AFLAC GROUP HOSPITAL INDEMNITY

The plan that can help with expenses and protect your savings.

Does your major medical insurance cover all of your bills?

Even a minor trip to the hospital can present you with unexpected expenses and medical bills. And even with major medical insurance, your plan may only pay a portion of your entire stay.

That's how the Aflac Group Hospital Indemnity plan can help.

It provides financial assistance to enhance your current coverage. It may help avoid dipping into savings or having to borrow to address out-of-pocket-expenses major medical insurance was never intended to cover. Like transportation and meals for family members, help with child care, or time away from work, for instance.

The Aflac Group Hospital Indemnity plan benefits include the following:

- Hospital Confinement Benefit
- Hospital Admission Benefit
- Hospital Intensive Care Benefit and more

How It Works:

Aflac Group Hospital Indemnity coverage is selected.

The insured has a high fever and goes to the emergency room

The physician admits the insured into the hospital.

The insured is released after two days.

Aflac Group Hospital Indemnity plan pays:

\$1,400

Amount payable was generated based on benefit amounts for: Hospital Admission (\$1,000) and Hospital Confinement (\$200 per day).

The plan has limitations and exclusions that may affect benefits payable. This brochure is for illustrative purposes only. Refer to your certificate for complete details, definitions, limitations, and exclusions.

BENEFITS OVERVIEW: BENEFIT AMOUNT

HOSPITAL ADMISSION BENEFIT per confinement (once per covered sickness or accident per calendar year for each insured) Payable when an insured is admitted to a hospital and confined as an inpatient because of a covered accidental injury or covered sickness. We will not pay benefits for confinement to an observation unit, or for emergency room treatment or outpatient treatment. We will not pay benefits for admission of a newborn child following his birth; however, we will pay for a newborn's admission to a Hospital Intensive Care Unit if, following birth, he is confined as an inpatient as a result of a covered accidental injury or covered sickness (including congenital defects, birth abnormalities, and/or premature birth).	\$1,000
HOSPITAL CONFINEMENT per day (maximum of 31 days per confinement for each covered sickness or accident for each insured) Payable for each day that an insured is confined to a hospital as an inpatient as the result of a covered accidental injury or covered sickness. If we pay benefits for confinement and the insured becomes confined again within six months because of the same or related condition, we will treat this confinement as the same period of confinement. This benefit is payable for only one hospital confinement at a time even if caused by more than one covered accidental injury, more than one covered sickness, or a covered accidental injury and a covered sickness.	\$200
HOSPITAL INTENSIVE CARE BENEFIT per day (maximum of 10 days per confinement for each covered sickness or accident for each insured) Payable for each day when an insured is confined in a Hospital Intensive Care Unit because of a covered accidental injury or covered sickness. We will pay benefits for only one confinement in a Hospital's Intensive Care Unit at a time. Once benefits are paid, if an insured becomes confined to a Hospital's Intensive Care Unit again within six months because of the same or related condition, we will treat this confinement as the same period of confinement. This benefit is payable in addition to the Hospital Confinement Benefit.	\$200

SUCCESSOR INSURED BENEFIT

If spouse coverage is in force at the time of the employee's death, the surviving spouse may elect to continue coverage. Coverage would continue according to the existing plan and would also include any dependent child coverage in force at the time.

In order to receive benefits for accidental injuries due to a covered accident, an insured must be admitted within six months of the date of the covered accident (in Washington, twelve months).

COVERAGE	MONTHLY RATES
Employee	\$18.42
Employee and Spouse	\$36.80
Employee and Dependent Children	\$29.64
Family	\$48.02

COVERAGE	BI-WEEKLY RATES
Employee	\$8.50
Employee and Spouse	\$16.98
Employee and Dependent Children	\$13.68
Family	\$22.16

LIMITATIONS AND EXCLUSIONS

State references refer to the state of your group and not your resident state. We will not pay for loss due to:

War – voluntarily participating in war, any act of war, or military conflicts, declared or
undeclared, or voluntarily participating or serving in the military, armed forces, or an
auxiliary unit thereto, or contracting with any country or international authority. (We
will return the prorated premium for any period not covered by the certificate when
the insured is in such service.) War also includes voluntary participation (In North
Carolina, active participation) in an insurrection, riot, civil commotion or civil state of

belligerence. War does not include acts of terrorism (except in Illinois).

- In Connecticut: a riot is not excluded.
- In Oklahoma: War, or any act of war, declared or undeclared, when serving in the
 military, armed forces, or an auxiliary unit thereto. (We will return the prorated
 premium for any period not covered by the certificate when the insured is in
 such service.) War does not include acts of terrorism.
- Suicide committing or attempting to commit suicide, while sane or insane.
 - In Missouri, Montana, and Vermont: committing or attempting to commit suicide, while sane.