eligibility description	All Full-Time Employees
Contribution	You pay the cost of your coverage
Employee AD&D coverage amount	Increments of \$10,000
Employee AD&D coverage maximum	This amount may not exceed the lesser of 5 times annual earnings rounded to the next higher \$10,000 or \$500,000
Spouse AD&D coverage Note: You can secure AD&D insurance for your spouse if you select coverage for yourself.	The amount of dependent life insurance coverage cannot be greater than 100% of the employee benefit. Increments of \$10,000
Spouse coverage maximum	This amount may not exceed the lesser of 5 times annual earnings rounded to the next higher \$10,000 or \$500,000
Dependent child(ren) coverage Note: You can secure AD&D insurance for your dependent child if you select coverage for yourself.	Day 1 to but less than 26 years, or 26 years if a full-time student: Increments of \$2,000 up to a maximum of \$10,000
Benefit reductions	Employee: 40% reduction at age 75, an additional 25% reduction of the original amount at age 80, an additional 7% of the original amount at age 85, an additional 8% of the original amount at age 90, and an additional 5% of the original amount at age 95. Benefits end when you retire. Spouse: 40% reduction at age 75, an additional 25% reduction of the original amount at age 80, an additional 7% of the original amount at age 85, an additional 8% of the original amount at age 90, and an additional 5% of the original amount at age 95. Benefits end upon the employee's retirement.
LifeKeys® services: Access to counseling, financial, and legal support services.	Included
TravelConnect® services: Access to emergency medical assistance for you and your family when you're on a trip 100 or more miles from home.	Included



Benefit exclusions

Like any insurance, this AD&D insurance policy does have exclusions. Benefits won't be paid if death or dismemberment occurs as the result of:

- War, declared or undeclared, or any act of war
- Intentionally self-inflicted injuries, while sane or insane
- Suicide, or suicide attempt, while sane or insane
- Active participation in a riot
- Committing or attempting to commit a felony
- Disease, bodily or mental illness, or medical or surgical treatment thereof
- Infections
- Controlled substances voluntarily taken, ingested, or injected, unless prescribed or administered by a physician
- Serving on full-time active duty in the armed forces of any country or international authority
- The presence of alcohol in the covered person's blood, which raises the presumption that the covered person was under the influence of alcohol and contributed to the cause of the accident

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.



Reminder: Please review your beneficiary(ies) to ensure that they're up to date. It's good practice to review, and if necessary, update your beneficiary(ies) annually.

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

LifeKeys[®] services are provided by ComPsych[®] Corporation, Chicago, IL. ComPsych[®] is not a Lincoln Financial[®] company. Coverage is subject to actual contract language. Each independent company is solely responsible for its own obligations (except in Vermont).

State limitations apply. Beneficiary Grief counseling is the only benefit available to a beneficiary(ies) of policies issued in the state of New York. Online will prep is the only benefit available to insured employees and dependents of policies issued in the state of Washington.

TravelConnect[®] services are provided by On Call International, Salem, NH. On Call International is not a Lincoln Financial[®] company and Lincoln Financial[®] does not administer these services. Each independent company is solely responsible for its own obligations.

On Call International must coordinate and provide all arrangements in order for eligible services to be covered. Coverage is subject to contract language that contains specific terms, conditions, and limitations, which can be found in the program description.

The TravelConnect[®] program is not available to insured employees and dependents of policies issued in the state of New York and Washington. Access only program available to insured employees and dependents of policies issued in the state of Missouri and Texas. Benefits provided under the Access only program exclude payment for paid services. Not available in New York and Washington.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial[®] companies. Product availability and/or features may vary by state. Limitations and exclusions apply.

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What is it?

Accident insurance is a supplemental health product that may provide benefits if you or your covered dependent suffers a covered injury.

Why is this coverage valuable?

This coverage provides you a lump sum cash benefit to help manage unexpected expenses. How you spend it is completely up to you — from everyday bills or childcare to other expenses.

Your accident coverage

Eligibility description	All Full-Time Employees
Contribution	You pay the cost of your coverage.
Emergency treatment	
Ambulance	\$300
Air ambulance	\$900
Emergency care/treatment	\$300
Initial care visit	\$150
Major diagnostic	\$275
X-ray	\$300
Fractures	
Ankle	\$1,250
Arm (shoulder to elbow)	\$1,375
Arm (elbow to wrist)	\$1,050
Coccyx	\$425
Collarbone	\$1,250
Elbow	\$375
Bones of the face	\$1,125
Fingers	\$200
Foot (except toes)	\$1,025
Hand (except fingers)	\$1,025
Hip	\$3,250
Jaw upper	\$1,250
Jaw lower	\$1,250
Kneecap	\$1,750
Leg (hip to knee)	\$2,400
Leg (knee to ankle)	\$1,850
Nose	\$1,175
Pelvis	\$2,150



