

HOSPITAL INDEMNITY INSURANCE



Keep Finances on Track

Hospital Indemnity Insurance



Medical insurance doesn't usually cover everything — which can derail your finances.

You can take action now to help prepare for the out-of-pocket expenses that come with a hospital stay:

Purchase Hospital Indemnity insurance from Standard Insurance Company (The Standard[‡]).

Hospital Indemnity insurance

- Helps with out-of-pocket costs from a hospital stay due to childbirth, illness or injury
- Pays you or a covered family member, not medical providers
- Can help with whatever expenses you decide — like deductibles, copays or other bills
- Can cover your children and spouse if you choose
- Waives your premiums if you're hospitalized more than 30 days

Insurance in Action

Pregnancy*

Brooke's pregnancy took an unexpected turn when doctors had to deliver her baby by C-section. Brooke needed extra time in the hospital to recover.

Brooke's **Hospital Indemnity insurance** benefit helped meet her deductible. And that helped protect her budget for diapers, clothing and other items for her new baby.

Brooke used her Hospital Indemnity plan benefit to help cover:

- **Hospital admission**
- **Three-day hospital stay**

A hospital stay shouldn't sidetrack your budget.

Contact your human resources representative to learn how to apply for Hospital Indemnity insurance.

* Examples are for illustrative purposes. Eligibility for benefits and amounts shown in this example may vary from any policy your employer may offer and may vary based upon your individual circumstances, policy definitions, waiting periods, exclusions and limitations.

Standard Insurance Company | 1100 SW Sixth Avenue, Portland, OR 97204 | [standard.com](https://www.standard.com)

‡ The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company. EE

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HOSPITAL INDEMNITY INSURANCE

Standard Insurance Company
District School Board of Pasco County
Group Policy #762048



Group Hospital Indemnity Insurance

Keep your finances on track when you're in the hospital.

1 You're admitted to the hospital.

Your health insurance covers many costs of your stay and treatment. But you still have a lot of expenses, including deductibles, copays, and other costs you couldn't predict.

2 We send you a check.

The Standard will send a check directly to you - not to your medical providers - upon approval of your claim. You decide how you spend the money.

3 You focus on recovering.

With The Standard helping you handle the costs of your hospital stay, you get to concentrate on what matters most - your health.

Here's what it does:

- **Pays you directly**, so you can choose how to spend the money
- **Pays you for what happens**, regardless of your other coverage
- **Goes with you** if you leave your employer
- **Provides coverage** without answering any medical questions
- Gives you the option to **cover your spouse and children**
- Provides the convenience of having your **premium payments deducted directly from your paycheck**

This coverage from Standard Insurance Company (The Standard) can help protect your finances and provides you peace of mind.

HOSPITAL INDEMNITY INSURANCE

Here's how it works:

Ruptured Ulcer: Kim is out of town on a business trip when she experiences abdominal pain and a racing heartbeat. Diagnosis: ruptured gastric ulcer. She is rushed to the hospital, admitted and taken into surgery. She ends up being hospitalized for 10 days, three of which are in a critical care unit. Kim's spouse leaves their two kids with their daycare provider and flies to be at her side. The family now faces additional costs for medical bills, travel, and childcare amounting to \$3,850.

Your Employer is giving you the following options to choose from. Here's what each plan would cover for this example:

Benefits Paid to You	Enhanced	Premier
Ambulance — Ground	\$100	\$300
Emergency room visit	\$100	\$100
Hospital admission	\$1,000	\$1,500
Hospital confinement (10 days)	\$1,500	\$2,000
Critical care unit admission	\$500	\$500
Critical care unit confinement (3 days)	\$300	\$300
Surgery	\$500	\$500
Healthcare provider follow-up	\$25	\$25
Total paid to you	\$4,025	\$5,225

Coverage for...	22 Ded Premium for Enhanced	24 Ded Premium for Enhanced	22 Ded Premium for Premier	24 Ded Premium for Premier
You	\$ 8.74	\$ 8.01	\$12.67	\$11.61
You and your spouse	\$14.64	\$13.42	\$21.28	\$19.51
You and your children	\$12.49	\$11.45	\$18.02	\$16.52
You, your spouse and your children	\$21.88	\$20.06	\$31.56	\$28.93

HOSPITAL INDEMNITY INSURANCE

Hospital Benefits	Enhanced	Premier
Hospital Admission ¹ (maximum 1 per calendar year)	\$1,000	\$1,500
Hospital Confinement ¹ (maximum 31 days per stay)	\$150 per day	\$200 per day
Critical Care Unit Admission ^{1,2} (maximum 1 per calendar year)	\$500	\$500
Daily Critical Care Unit Confinement ^{1,2} (maximum 31 days per stay)	\$100 per day	\$100 per day
Rehabilitation Facility (per year)	Not included	\$50 per day up to 15 days
Skilled Nursing Facility	\$50 per day up to 15 days per year	\$50 per day up to 30 days per year

¹ Defined as a stay for at least 20 consecutive hours in a hospital setting.

