

The coverage you didn't know you needed

Supplemental Health insurance plans help you stay in control, no matter what life throws at you.

Life is full of surprises. But by signing up for Cigna HealthcareSM Hospital Care insurance, you can supplement your health plan. It can provide you and your family with the coverage and additional financial protection you may need for expenses associated with an unplanned covered hospitalization. And it can help you recover physically, emotionally and financially – so you can regain control, and remain in control.

Here's how it works

- **Get a cash benefit paid directly to you.**¹ No copays, deductibles, coinsurance or network requirements.
- **Use the money however you want.** Pay for costs, such as medical copays and deductibles, travel to see a specialist, child care, help around the house, alternative treatments and more. It's up to you.
- **Receive cost-effective coverage.** By signing up through your employer, you get coverage at a low group rate. Coverage is guaranteed-issue, regardless of medical history.
- **Get it and forget it.** Your premium can be easily deducted from your paycheck. Plus, through the Cigna Simple File[®] feature, Auto compare² carefully reviews Cigna Healthcare medical claims and automatically reminds you to submit your eligible Supplemental Health insurance claims.
- **Take it with you.** You may be able to take your coverage with you if you leave your employer; benefits won't change if you port your coverage.³

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** 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**) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.



Personalized recovery support you can count on

In addition to extra financial protection, Cigna Healthcare Hospital Care insurance delivers:

- **Assistance to help you recover physically.**⁴ Tools and resources to find the right care at the right cost – plus discounts on recovery services.
- **Additional services to help you recover emotionally.**⁴ Free expert legal and financial counseling, including money coaching.

See the value

Even with medical coverage, you may still have out-of-pocket medical costs, such as copays and coinsurance, as well as indirect living expenses.



Hospital ⁶ Care	Plan 1	Plan 2
• Hospital admission	\$500	\$1,000
• Hospital stay (3 days)	\$300	\$600
• Hospital Intensive Care Unit (ICU) stay (1 day)	\$200	\$400
• Hospital ICU Admission	\$500	\$1,000
Hospital Care benefit paid:	\$1,500	\$3,000

To easily file your claim online:

1. Log in to **myCigna.com**⁷.
2. Under the “Coverage” tab at the top of the page, select “Supplemental Health.”
3. Scroll to the bottom of the page and click “Submit a claim.”
4. Complete the online claim form.

myCigna^{®7} also allows you to:

- Enroll in direct deposit
- View personalized Supplemental Health plan information
- Track the status of claims
- Monitor and respond to correspondence
- View Explanations of Benefits (EOBs)

What's not covered

The following is general information about the exclusions and limitations that may apply to the benefits described. This is not a complete list of policy terms and conditions. Your actual policy may vary by plan design and location. See your plan documents for more information, including state-mandated benefits.

Depending on your plan, benefits may not be paid for an illness or injury that existed prior to the effective date of coverage. Age-based reduction of benefits and benefit waiting periods may also apply.

Hospital Care Indemnity:

- **Hospital admission:** Benefits are payable once per day, limited to one day per admission and one benefit every 180 days. Covered person must be admitted as an inpatient to the hospital. Excludes treatment in an emergency room or provided on an outpatient basis, or for re-admission for the same covered injury or illness (including chronic conditions).
- **Hospital intensive care unit (ICU) stay and hospital stay:** Benefits are payable once per day, limited to 30 days and one benefit every 180 days. Stays within 90 days for the same/related injury or illness are considered one stay. Covered person must be admitted as an inpatient and confined to the hospital. If eligible for both benefits, only one benefit will be paid per day, whichever is greater.

Benefits may not be paid for any loss that is the result of: Intentionally self-inflicted injury, suicide or any attempt thereof while sane or insane; Commission or attempt to commit a felony or an assault; Declared or undeclared war or act of war; Active duty service in the military, naval or air force of any country or international organization (Reserve or National Guard active duty training extending beyond 31 days); Voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless taken as prescribed by a physician; Operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant; Services deemed by the insurer as not being medically necessary; Elective or cosmetic surgery; Dental surgery, unless due to accidental injury; or Services or treatment rendered by a person employed or retained by the covered person, providing homeopathic, aromatherapeutic or herbal therapeutic services, living in covered person's household, or who is a parent, sibling, spouse or child of the covered person.



1. Benefits may be paid directly to anyone you designate, such as a hospital, upon assignment.
2. The Simple File process is based on a one-time assessment of the initial claim documentation for the primary claim. Any subsequent events would not be identified and the customer will need to submit a claim for any supplemental health benefits.
3. Under most plans, coverage is portable and ends at age 100. Review your plan documents for details.
4. **These programs are NOT insurance and do not provide reimbursement for financial losses.** Some restrictions may apply. Programs are provided through third-party vendors that are solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location, and programs are not available where prohibited by law.
5. These are examples used for illustrative purposes only. Actual costs would vary. Actual coverage and benefit amounts will vary by policy design. Age-based reduction of benefits and benefit waiting periods may apply. Coverage is subject to all terms and conditions as specified in the group policy.
6. The term "Hospital" does not include a clinic, facility, or unit of a Hospital for: (1) rehabilitation, convalescent, custodial, educational, hospice, or skilled nursing care; (2) the aged, drug or alcohol addiction; or (3) a facility primarily or solely providing psychiatric services to mentally ill patients. The term Hospital also does not include a unit of a Hospital for rehabilitation, convalescent, custodial, educational, hospice, or skilled nursing care. Please refer to your plan documents as the actual definition of "Hospital" may vary by policy.
7. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com. The myCigna mobile app does not have the same functionality/capability that is available on myCigna.com. App/online store terms and mobile phone carrier/data charges apply.

Not approved for use in NM, NV, OR.

THESE POLICIES PAY LIMITED BENEFITS ONLY. THEY ARE NOT COMPREHENSIVE HEALTH INSURANCE COVERAGE AND DO NOT COVER ALL MEDICAL EXPENSES. THIS COVERAGE DOES NOT SATISFY THE "MINIMUM ESSENTIAL COVERAGE" OR INDIVIDUAL MANDATE REQUIREMENTS OF THE AFFORDABLE CARE ACT (ACA). THIS COVERAGE IS NOT MEDICAID OR MEDICARE SUPPLEMENT INSURANCE.

Product availability may vary by location and plan type and is subject to change. All group insurance policies and group benefit plans may contain exclusions, limitations, reduction of benefits and terms under which the policy may be continued in force or discontinued. Benefit waiting periods may apply. For costs and complete details of coverage, contact your Cigna Healthcare representative. Hospital Care plans or insurance policies are distributed exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company (Bloomfield, CT). The Cigna Healthcare names, logos and marks are owned by Cigna Intellectual Property, Inc.

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