



# Hospital Indemnity

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[\*Watch Video >\*](#)

## Hospital Indemnity Insurance

# Build a financial safety net for the unexpected



An injury or illness can land you in the hospital for a night or two—or even longer. If that happens, unexpected costs from deductibles, copays or coinsurance, as well as non-medical expenses like child care or transportation, could take a serious toll on your family’s financial health. That’s where hospital indemnity insurance comes in. It’s offered through your work and can reduce the burden of a hospital stay by helping cover the cost.



### How it works

Hospital indemnity insurance pays a fixed dollar amount per day for services and supplies you receive during a hospital stay, up to a maximum number of days each year. Stays in a mental health, substance abuse or nursing facility are also covered.

There are no preexisting condition limitations, no health questions to answer and no medical tests to take.<sup>1,2</sup> You’re paid the full per-day benefit no matter what other insurance you have.



### Why hospital indemnity insurance?

If you end up in the hospital, you probably want to focus more on your recovery, not your medical bills. Hospital indemnity insurance can help with the cost of your stay, giving you and your family some financial peace of mind.

[Continued >](#)

## What's covered

Hospital indemnity insurance pays a fixed dollar amount for each day of a hospital stay lasting 24 hours or more. Benefits are paid until you reach the maximum number of days stated in your policy. Your plan also has an initial day confinement benefit (admission benefit), which pays a higher benefit amount for your first day of a hospitalization and is compatible with a health savings account (HSA).<sup>3</sup>

In addition to hospitals, benefits are paid for stays in other eligible facilities. Each facility has its own per-day benefit and calendar-year maximum.



**Hospital**



**Intensive care unit (ICU)**



**Substance abuse facility**



**Mental health facility**



**Nursing facility\***

\*Nursing facility benefits are paid only if following a covered hospital stay of at least three consecutive days.

## Newborn benefit

If you have a baby while you're covered under the hospital indemnity plan, not only is your hospital stay covered, but your newborn is automatically covered under this plan from birth through the first 31 days of life.<sup>4</sup>

## Injuries and illnesses that result in hospital stays can lead to expensive, unexpected costs

Financial planning for health care is important, especially considering these facts:



In 2022, **38%** of adults reported that they or a family member delayed medical treatment because of the cost.<sup>5</sup>



It's estimated that nearly **50%** of an average person's health care expenses are from hospital services.<sup>6</sup>



According to a 2022 report, the average cost of a hospital stay is over **\$14,000** without health insurance coverage.<sup>7</sup>

## Claim examples



### Meet Herman

During flu season Herman falls seriously ill with pneumonia and spends five days in the ICU. Fortunately, Herman has Symetra Hospital Indemnity Insurance, which he purchased through work. It pays an initial day confinement benefit (admission benefit), followed by a per-day benefit starting on day two.

### Herman's hospital stay

	Benefits paid
Initial day confinement (admission) benefit	\$1,000 (first day only)
Per-day ICU stay, days 2+	\$200 per day
<b>5-day total</b>	<b>\$1,800</b>

➤ Herman can use the **\$1,800** to cover anything he'd like, such as out-of-pocket medical expenses, child care and transportation.



### Meet Anita and William

Anita gives birth to William, and they both spend three days in the hospital. Fortunately, both Anita and William receive a benefit from their Symetra Hospital Indemnity Insurance plan since William is automatically covered for his first 31 days after birth.<sup>4</sup>

### Anita's hospital stay

	Benefits Paid
Initial day confinement (admission) benefit	\$1,000 (first day only)
Per-day hospital stay, days 2+	\$100 per day
<b>3-day total</b>	<b>\$1,200</b>

➤ Anita can use the **\$2,400** benefit to cover anything she'd like, such as out-of-pocket medical expenses, child care and transportation.

### William's hospital stay

	Benefits Paid
Initial day confinement (admission) benefit	\$1,000 (first day only)
Per-day hospital stay, days 2+	\$100 per day
<b>3-day total</b>	<b>\$1,200</b>

These examples are for illustrative purposes only and are meant to provide a general overview of how hospital indemnity insurance works. Any resemblance to actual persons is purely coincidental. Refer to your enrollment materials for your plan's benefit amounts and costs of coverage.

