COMMUNITY HEALTH PLAN OF WASHINGTON

Group Hospital Insurance



How does it work?

Group Hospital Insurance helps covered employees and their families cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness or childbirth.

Why is this coverage so valuable?

- The money is payable directly to you — not to a hospital or care provider. The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles.
- You get competitive rates when you buy this coverage at work.
- The cost is conveniently deducted from your paycheck.
- The benefits in this plan are compatible with a Health Savings Account (HSA).

Group Hospital Insurance can pay benefits that help you with the costs of a covered hospital visit.

Who can get coverage?

You:	If you're actively at work.
Your spouse:	Can get coverage as long as you have purchased coverage for yourself.
Your children:	Dependent children newborn until their 26th birthday, regardless of marital or student status

Employee must purchase coverage for themselves in order to purchase spouse or child coverage. Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage.

How much does it cost?

Your monthly premium	
You	$17.10
You and your spouse	$31.63
You and your children	$24.52
Family	$39.05

Coverage may vary by state. See exclusions and limitations.
This plan has a childbirth limitation. See disclosures for more information.
If enrolling, and eligible for Medicare (age 65+; or disabled) the Guide to Health Insurance for People with Medicare is available at https://www.medicare.gov/publications/02110-choosing-a-medigap-policy-a-guide-to-health-insurance-for-people-with-medicare.pdf.

Hospital		
Hospital Admission	Payable for a maximum of 1 day per year	$1,000
ICU Admission (added to Admission)	Payable for a maximum of 1 day per year	$1,000
Hospital Daily Stay	Payable per day up to 365 days	$100
ICU Daily Stay (added to Daily Stay)	Payable per day up to 30 days	$100
Short Stay	Payable for a maximum of 1 day per year	$250

Additional Inpatient Care		
Mental/Nervous or Substance Abuse Treatment	Payable for maximum of 1 day per insured per calendar year	$250

Other Benefits		
Well Child Benefit	Payable for maximum of 4 days per child before child reaches age 1	$50

Exclusions and Limitations

*Hospital insurance filed policy name is Group Hospital Indemnity Insurance Policy.
The definition of hospital does not include certain facilities. See your contract for details.

Active employment
You are considered in active employment if, on the day you apply for coverage, you are being paid regularly for the minimum number of hours required by your employer each week and you are performing the material and substantial duties of your regular occupation. Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective. New employees may have a waiting period to be eligible for coverage. Please contact your plan administrator to confirm your eligibility date.

Childbirth Limitation
We will not pay benefits due to Childbirth for any Insured within the first nine months after the Insured's Coverage Effective Date.
Childbirth or Complications of Pregnancy will be covered to the same extent as any other Covered Sickness.

Exclusions and limitations
Unum will not pay benefits for a claim that is caused by, contributed to by, or resulting from any of the following:
• Committing or attempting to commit a felony;
• Being engaged in an illegal occupation or activity;
• Injuring oneself intentionally or attempting or committing suicide, whether sane or not;
• Active participation in a riot, insurrection, or terrorist activity. This does not include civil commotion or disorder, Injury as an innocent bystander, or Injury for self-defense;
• Participating in war or any act of war, whether declared or undeclared;
• Combat or training for combat while serving in the armed forces of any nation or authority, including the National Guard, or similar government organizations;
• A Covered Loss that occurs while an Insured is legally incarcerated in a penal or correctional institution;
• Elective procedures, cosmetic surgery, or reconstructive surgery unless it is a result of organ donation, trauma, infection, or other diseases;
• Treatment for dental care or dental procedures, unless treatment is the result of a Covered Accident;
• Any Admission or Daily Stay of a newborn Child immediately following Childbirth unless the newborn is Injured or Sick; and
• Mental or Nervous Disorders. This exclusion does not include dementia if it is a result of:
• Stroke, Alzheimer's disease, trauma, viral infection; or
• Other conditions which are not usually treated by a mental health provider or other qualified provider using psychotherapy, psychotropic drugs, or other similar methods of treatment.
Additionally, no benefits will be paid for a Covered Loss that occurs prior to the Coverage Effective Date.

End of employee coverage
If you choose to cancel your coverage under this certificate, your coverage will end on the first of the month following the date you provide notification to your Employer.
Otherwise, your coverage under this certificate ends on the earliest of:
• the date the Policy is cancelled by us or your Employer;
• the date you are no longer in an Eligible Group;
• the date your Eligible Group is no longer covered;
• the date of your death;
• the last day of the period any required premium contributions are made; or
• the last day you are in Active Employment.
However, as long as premium is paid as required, coverage will continue:
• in accordance with the Continuation of your Coverage During Absences provision; or .

We will provide coverage for a Payable Claim that occurs while you are covered under this certificate.

THIS INSURANCE PROVIDES LIMITED BENEFITS
This coverage is a supplement to health insurance. It is not a substitute for essential health benefits or minimum essential coverage as defined in federal law. Insureds in some states must be covered by comprehensive health insurance before applying for hospital insurance.
This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form GHIP16-1 and Certificate Form GHIC16-1 or contact your Unum representative.
Unum complies with applicable civil union and domestic partner laws.

Underwritten by: Unum Insurance Company, Portland, Maine
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HOSPITAL INDEMNITY ONLY COVERAGE
WASHINGTON

Unum Insurance Company
2211 Congress Street
Portland, ME 04122

OUTLINE OF COVERAGE

Important information about the coverage you are being offered

Save this statement! It may be important to you in the future. The Washington State Insurance Commissioner requires that we give you the following information about fixed payment benefits.

This coverage is not comprehensive health care insurance and will not cover the cost of most hospital and other medical services.

This disclosure provides a very brief description of the important features of the coverage being considered. It is not an insurance contract and only the actual policy provisions will control. The policy itself will include in detail the rights and obligations of both the master policyholder and Unum.

This coverage is designed to pay you a fixed dollar amount regardless of the amount that the provider charges. Payments are not based on a percentage of the provider's charges and are paid in addition to any other health plan coverage you may have.

CAUTION: If you are also covered under a High Deductible Health Plan (HDHP) and are contributing to a Health Savings Account (HSA), you should check with your tax advisor or benefit advisor prior to purchasing this coverage to be sure that you will continue to be eligible to contribute to the HSA if this coverage is purchased.

Notice to Buyer: This policy does not constitute comprehensive health insurance coverage. It does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Hospital Indemnity coverage provides financial protection by paying a benefit if confined in a hospital. Depending on the coverage chosen, Unum may also pay a benefit if treatment is received for a covered accident or covered sickness. The amount received is based on the amount of coverage in effect on the date of the covered loss according to the terms and provisions of the policy.

The benefits an Insured may receive for a Payable Claim are listed in the Schedule of Benefits, subject to all other terms and provisions of this certificate. Amounts are the same for all Insureds, unless noted otherwise. Multiple benefits may be payable for a single Covered Accident.

In addition to the benefits disclosed above, the following may also apply and are summarized below.

A benefit trigger may be a waiting period described as the continuous period of time you must be in Active Employment in an Eligible Group before you are eligible for coverage. Duration of coverage will be for as long as you are eligible for coverage and you are insured. With regard to renewability of coverage, your policy can be cancelled by us or the Policyholder. We will not pay benefits for a claim that is caused by, contributed to by, or resulting from any Exclusions, which vary by the type of coverage selected.