



IN-HOSPITAL DOCTOR VISITS



SURGERY



IN-HOSPITAL STAY

# **The Major Medical Complement 2**

Group Supplemental Medical Expense Insurance

Our coverage can help by reimbursing out-of-pocket medical expenses for deductible, coinsurance and copayment amounts required to be paid under your medical plan.

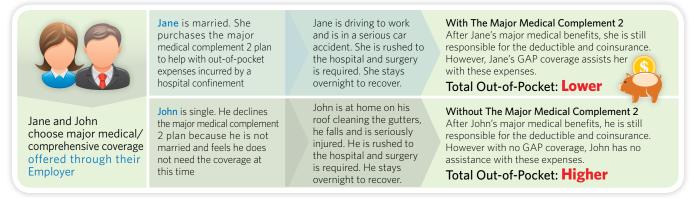
The Major Medical Complement 2 from Allstate Benefits can help cover some of the costs associated with treatment of a sickness or injury if hospital confined for you, your covered spouse, or child(ren).



## the major medical complement 2

Gaps in health insurance coverage may be caused by medical circumstances that are beyond your control and can wreak havoc on your finances. High deductible and coinsurance payments can lead to out-of-pocket expenses that you are not prepared to pay. These expenses can be covered through the purchase of a GAP product, which can help alleviate some of the costs associated with major medical coinsurance and deductible. That's where The Major Medical Complement 2, supplemental medical expense insurance coverage, can help.

Hospital confinement (inpatient) benefits are essential during a hospital stay. Below is an example of how benefits might be paid.<sup>†</sup>



†The example shown may vary from the plan your employer offers. Your individual experience may also vary.

### meeting your needs

This coverage helps meet the needs of you, your spouse and your children. We know you will agree what we offer will help provide peace of mind for a secure future.

- Affordable plan designs
- Reduces out-of-pocket expenses that are applied to a deductible, coinsurance or non-office visit copayment
- Guaranteed Issue with no medical tests required\*
- Employee, Employee and Spouse, Employee and Child(ren), or Family coverage
- Hospital Confinement benefits for:
  - Inpatient hospital stays
  - Inpatient surgery
  - In-hospital physician charges
  - Emergency-Room treatment\*\*

\*Enrollment in group coverage is based on the employer-determined major medical open enrollment period. To be eligible, you must be covered under your employer's group Major Medical/Comprehensive plan that includes deductible and coinsurance. \*\*If treatment is due to sickness, the benefit is payable only if a hospital confinement is required within 24 hours of hospital emergency-room treatment.

### your benefit coverage

Benefits are paid for covered out-of-pocket expenses for deductible, coinsurance or non-office visit copayment you or your covered dependent incurs for a hospital confinement due to injury or sickness.

### HOW TO GET STARTED

- 1. Review the benefits offered through your employer and the example of how benefits are paid. Your employer has chosen a benefit amount that will be provided to you and each covered family member.
- 2. Select coverage for you, you and your spouse, you and your child(ren), or your entire family.

Hospital Confinement Benefit (HCB) - Pays a benefit when you or a covered dependent are confined in a hospital and incur covered out-of-pocket expenses after your effective date. The benefit amount cannot exceed the out-of-pocket responsibility under the major medical/ comprehensive policy.

Benefits are limited to the deductible, coinsurance and non-office visit copayment amount you or each covered dependent is required to pay under the major medical/comprehensive policy, and include:

- Inpatient hospital stays
- Inpatient surgeries
- Physician's hospital charges
- Newborn routine care (only newborn charges if covered by major medical)
- Durable medical equipment

Benefits will also be paid for hospital emergency-room treatment if you or a covered dependent incurs an injury or sickness. The injury or sickness must result in a hospital confinement within 24 hours of the hospital emergency-room treatment.





You are hospital confined because the doctor determined you need surgery and you have an out-of-pocket expense that was applied to a deductible, coinsurance or copayment



### DEFINITIONS

To help with terminology, we have provided a brief listing of definitions.

Hospital - Means an institution that meets all the following requirements: it must be operated according to law; it must give 24-hour medical care, diagnosis and treatment to the sick or injured on an inpatient basis; it must provide diagnostic and surgical facilities supervised by Physicians; Registered Nurses must be on 24-hour call or duty; and the care must be given either on the Hospital's premises or in facilities available to the Hospital on a pre-arranged basis.