[Continued >](#)

## Why enroll?

Hospital indemnity insurance can provide an extra layer of financial support if you become hospitalized for any reason. There are no copays, deductibles or network requirements, and benefits can be used for anything, including non-medical costs.

Signing up for Symetra Hospital Indemnity Insurance also means:

- **A simple enrollment process without any required medical questions or exams.<sup>2</sup>**
- **An easy and flexible claims process.**
- **Responsive and empathetic customer service representatives at a U.S.-based call center.**

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**Don't miss your opportunity to enroll in this valuable coverage. To get started, review your enrollment materials or talk to your benefits representative.**



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Fixed-Payment Indemnity policies (also known as "Hospital Indemnity policies"), insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, are not available in all U.S. states or any U.S. territory. They are designed to provide benefits at a preselected, fixed dollar amount. They are not a replacement for major medical or other comprehensive coverage, and do not satisfy the minimum essential coverage requirements of the Affordable Care Act. Base certificate form number is SBC-01505 6/20.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, contact your benefits representative.

<sup>1</sup> A pregnancy limitation period may apply.

<sup>2</sup> Late entrants may be required to complete a medical questionnaire.

<sup>3</sup> This plan is designed to be compatible with health savings accounts (HSAs). Please consult with a tax professional and/or your benefits representative to determine which supplemental benefits may be used with an HSA.

<sup>4</sup> You must enroll your child as a dependent on your plan within 30 days of birth in order for coverage to continue beyond the first 31 days.

<sup>5</sup> "Record High in U.S. Put Off Medical Care Due to Cost in 2022," Gallup, published January 17, 2023, <https://news.gallup.com/poll/468053/record-high-put-off-medical-care-due-cost-2022.aspx>.

<sup>6</sup> "2022 Milliman Medical Index," Milliman Research Report, May 2022.

<sup>7</sup> "U.S. population with a hospitalization 1997–2019, by age," Statista Research Department, September 13, 2022.

**Plan Summary for:**

12666000 - Sharp Transportation, Inc.

## Hospital Indemnity

<b>Inpatient Hospital Benefits</b> 500 days lifetime maximum unless otherwise noted	<b>Plan 1</b>
<b>Hospital Confinement</b>	\$1,000 first day, \$100 day 2+, 90 incident(s) pp/pcy
<b>Intensive Care Unit</b>	\$1,000 first day, \$200 day 2+, 30 incident(s) pp/pcy
<b>Substance Abuse Facility</b>	\$100 per day, 30 day(s) pp/pcy
<b>Mental Health Facility</b>	\$100 per day, 30 day(s) pp/pcy
<b>Nursing Facility</b> This benefit is paid only if following a covered hospital stay of at least three consecutive days.	\$100 per day, 30 day(s) pp/pcy
<b>Wellness Screening</b>	\$100 per day, 1 day(s) pp/pcy
<b>Plan is HSA Compatible</b>	Yes
<b>Extension of Coverage</b>	Included

pp/pcy= per person, per calendar year

**Please refer to the Description of Benefits included in this packet for additional information on your benefits.**

Hospital Indemnity insurance policies are not a replacement for a major medical policy or other comprehensive coverage and do not satisfy the minimum essential coverage requirements of the Affordable Care Act. They are designed to provide benefits at a preselected, fixed-dollar amount. Coverage may be subject to exclusions, limitations, reductions, and termination of benefit provisions. Hospital Indemnity policies are insured by Symetra Life Insurance Company located at 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, and are not available in all U.S. states or any U.S. territory.

Coverage is provided under generic policy form number SBC-00500.

**Description of Benefits for:**

12666000 - Sharp Transportation, Inc.

## **Hospital Indemnity Insurance**

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### **Inpatient Hospital/Intensive Care Unit First Day**

Benefits are paid on the first day of a covered hospital stay (whether that is a regular hospital bed or ICU) of 24 hours or more. The benefit is paid one time per hospital stay, regardless of whether the insured is moved from the regular bed to ICU, or vice versa.