² Payable in addition to the Hospital Admission and/or Daily Hospital Confinement benefit you may be eligible to receive.

Patient Benefits	Enhanced	Premier
Inpatient Surgery	\$500/ 1 per calendar year	\$500/ 2 per calendar year
Inpatient Surgical Anesthesia	25% of the Inpatient Surgery Benefit	25% of the Inpatient Surgery Benefit
Healthcare Provider Follow-up	\$25/ 2 per year	\$25/ 4 per year
Major Diagnostic Exam	\$50/3 per year	\$50/4 per year
Hearing Device	\$1,000 per Lifetime	\$1,500 per Lifetime
X-ray / Lab (maximum 1 per year)	\$25	\$50

Emergency Care Benefits	Enhanced	Premier
Ambulance — Air (maximum 1 per year)	Not Included	\$500
Ambulance — Ground (maximum 1 per year)	\$100	\$300
Emergency Room Visit (maximum 1 per year)	\$100	\$100
Urgent Care Visit	\$50 (maximum 3 per calendar year)	\$50 (maximum 4 per calendar year)

Additional Benefits For Enhanced and Premier	
Waiver of Premium	Premium waived if you are confined to a hospital for more than 30 days
Health Maintenance Screening	\$50 for Enhanced and \$100 for Premier once per calendar year when visiting the doctor for a covered wellness screening

HOSPITAL INDEMNITY INSURANCE

Important Details

Here's where you'll find the details about Hospital Indemnity insurance.

Portability

This coverage is portable. That means that you may be able to continue your coverage through direct bill if your employment ends or your insurance ends because you no longer meet the eligibility requirements.

Eligibility Requirements

To be eligible for this coverage, you must be 18 years old or older, a regular employee of District School Board of Pasco County, actively working in the United States at least 20 hours per week and a citizen or resident of the United States. Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible.

You can choose to cover your spouse, 18 years old or older, a person to whom you are legally married, or your domestic partner as recognized by law or by your employer's domestic partnership policy, if applicable. You can also cover your children from birth through age 25. Your child cannot be insured by more than one employee. Your spouse or children must not be full-time member(s) of the armed forces. You cannot be insured as both an individual and a dependent.

A minimum number of eligible employees must apply and qualify for the proposed plan before Hospital Indemnity insurance coverage can become effective.

Your Effective Date

You must satisfy the eligibility requirements listed above, serve an eligibility waiting period, agree to pay premium, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance.

If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative or plan administrator for more information regarding the requirements that must be satisfied for your insurance to become effective.

Annual Open Enrollment

You may enroll for coverage for you and your dependents if you enroll within 31 days after becoming eligible. However, if you do not enroll during this period, you may do so during your employer's annual open enrollment period.

Waiver of Premium

Your insurance will continue without payment of premiums if you are confined in a hospital for more than 30 days in a row. We will waive payment of premium for your insurance from the 31st day of your confinement until the last day of the month you are in the hospital.

Exclusions

Benefits are not payable if an injury or sickness is caused or contributed to by any of the following:

- War or any act of war
- Attempted suicide or other intentionally self-inflicted injury, while sane or insane
- Committing or attempting to commit a felony or act of terrorism
- Active participation in a violent disorder or riot
- Alcoholism, drug abuse, misuse of alcohol or any other substance, the voluntary use or consumption of any drug or alcohol in excess of the legal limit in the state in which an injury occurred, or taking of drugs unless used or consumed according to the directions of a health care provider.
- Travel or flight in or on any aircraft, except as a fare-paying passenger on a commercial aircraft
- Cosmetic surgery or other procedure to improve appearance, unless it is necessary to correct a deformity or restore bodily function resulting from an injury or sickness
- Any injury or sickness which arises out of or in the course of you or your dependent being incarcerated in a jail, penal or correctional institution
- Dental care or dental procedures, unless treatment is the result of an injury
- Routine newborn nursing or well-baby care
- Hospital confinement of a newborn child following the child's birth unless the confinement is as a result of an injury or sickness
- Riding in or driving any automobile in a race, stunt show or speed test

When Insurance Ends

Your insurance ends if you notify your employer or policyholder to terminate your coverage, you stop making premium payments, your employment terminates, you cease meeting the member definition or the group policy terminates.

HOSPITAL INDEMNITY INSURANCE

Child and spouse insurance ends when your insurance ends, they cease to meet the definition of child or spouse, you stop making premium payments for child or spouse insurance, spouse or child insurance is no longer offered under the group policy or the group policy terminates.

Group Insurance Certificate

If coverage becomes effective and you become insured, you may receive a group insurance certificate containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. The information present in this summary does not modify the group policy, certificate or the insurance coverage in any way.

IMPORTANT NOTICE TO PERSONS ON MEDICARE: THIS IS NOT MEDICARE SUPPLEMENT INSURANCE

Some healthcare services paid for by Medicare may also trigger the payment of benefits from this policy.

