### AFLAC SUPPLEMENTAL PLANS

# **ACCIDENT INSURANCE**

Accident insurance pairs well with those who have active lifestyles or children involved in sports/other extracurricular activities. This plan is designed to pay benefits directly to you based on treatment received and injuries sustained from a covered accident.

Benefit and Amount				Provisions		
	LOW PLAN	HIGH PLAN		LOW PLAN	HIGH PLAN	
Urgent Care	\$100	\$200	X-Ray	\$25	\$50	On / Off the job Over 20 additional
Follow Up	\$100 (2)	\$200 (2)	Lacerations	up to \$400	up to \$800	
Physical Therapy	\$50 (10)	\$100 (10)	Concussion	\$300	\$600	<ul><li>benefits</li><li>No limit on the number of</li></ul>
Fractures	up to \$6,000	up to \$10,000	Hospital Admission	\$800	\$1,600	accidents
Dislocations	up to \$6,000	up to \$10,000	Hospital Confinement	\$200 (16 days)	\$400 (16 days)	

*Fracture Schedule			*Dislocation Schedule		
	LOW PLAN	HIGH PLAN		LOW PLAN	HIGH PLAN
Foot/Ankle/Kneecap/ Sacral/Sacrum/ Vertebral Processes	\$500	\$750	Finger/Toe	\$240	\$400
Coccyx/Rib/Finger/ Toe/Forearm/Hand /Wrist/Lower Jaw/ Shoulder Blade/Collar Bone		\$1,000	Elbow	\$600	\$1,000
	\$500		Wrist	\$750	\$1,250
			Lower Jaw	\$900	\$1,500
			Hand	\$1,050	\$1,750
Facial Bones (except Teeth)/Upper Arm/ \$750 Upper Jaw		Foot/Ankle	\$1,200	\$2,000	
	\$750	\$2,000	Shoulder	\$1,500	\$2,500
Leg/Pelvis/ Vertebrae	\$1,500	\$2,000	Knee	\$1,950	\$3,250
Skull (simple)	\$1,500	\$2,500	Hip	\$3,000	\$5,000
Sternum	\$1,500	\$1,000			
Hip/Thigh/Skull (depressed)	\$3,000	\$5,000			

<sup>\*</sup>Open reduction fractures/dislocations will pay at 200% of the listed amount

Health Screening Benefit - Low Plan & High Plan

\$50 Payable once per person per calendar year



#### AFLAC SUPPLEMENTAL PLANS

## **CANCER INSURANCE**

Cancer insurance provides essential financial support during one of life's most challenging times. It provides a lump sum directly to you, helping to cover treatment costs, medications, and other expenses that your primary insurance may not cover.

Choose a Benefit Amount	Covered Illnesses	Provisions
\$10,000 \$20,000 \$30,000 Spouse coverage at 100% Child(ren) coverage at 50% No additional premium	Cancer (Internal or Invasive) 100% Non-Invasive Cancer 25% Skin Cancer \$500 - Once per calendar year	Guarantee Issue     No Pre-existing Condition     Waiting period     Different Illness Diagnosis:     0-month separation     Same Illness Diagnosis:     3-month separation     Portable at same rate     No maximum number of pay outs

#### **Health Screening Benefit**

\$50 Payable once per person per calendar year

Spouse rate based on employee age.

Eligible child(ren) are automatically covered to the age of 26 with no premium charged.

# CRITICAL ILLNESS INSURANCE

When a major illness is diagnosed, there can be several expenses that aren't covered by major medical insurance. Critical Illness insurance pays a lump sum benefit when a covered illness is diagnosed. This benefit would be paid directly to you to help cover out of pocket expenses.

Choose a Benefit Amount	Covered Illnesses	Provisions
\$10,000 \$20,000 \$30,000 Spouse coverage at 100% Child(ren) coverage at 100% No additional premium	Cancer (Internal or Invasive) 100% Non-Invasive Cancer 25% Skin Cancer \$500 - Once per calendar year Heart Attack Stroke Major Organ Transplant End Stage Renal Failure	Guarantee Issue     No Pre-existing Condition     Waiting period     Different Illness Diagnosis:     3-month separation     Same Illness Diagnosis:     3-month separation     Portable at same rate     No maximum number of pay outs

#### **Health Screening Benefit**

\$50 Payable once per person per calendar year

Spouse rate based on employee age.

Eligible child(ren) are automatically covered to the age of 26 with no premium charged.



#### AFLAC SUPPLEMENTAL PLANS

# HOSPITAL INDEMNITY PLAN

The cost of a hospital stay can be financially difficult if money is tight, and you're not prepared. Having the right coverage in place before you experience an unexpected sickness, or injury can help eliminate the stress of financial concerns and provide support when needed most.

Benefit Name	Amount			
Initial Hospital Confinement (24 hrs.)	\$1,500 (once per sickness or accident per calendar year)			
Daily Hospital Confinement	\$225 (up to 15 days)			
ICU Initial Confinement (daily) (pays in addition to initial confinement)	\$1,500 (up to 15 days)			
ICU Daily Confinement (pays in addition to daily confinement)	\$225 (up to 15 days)			
Provisions				
Guarantee Issue?	Yes!			
Pre-existing Condition Waiting Period?	No!			
Pre-existing pregnancy covered?	Yes!			
Mental and Nervous Disorders covered?	Yes!			
Drug and Alcohol Addiction covered?	Yes!			
Portable?	Yes!			
Health Screening Benefit	\$50 Payable once per person per calendar year			

# PERMANENT LIFE INSURANCE (only available during open enrollment)

Life Insurance	Chronic Care Rider	Provisions
	Licensed or Non-Licensed	Guarantee Issue without any medical questions
Employee Guaranteed Issue up to \$150,000  Spouse Guaranteed Issue up to \$50,000  Child Guaranteed Issue up to \$25,000	Benefit Trigger 2 of 6 Activities of Daily Living - Bathing - Dressing - Toileting - Transferring - Feeding - Continence  90-Day Elimination Period	Rates based on employee age, spouse age, and tobacco status  Waiver of Premium  If continuously disabled for 3 months, premiums are waived for up to 24 months without reducing the payable
Permanent Rate and Benefit to age 120	4% of Life Insurance Volume payable for 25 months Or 50% one-time lump sum  Restoration Rider	Terminal Illness Benefit Less than 12-month life expectancy Up to 50% of life benefit is payable
	Restores the benefit amount reduced by payments for a Chronic Condition	Portable at the same rate even if you change jobs or retire

For enrollment in this plan, please schedule an appointment with a benefits counselor www.myenrollmentschedule.com/fortbend.

