

Hospital Indemnity Insurance





Why Hospital Indemnity Insurance matters

Hospital¹ stays can be pricey and often unexpected. Studies show that the average cost of a three-day hospital stay in the U.S. is \$30,000.² Even quality healthcare plans don't cover all expenses, so taking steps to help protect yourself can make a big difference.

While in the hospital, it's likely you'll need various treatments, tests and therapies to get up and about again. Expenses like plan deductibles, co-pays for doctor visits and extra costs for out-of-network care can add up fast. Having help with the financial support you may need when the time comes means less worry for you and your family.

In addition, unexpected hospital bills are especially difficult to manage when you lose your income or when your income becomes seriously reduced because of an injury or illness. Household expenses like your mortgage or rent payments, car payments, childcare payments, or household maintenance costs may become even harder to keep up with while you focus on recovering.

Help protect yourself, your family and your budget from the financial impact of a hospital stay.

How Hospital Indemnity Insurance can help.



I was driving to work when I was hit by a large truck. My car was totaled, I was injured, and an ambulance had to take me to the emergency room. I was admitted to the Intensive Care Unit and, after two days, moved to a standard room for five more days. I was then transferred for inpatient care at a rehab facility for a week. I was panicking about how I was going to pay my hospital, ambulance and other medical bills not covered by my health insurance. But luckily, my Hospital Indemnity Insurance helped pay for those costs, plus other expenses like rent and groceries.*

Hospital Indemnity Insurance

Coverage to help pay for expenses associated with hospitalizations that may not be covered under your medical plan.





Help complete your healthcare coverage with Hospital Indemnity Insurance.

Receive benefit payments directly to help prevent financial stress.

How this coverage works

Hospital Indemnity Insurance can help safeguard your finances by providing you with a lump-sum payment — one payment all at once — when you or your family may need it most. A flat amount is usually paid for a hospital admission³ and a per-day amount for your entire hospital stay.

And best of all, the payment is made directly to you and is in addition to any other insurance you may have. It's yours to spend however you like, including for your or your family's everyday living expenses.

Whatever you need while recovering from a hospital stay, Hospital Indemnity Insurance is there to help make life a little easier.

When it comes to hospital stays...

For less than the cost of your daily coffee,⁴ you can get coverage for you and your family.

Your benefits in action

If you are admitted to the hospital, submitting a claim doesn't have to be difficult. Here's what to expect:



Visit mybenefits.metlife.com or download the MetLife Mobile App to view your certificate of insurance and initiate your claim.



Answer a few simple questions about what happened and upload your medical documentation to support your claim. Once we have everything, claims are typically processed within 10 business days.⁵ You only need one claim form per hospital admission and every claim is reviewed by a claims professional.



Once your claim is approved, you'll receive a check made out to you to use however you like.

Supplement your healthcare coverage with MetLife Hospital Indemnity Insurance.

Benefit overview	Hospital Indemnity Insurance pays you benefits when you are confined to a hospital, whether for planned or unplanned reasons. ³
Why needed	This benefit may supplement both health insurance and disability insurance if a covered incident causes you to have expenses that your health insurance doesn't cover — or causes you to lose income due to being out of work.
Coverage choices	Choose from two plan options: • Low Plan • High Plan
Who is covered	Choose which plan best suits you: • Employee • Employee + 1 Dependent • Employee + 2 or more Dependents
Covered services	This plan provides benefits for hospitalization due to accidents and sicknesses, such as: • Admission to a hospital • Intensive care unit stays • Inpatient rehab unit stays • Inpatient rehab unit stays • Inpatient rehab unit stays • Admission to a hospital stays • Inpatient rehab unit stays
Cost of coverage	 Competitive group rates Costs will be based on your coverage option and who you're covering under your plan.
Guaranteed coverage	You and your family members are guaranteed ⁷ coverage as long as you are actively at work. There are no medical exams to take and no health questions to answer.
Additional value and services	Health Screening Benefits ⁸ Early detection of a serious illness is important to your recovery. We provide you with an extra \$75 annual benefit per calendar year on top of your total benefit amount when you see your physician for eligible health screenings or prevention measures.