Rib	\$525
Shoulder blade	\$1,475
Skull depressed	\$3,000
Skull non-depressed	\$1,500
Sternum	\$500
Toes	\$200
Vertebral body	\$1,900
Vertebral process	\$1,075
Wrist	\$1,200
Surgical treatment surgery	Two times nonsurgical benefit
Chip fracture	25% of fracture benefit
Dislocations	
Ankle	\$1,250
Collarbone (acromion and separation)	\$975
Collarbone (sternoclavicular)	\$1,250
Elbow	\$1,250
Fingers	\$350
Foot (except toes)	\$950
Hand (except fingers)	\$700
Hip	\$3,000
Lower jaw	\$700
Knee (except kneecap)	\$1,750
Shoulder	\$2,500
Toes	\$150
Wrist	\$950
Surgical treatment	Two times nonsurgical benefit
Partial dislocation	25% of dislocation benefit
Specific injuries	
Blood, plasma, platelets, and other non-blood substitute IV solutions	\$900
2nd degree burns: Based upon surface area burned	\$300 – \$1,500
3rd degree burns: Based upon surface area burned	\$300 – \$1,500
Skin grafts	50% of burn benefit
Concussion	\$300
Dental crown	\$300
Dental extraction	\$125



Eye (surgical repair)	\$300
Eye (removal of foreign object)	\$250
Laceration: based upon the need for and length of sutures	\$75 – \$150
Severe traumatic brain injury	\$15,000
Surgical benefits	
Arthroscopic	\$500
Cranial	\$1,750
Hernia	\$200
Other surgery under conscious sedation	\$225
Other surgery under general anesthesia	\$450
Repair of knee cartilage	\$1,500
Repair of ligaments, tendons, rotator cuff	\$1,500
Repair of ruptured disc	\$1,500
Open abdominal or thoracic	\$3,000
Hospitalization and ongoing care	
Accident hospital admission	\$1500
Accident hospital daily confinement	\$300
Accident intensive care admission	\$3,000
Accident intensive care daily confinement	\$600
Physical, occupational, and chiropractic therapy (up to 10 sessions)	\$90
Physician follow-up visits (up to six visits)	\$155
Alternative care/rehabilitative confinement	\$300
Epidural/cortisone pain management (up to one injections)	\$150
Medical mobility devices	\$200
Wheelchair (expected use one year or more)	\$900
Wheelchair (expected use less than one year)	\$250
Prosthesis (per limb)	\$1,000
Recovery assistance	
Family care	\$300
Companion lodging (100 or more miles from home)	\$300 per day
Transportation (100 or more miles from home)	\$600 per trip
Accidental death and dismemberment (AD&D) benefit	
Accidental death: Your death	\$60,000
Accidental death: Your spouse or life partner	\$30,000



Accidental death: Your child	\$15,000
Common carrier death: Your death	\$120,000
Common carrier death: Your spouse or life partner	\$60,000
Common carrier death: Your child	\$30,000
Transportation of remains (100 or more miles)	\$12,500
Safe driver: Seat belt	10% of AD&D benefit
Safe driver: Air bag	10% of AD&D benefit
Safe driver: Helmet	10% of AD&D benefit
Loss of hand, foot, arm, leg, eye, or hearing in one ear	\$12,500
Loss of finger, thumb, toe	\$1,625
Loss of sight in both eyes	\$32,500
Loss of hearing in both ears	\$32,500
Loss of speech	\$32,500
Loss of both arms	\$32,500
Loss of both legs	\$32,500
Loss of arm and leg	\$32,500
Paraplegia	\$22,500
Hemiplegia	\$22,500
Loss of both arms and both legs	\$32,500
Quadriplegia	\$45,000
Education: This benefit is paid if an insured person dies within 365 days of a covered accident and is survived by one or more full-time students. The education benefit is payable for each full-time student.	10% of AD&D benefit
Spouse training: This benefit is paid if a covered employee or dependent spouse dies within 365 days of a covered accident, and the surviving spouse is enrolled as a student. The spouse training benefit covers students enrolled in any school that retrains or refreshes skills needed for employment within 365 days from the date of death.	10% of AD&D benefit
Modification to home or auto: This benefit is payable for modifications to make the principal residence accessible or the vehicle ridable if the insured suffers a severe loss. This benefit is payable once per person within 365 days of the accident.	\$3,500

Health assessment/wellness benefit



Receive a cash benefit every year you and any of your covered family members complete a single covered assessment test.