Hospital does not mean a convalescent, nursing, rest or extended care facility or a facility operated exclusively for treatment of the aged, drug addict or alcoholic, even though such facility is operated as a separate institution by a Hospital.

Hospital Confinement - Means the insured person is admitted to the facility as an overnight bed patient or under observation care for a minimum of 15 consecutive hours.

Insured Person - Means either an Insured or Dependent.

**Injury -** Means bodily Injury sustained by an Insured Person that occurs while the Policy is in force. All Injuries sustained by an Insured Person in any one Accident are considered a single Injury.

Major Medical/Comprehensive Policy ("Medical Plan") - Means any one of the following types of policies or plans which provide benefits for hospital confinement for an insured person on his or her effective date of coverage, and such policy or plan requires the insured person to pay a deductible and/or portion of coinsurance: group or blanket insurance plans; group Blue Cross, Blue Shield or other group prepayment coverage plans; coverage under labormanagement trusteed plans; union welfare plans; employer organizational plans; employee benefit organizational plans; or other arrangements of benefits for persons of a group. "Major Medical/ Comprehensive Policy" does not include limited medical plans, Medicare, Medicaid, Champus or Tricare.

Sickness - Means a disease or illness, or more than one disease or illness, resulting from the same or related causes or conditions, including all complications thereof and all related conditions and recurrences resulting in medical expenses insured under the Policy or otherwise resulting in a claim for benefits while the Policy is in force with respect to the Insured Person for whom the claim is made. Sickness includes Pregnancy and Complications of Pregnancy.

### POLICY SPECIFICATIONS

Eligibility - All active full-time employees working at least 20 hours or more per week and engaged in an eligible occupation and their spouse, and their dependent children who are under 26 years of age. Dependent eligibility may vary by state.

Additionally, in order to be eligible, each person must be covered under the employer's Major Medical/Comprehensive Medical plan that includes coinsurance and deductible.

Late Enrollees - If an eligible employee does not apply for coverage on their initial eligibility date, they may not apply for coverage until the next policy anniversary date, unless: (a) they are allowed to enroll in, or change their enrollment in the employer's Major Medical/ Comprehensive policy because they qualify as a Special Enrollee as defined by law; or (b) they are allowed to enroll in the employer's Major Medical/ Comprehensive policy during an employer-sponsored period of open enrollment.

Claims Process - You or a covered dependent obtains service under your major medical or comprehensive insurance plan and receive an Explanation of Benefits (EOB) for the out-of-pocket expenses incurred. You or a covered dependent must complete a claim form, provide the itemized bill and EOB to the administrator of The Major Medical Complement 2 plan. The administrator of the plan will pay the claim based on the benefits available under The Major Medical Complement 2 plan.

Out-of-Country Care - If an employee or covered dependent is hospitalized or requires a physician's office visit while out of the United States, benefits will be paid under The Major Medical Complement 2 plan. Benefits must not be excluded under the major medical or comprehensive insurance coverage, and an explanation of the benefits under the major medical or comprehensive insurance coverage must be available. Termination of Coverage - Coverage terminates on the earliest date of any of the following events: For any insured person: (a) on the date the policy is terminated; (b) as of the date when the required premium remains unpaid, subject to the grace period; (c) on the premium due date following the date the insured ceases to be an employee of the policyholder; or (d) on the premium due date following the date the insured ceases to be an employee of the policyholder; or (d) on the premium due date following the date the insured's coverage under a group Major Medical/Comprehensive policy is no longer in effect (e) the date the insured submits a fraudulent claim. For an insured dependent: on the premium due date following the date the insured's coverage terminates; the date the required premiums remains unpaid, subject to the grace period; the date the dependent submits a fraudulent claim; the date the dependent's coverage under the medical plan terminates; the date the policy is modified to exclude dependent coverage.