This insurance pays a fixed dollar amount, regardless of your expenses, for each day you meet the policy conditions. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare Supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- Hospitalization
- Physician services
- Hospice
- Outpatient prescription drugs if you are enrolled in Medicare Part D
- Other approved items and services

This policy must pay benefits without regard to other health benefit coverage to which you may be entitled under Medicare or other insurance.

Before you buy this insurance:

- Check the coverage in all health insurance policies you already have.
- For more information about Medicare and Medicare Supplement insurance, review the Guide to Health Insurance for People with Medicare, available from Standard Insurance Company.
- For help in understanding your health insurance, contact your state insurance department or state health insurance assistance program (SHIP).

About Standard Insurance Company

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at

www.standard.com.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

This is a limited benefit policy.

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Standard Insurance Company
1100 SW Sixth Avenue
Portland OR 97204

www.standard.com

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HOSPITAL INDEMNITY INSURANCE

Supplemental Insurance

Health Maintenance Screening Benefit



Keep Wellness Top of Mind: Filing a Claim Online

Regular checkups are important to maintain your health. That's why we make filing a claim online for the Health Maintenance Screening Benefit¹, or the HMS Benefit, easy. You can even submit your claim while waiting in your physician's office. And you don't need additional forms to get started. The HMS Benefit is available with most of Standard Insurance Company's Supplemental insurance offerings. After submitting your claim, you can receive benefit payments once per calendar year when you or your covered loved ones complete one of the screenings listed below.

Available Screenings²

- Abdominal aortic aneurysm ultrasound
- Ankle Brachial Index, or ABI, screening for peripheral vascular disease
- Biopsies for cancer
- Bone density screening
- Breast ultrasound
- Cancer antigen 125, or CA 125, blood test for ovarian cancer
- Cancer antigen 15-3, or CA 15-3, for breast cancer
- Carcinoembryonic antigen, or CEA, blood test for colon cancer
- Colonoscopy
- Complete Blood Count, or CBC
- Comprehensive Metabolic Panel, or CMP
- Novel infectious disease testing, such as COVID-19
- Electrocardiogram, or EKG
- Hemocult stool analysis
- Hemoglobin A1C
- Human Papillomavirus, or HPV, vaccination
- Lipid panel
- Mammography
- Mental Health Assessment
- Pap smears or thin prep pap test
- Prostate specific, or PSA, test
- Stress test on a bicycle or treadmill

File an HMS Benefit Claim Online

1. Login and start a claim.

Access your online portal and enter screening information.

2. We review your claim.

We'll make a benefit decision within 48 hours of receipt.

3. Get benefits payments.

For approved claims, you get benefit payments just days after submitting.

[Start your HMS claim.](#)



You may also submit a claim via mail or fax. Request a claim packet from your HR team.

¹ HMS is not available in all states or on all products.

² Not all screenings are available in all states or on all products. Please reference your certificate.

HOSPITAL INDEMNITY INSURANCE



Frequently Asked Questions

Filing a Hospital Indemnity Insurance Claim

1 | When should I file a claim?

File a claim when you or someone listed on your policy is hospitalized due to a covered injury or sickness. Claims should be submitted within 90 days of the hospitalization if possible, but no later than one year.

Hospital Indemnity insurance from Standard Insurance Company covers hospitalization due to childbirth, injury or illness — including COVID-19 and mental health. To see the list of benefits your policy offers, ask your benefits administrator for your Group Certificate of Insurance.

2 | What information will I need to provide?

Besides your name and Social Security number, you'll need to provide:

- Employer name
- Group policy number
- Information about your hospitalization, including the name and address of the hospital and admittance and discharge dates
- Physician's contact information (name, address, phone and fax number)

3 | What's in a typical claim form for Hospital Indemnity Benefits?

It usually contains the following documents to complete, sign and date:

- An Employee's Statement, which may include supporting documentation
- For an accident-related injury requiring hospitalization, documentation that provides diagnosis and treatment received
- For hospitalization due to an illness, an Attending Physician Statement
- An Authorization to Obtain and Release Information

We may also request medical records from your physician. If you have questions, we'll review your claim and provide you with what documents are required, or request records on your behalf.

4 | How long does it take to make a decision about my claim?

Once we receive the required completed, signed and dated documents listed on this page, it will take approximately five business days to make a claim decision. If we haven't made a decision within five business days, we'll notify you with additional details.

5 | Who should I call with questions about my claim?

If you've already filed a claim, please call The Standard's Customer Service toll-free number 800.634.1743. Our Customer Service Center representatives are here to assist you Monday through Friday at one of the time zones below:

- 6 a.m. through 5 p.m., **Pacific**
- 8 a.m. through 7 p.m., **Central**
- 7 a.m. through 6 p.m., **Mountain**
- 9 a.m. through 8 p.m., **Eastern**

6 | How can I spend my money?

You can use the money for medical costs like copays and deductibles. You can also put it toward everyday living expenses such as child care, groceries and rent or mortgage payments.

7 | What if I want to know more about my coverage?

If you're looking for general information about your coverage or would like a copy of your Group Certificate of Insurance, contact your benefits administrator.

The Standard is not responsible for providing proof of claim. Hospital Indemnity insurance is not available in all states.

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