\$50

Additional plan benefits

Portability

Included

Child sports injury benefit

Included

Benefit exclusions

Like any insurance, this accident policy does have exclusions. The list below provides common exclusions but isn't meant to be exhaustive of all exclusions or limitations that may be part of your policy. See your policy for full details. The policy may not cover:

- Disease, physical or mental infirmity, sickness, or medical or surgical treatment of these
- Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane
- Voluntary intake or use by any means of any drugs, poison, gas, or fumes, voluntary use of controlled substance, voluntary intake or use by any means of any drug, except when:
 - Prescribed or administered by a physician
 - Taken in accordance with the physician's instructions
- Committing or attempting to commit a felony, participation in a felony, voluntary participation in a felony, voluntary committing or attempting to commit a felony
- War or any act of war, declared or undeclared, war or any act of war other than terrorism, declared or undeclared, war or any act of war, declared or undeclared while serving in the military or an auxiliary unit attached to the military or working in an area of war, whether voluntarily or as required by an employer
- Participation in a riot, insurrection, or rebellion of any kind
- Military duty, including the reserves or national guard
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight, or as a passenger, pilot, or crew member in the group policyholder's aircraft while flying for the group policyholder's business, provided:
 - The aircraft has a valid U.S. airworthiness certificate or foreign equivalent
 - The pilot has a valid pilot's certificate with a nonstudent rating authorizing them to fly the aircraft
- Driving a vehicle while intoxicated, as defined by the jurisdiction where the accident occurred. For accidental death and dismemberment only, benefits aren't payable for any loss sustained or contracted in consequence of your being intoxicated or under the influence of any narcotic, operating a motor vehicle while intoxicated, as defined by the law of the state in which the accident occurred, if it is a felony
- Being incarcerated in any type of penal or detention facility, injury sustained while confined to jail, workhouse, or other corrections facility when it is due to an act of the facility and law enforcement is liable
- Under the influence of narcotics, unless prescribed and taken in accordance with the prescription by a physician
- Participating in, practicing for, or officiating any semi-professional or professional sport
- Riding in or driving in any motor driven vehicle for race, stunt show, or speed test
- An injury sustained while residing outside the U.S., U.S. territories, Canada, or Mexico for more than 12 months
- Bungee cord jumping, mountaineering, or base jumping
- Skydiving, parachuting, or jumping from any aircraft for recreational purposes



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This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

Some benefits have limits on the number of services provided or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information. This insurance product does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

THIS IS A LIMITED POLICY. Policy is conditionally renewable.

Group insurance products and services described herein are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is licensed to do so. In New York, insurance products are issued by the Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial® companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



What is it?

Critical illness insurance is a supplemental health product that may provide benefits if you or your covered dependent suffers a covered illness.

Why is this coverage valuable?

Unexpected expenses can add up after a critical illness. This coverage provides cash to pay health insurance deductibles, transportation, childcare, and anything else you and your family need while you receive treatment and recover.

Your critical illness coverage

Eligibility description	All Full-Time Employees
Contribution	You pay for the cost of your coverage.
Employee coverage amount	\$10,000 or \$20,000
Spouse coverage amount	\$5,000 or \$10,000 not to exceed 50% of employee benefit amount
Dependent children coverage	Your dependent children automatically receive 50% of your coverage amount at no extra cost.
Preexisting condition	Not applicable
Covered conditions	
Heart attack	100%
Arterial/vascular disease	25%
Stroke	100%
Major organ failure (heart, lung, liver, pancreas, or intestine)	100%
End state renal (kidney) failure	100%
Invasive cancer	100%
Noninvasive cancer (in situ)	25%
Skin cancer (other than melanoma)	\$1,000 per lifetime
Supplemental conditions	
Advanced Alzheimer's disease	100%
Advanced Parkinson's disease	100%
Benign brain tumor	100%
Loss of sight, hearing and/or speech	100%
Accidental injuries benefit	
Severe burns, permanent paralysis, or traumatic brain injuries (includes coma)	100%
Additional childhood conditions	
Cerebral palsy	100%
Cleft lip, cleft palate	100%
Cystic fibrosis	100%



Down syndrome	100%
Muscular dystrophy	100%
Spina bifida	100%
Type 1 diabetes	100%
Health assessment/wellness benefit	
You receive a cash benefit every year you and any covered family members complete a single covered exam or screening.	\$50
Additional plan benefits	
Health Advocate Services	Included
Portability	Included

Benefit exclusions

Like any insurance, your critical illness policy does have exclusions. The list below provides common exclusions but isn't meant to be exhaustive of all exclusions or limitations that may be part of your policy. See your policy for full details. The policy may not cover covered conditions or loss caused or contributed to by:

- Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit a felony, participation in a felony, or committing a felony
- War or any act of war, declared or undeclared
- Participation in a riot, insurrection, or rebellion of any kind, active participation in a riot, insurrection, or rebellion, voluntary participation in a riot, insurrection, or rebellion, or participation in a riot or insurrection
- A covered condition sustained while residing outside the U.S., U.S. territories, Canada, or Mexico for more than 12 months

Benefits won't be payable if the insured person is incarcerated in any type of penal or detention facility. A benefit for heart attack or sudden cardiac arrest isn't payable if the event occurs during a medical procedure. This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

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This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern. Benefits may vary by state, have limits on the number of services provided, or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information.