Frequently Asked Questions

Q. I have a medical plan at work, so why do I need Hospital Indemnity Insurance?

A. Hospital stays can be pricey and are often unexpected. Even the best medical plans can leave you with extra expenses to pay or with services that just aren't covered such as plan deductibles, co-pays, extra costs for out-of-network care or non-covered services. Having this extra financial support when the time comes may mean less worry for you and your loved ones.

Q. Can I enroll for this insurance without having a medical exam?

A. Yes. Your coverage is guaranteed,⁷ regardless of your health. You just need to be actively at work. There are no medical exams to take and no health questions to answer, so the whole process might be easier than you first thought.

Q. How much will coverage cost and how do I pay for it?

A. Hospital Indemnity Insurance may cost less than you think. It's designed to be a way for you to supplement your healthcare plan. Exact rates can be found in the enrollment materials provided by your employer. You pay premiums through payroll deductions, so you don't have to worry about writing any checks or missing payments.

Q. When does my coverage begin?

- A. Your coverage starts on the effective date. There are no waiting periods for it to begin.
- Q. Are benefits paid directly to me or my healthcare provider?
- A. Payments go directly to you, not to the doctors, to the hospitals or to any other healthcare providers. And to make things even easier, the check is made payable to you. There's no need to coordinate with any other insurance you may have. Benefits are paid no matter what your other insurance plans may cover.
- Q. If my employment status changes, can I take my coverage with me?
- **A.** Yes. This coverage is portable, meaning you can take it with you wherever you go so long as you continue paying your premiums.⁹
- Q. Is the claims process simple?
- **A.** Yes. Once we've received all the necessary information, claims are generally processed within 10 business days. You only need one claim form per admission or hospital stay and every claim is reviewed by a professional.⁵

- 4. Why the price of your morning coffee could get more expensive. https://www.marketwatch.com/story/why-your-latte-costs-nearly-5-despite-plummeting-coffee-bean-prices-2019-04-26. Published July 2019.
- 5. Applies only to "clean" claims. A clean claim is a claim submitted with all the required information necessary to process the claim no missing information requiring additional follow up with the subscriber. It generally takes 10 business days to process "clean" claims.
- 6. Covered services/treatments must be the result of a covered accident or sickness as defined in the group policy/certificate. There is a pre-existing exclusion for covered sicknesses. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.
- 7. Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.
- 8. The Health Screening Benefit is not available in all states. There is a separate mammogram benefit for MT residents and for cases sitused in CA and MT.
- 9. Eligibility for portability through the Continuation of Insurance with Premium Payment provision may be subject to certain eligibility requirements and limitations. For more information, contact your MetLife representative.

METLIFE'S HOSPITAL INDEMNITY INSURANCE IS A LIMITED BENEFIT GROUP INSURANCE POLICY. The policy is not intended to be a substitute for medical coverage and certain states may require the insured to have medical coverage to enroll for the coverage. The policy or its provisions may vary or be unavailable in some states. Prior hospital confinement may be required to receive certain benefits. There may be a preexisting condition limitation for hospital sickness benefits. MetLife's Hospital Indemnity Insurance may be subject to benefit reductions that begin at age 65. Like most group accident and health insurance policies, policies offered by MetLife may contain certain exclusions, limitations and terms for keeping them in force. For complete details of coverage and availability, please refer to the group policy form GPNP12-AX, GPNP13-HI, GPNP16-HI or GPNP12-AX-PASG or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York, In certain states, availability of MetLife's Group Hospital Indemnity Insurance is pending regulatory approval. Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.



^{*} This is a hypothetical example for informational purposes only. Your costs and savings could vary based on your plan design, where you live and whether your plan requires a deductible or coinsurance. Please see your Plan Summary for details about your coverage.

^{1.} Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

^{2.} Why health insurance is important: protection from high medical costs. https://www.healthcare.gov/why-coverage-is-important/protection-from-high-medical-costs/. Accessed July 2020.

^{3.} The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your Certificate for details.