Exclusions - The Policy does not provide any benefits for the following: (a) any Expenses Incurred during any period the Insured Person does not have coverage under a Medical Plan; (b) any expenses which are not Medically Necessary; (c) war, declared or undeclared; (d) suicide or any attempt thereat, while sane or insane (in Colorado or Missouri, while sane); (e) any intentionally self-inflicted Injury or Sickness, while sane or insane (in Colorado, Missouri or Montana, while sane); (f) any loss while the Insured Person is in the service of the Armed Forces of any country. Orders to active military service for training purposes of two months or less will not constitute service in the Armed Forces. Upon notice to the Company of entering the Armed Forces, the Company will return to the Insured Person pro rata any premium paid, less any benefits paid, for any period during which the Insured Person is in such service; (g) any expense for which there is no legal obligation to pay, no charge is made or in the absence of coverage, no charge would be made; (h) drugs or medicines, except medicines prescribed and taken while Hospital Confined; (i) dental or vision services unless: (1) resulting from an Injury occurring while the Insured Person's coverage under the Policy is in force; or (2) due to congenital disease or anomaly of a Dependent newborn child; (j) mental illness or functional or organic nervous disorders, regardless of the cause; (k) treatment of alcoholism, drug addiction or complications thereof; (I) any Injury that occurs while an Insured Person has been determined to be intoxicated: (1) by judicial or administrative judgment or order; (2) by evidence of an alcohol concentration in the Insured Person's blood, breath or urine which equals or exceeds the limits set by applicable motor vehicle laws; or (3) by other evidence demonstrating the Insured Person was under the influence of any alcohol, narcotic, barbiturate or hallucinatory drug, unless the same was administered on the advice of a Physician and was taken according to the prescribed dosage; and the use of such substance was a proximate cause of the Injury; (m) any treatment, services or supplies for Wellness Services. For this exclusion, "Wellness Services" means treatment, services or supplies provided for routine health care, including, but not limited to, routine health or check-up examinations, routine well-child visits, mammograms and other charges incurred during the course of a routine physical examination or checkup; (n) Injury or Sickness for which compensation is payable under any Workers' Compensation

Law, any Occupational Disease Law or similar legislation, or if the Policyholder opts out of such requirements, any similar coverage purchased or self-funded by the Policyholder to cover work-related Injuries or Sicknesses; (o) any loss for which the Insured Person is not required to pay a Deductible, Copayment and/or Coinsurance under the Insured Person's Medical Plan; (p) any expense for which benefits are excluded under the Insured Person's Medical Plan; or (q) an Insured Person engaging in any act or occupation which is a violation of the law of the jurisdiction where the loss or cause of loss occurred. A violation of law includes both misdemeanor and felony violations.

**Note:** The Major Medical Complement 2 is not available in all states. Some provisions, benefits and limitations or exclusions listed herein may vary by state. Contact your Allstate Benefits representative for a current list of available states for the Major Medical Complement 2.

Limitations - Medical Plan. If an Insured Person did not have a Medical Plan on the Insured Person's Effective Date under the Policy, the Company's sole obligation will then be to refund all premiums paid for that Insured Person.

**Pre-Existing Condition Limitation.** This product does not have a Pre-Existing Condition Limitation; however, a condition must be covered under the insured's Major Medical/Comprehensive Medical plan in order for benefits to be payable under this plan. Therefore, any Pre-Existing Condition Limitation applied to the Major Medical/ Comprehensive Medical plan would, in effect, limit coverage under this plan.



## Now Is The Time...

### Prepare for the unexpected

If you require a hospital stay for an injury or sickness, it may result in money coming out of your own pocket. Your medical coverage will only cover so much. Are you prepared? Don't wait for a sign to start thinking about the future. You can rely on our Major Medical Complement Insurance to help you prepare for those unexpected out-of-pocket expenses.

### **Budget friendly**

Sometimes, receiving proper health care is difficult if money is tight. That's where we can help. Your employer has worked with us to create a supplemental benefit package that can fit your needs and work with your budget.



If you are hospital confined, would you be able to handle the extra expenses associated with your confinement?

## It's never too early to prepare for the future.

This product is underwritten by Fidelity Security Life Insurance Company, Kansas City, Missouri.

#### Managed by: Special Insurance Services

### Special Insurance Services, Inc.

This brochure contains a brief description of the plans of insurance offered to qualified employers. The exact provisions governing the insurance are contained in the master policy issued to each group on form number M-9134, policy series MG-131. Some provisions, benefits, exclusions or limitations listed herein may vary depending on your state of residence. This product is not available in all states. State variations may apply.

This brochure is for use in enrollments which are sitused in: AL, AK, AR, CO, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MI, MS, MO, NE, NV, ND, OH, OK, OR, PA, SC, SD, TN, TX, VA, WV, WI, WY



#### Marketed and Administered by:

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