Some benefits have limits on the number of services provided or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information. This insurance product does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

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**IMPORTANT: This is a fixed indemnity policy,
NOT health insurance**

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- **Visit [HealthCare.gov](https://www.healthcare.gov) online** or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website ([naic.org](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

What is it?

Hospital indemnity insurance is a supplemental health product that may provide benefits if you or your covered dependent visit a hospital or intensive care unit (ICU) due to a covered illness or injury.

Why is this coverage valuable?

Unexpected expenses can add up after an accident. This coverage provides cash to pay health insurance deductibles, transportation, childcare, and anything else you and your family need while you receive treatment and recover.

Your hospital indemnity coverage

Eligibility description	All Full-Time Employees
Contribution	You pay the cost of your coverage.
Core hospital benefits	
Hospital admission: For the initial day of admission to a hospital for treatment of a sickness/an injury	\$1,000 per day for 1 day per calendar year
Hospital confinement: For each day of confinement in a hospital as a result of a sickness/an injury	\$200 per day for up to 30 days per calendar year, starting on day 2 of confinement
Hospital ICU admission: For the initial day of admission to an ICU for treatment as a result of a sickness/an injury	\$2,000 per day for 1 day per calendar year
Hospital ICU confinement: For each full or partial day of confinement in an ICU as a result of a sickness/an injury	\$400 per day for up to 30 days per calendar year, starting on day 2 of confinement
Confinement benefits	
Newborn care: For each day of confinement to a hospital for routine postnatal care following birth	\$100 per day for up to 2 days per calendar year
Health assessment/wellness benefit	
Receive a cash benefit every year you and any of your covered family members complete a single covered exam, screening, or immunization.	\$50
Enhanced benefits	
Hospital NICU admission: Increases the hospital ICU admission benefit for a newborn child's ICU or NICU admission by the percentage shown in the schedule of benefits	25%
Hospital NICU confinement: Increases the hospital ICU confinement benefit for a newborn child's ICU or NICU confinement by the percentage shown in the schedule of benefits	25%
Additional benefits	
Portability if you leave your employer	Included



Preexisting conditions

A preexisting condition includes any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.

Not applicable

Benefit exclusions

Like any insurance, this hospital indemnity policy does have exclusions. The list below provides some common exclusions but isn't meant to be exhaustive of all exclusions or limitations that may be part of your policy. See your policy for full details. The policy may not cover:

- Suicide, attempted suicide, or any intentionally self-inflicted injury, while sane or insane¹
- Voluntary intake or use by any means of any drugs, poison, gas, or fumes, except when:
 - Prescribed or administered by a physician
 - Taken in accordance with the physician's instructions
- Committing or attempting to commit a felony
- War or any act of war, declared or undeclared
- Participation in a riot, insurrection, or rebellion of any kind
- Participation in an act of terrorism
- Military duty, including the reserves or national guard
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight, or as a passenger, pilot, or crew member in the group policyholder's aircraft while flying for group policyholder business, provided:
 - The aircraft has a valid U.S. airworthiness certificate or foreign equivalent
 - The pilot has a valid pilot's certificate with a non-student rating authorizing them to fly the aircraft
- Driving a vehicle while intoxicated, as defined by the jurisdiction where the accident occurred
- Treatment for dental care or dental procedures, unless the treatment is the result of a covered event
- Treatment of a mental illness¹
- Treatment of alcoholism, drug addiction, chemical dependency, or complications thereof¹
- Treatment through experimental procedures
- Travel outside the United States and its possessions for the sole purpose of receiving medical care or treatment
- Participating in, practicing for, or officiating any semi-professional or professional sport
- Riding in or driving in any motor driven vehicle for race, stunt show, or speed test
- Being incarcerated in any type of penal or detention facility
- Scuba diving
- Mountaineering or spelunking
- Bungee cord jumping, hang gliding, sail gliding, parasailing, parakiting, kitesurfing, base jumping, or similar activities
- Skydiving, parachuting, jumping, or falling from any aircraft for recreational purposes
- Residing outside the United States, U.S. Territories, Canada, or Mexico for more than 12 months
- Injury arising out of or during employment for wage or profit

¹ Exceptions to the exclusions are accepted when substance abuse and mental disorder benefits are selected. This is a partial list of benefit exclusions. A complete list is included in the policy. State variations apply.



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This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern. Benefits may vary by state, have limits on the number of services provided, or limit the time frame in which the services must be rendered. See your certificate booklet or policy for more information.

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