### **Inpatient Hospital/Intensive Care Unit Day 2+**

Benefits are paid beginning the second day of a covered stay. ICU stays are included with the hospital stay benefit. Each facility has a calendar year maximum number of days as selected, 500 days per lifetime unless otherwise noted in the policy. Please refer to your Plan Summary for details.

### **Substance Abuse Facility**

Benefits are paid on the first day of a covered substance abuse facility stay. Each facility has a calendar year maximum number of days as selected, 500 days per lifetime unless otherwise noted in the policy. Please refer to your Plan Summary for details.

### **Mental Health Facility**

Benefits are paid on the first day of a covered mental health facility stay. Each facility has a calendar year maximum number of days as selected 180 days per lifetime unless otherwise noted in the policy. Please refer to your Plan Summary for details.

### **Nursing Facility**

Benefits are paid on the first day of a covered nursing facility stay which follows a covered hospital stay of 3 consecutive days or more. Each facility has a calendar year maximum number of days as selected, 500 days per lifetime unless otherwise noted in the policy. Please refer to your Plan Summary for details.

### **Portability/Extension of Coverage**

Allows coverage to continue following termination of employment or loss of eligibility. Review the certificate of coverage to understand the full details of this provision.

Health Advocate Value Adds\*:

### **Health Advocate Value Adds\*:**

EAP +Work/Life - Unlimited, toll-free access to licensed professional counselors and work/life specialists for help with a wide range of family- and work-related issues.

Medical Bill Saver - Expert negotiators work with providers to reduce the cost of medical and dental bills that are not covered by your insurance.

Health Advocacy - A personal health advocate can help you with a variety of health and insurance challenges like finding providers and resolving billing and claim issues.

Wellness Coaching - Unlimited, confidential support from a personal wellness coach and comprehensive wellness website, to help you maintain optimal health

NurseLine - 24/7 access to a registered nurse who can provide health and treatment advice or direct you to appropriate care for immediate attention, if needed.

\* Note: Health Advocate Value Adds benefits a re not included or available to any residents of FL, MD, NH, or WA that are, or will, be involved in this sale, based on residency state insurance regulations. Residents of CT and CA may or may not be eligible for these benefits; the benefits are included only when their individual certificate contains "Miscellaneous Goods and Services" language within the Schedule of Benefits."

### **Wellness Screening**

This Rider provides a benefit if an Insured incurs an expense as a result of receiving any of the screening tests described in this Rider. There is a specified calendar year maximum number of screening tests for which a benefit will be paid. Please refer to your Plan Summary for details. Included tests:

- CEAbloodtestforcoloncancer
- ChestX-ray
- Childsportsphysicals
- Colonoscopyorvirtualcolonoscopy
- CTangiography
- Electrocardiogram
- Fastingbloodglucosetest
- Flexiblesigmoidoscopies
- Mammograms
- Papsmears
- Prostate-specificantigen(PSA)test
- SerumcholesteroltesttodeterminelevelofHDLandLDL
- Stresstestonabicycleortreadmill
- Testicularultrasound
- Thermography\$25
- ThinPrep Pap Test

**If there is any conflict between this information and the policy issued, the terms of the policy will prevail.**

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Coverage is provided under generic policy form number SBC-00500



## Accident, Critical Illness and Hospital Indemnity Insurance

# Understanding your health screening and wellness benefits



### Contact us:

Call 1-800-497-3699  
 Monday–Friday  
 7:30 a.m. to 6 p.m. ET

[sbclaims@symetra.com](mailto:sbclaims@symetra.com)  
[symetra.com/MyGO](https://symetra.com/MyGO)

Mailing address:  
 P.O. Box 440  
 Ashland, WI 54806  
 Fax: 715-682-5919

### Your benefit amount:

Accident:

Critical illness:

Hospital indemnity:

Accident policy #:

Critical illness policy #:

Hospital indemnity policy #:

Policyholder:

Keeping tabs on your overall health can help you prepare for the unexpected. Fortunately, through your Symetra coverage, you can receive a financial benefit for being proactive about your health and your family's.

The chart below shows which screenings are eligible for benefits under each plan. After completing a screening test, just give us a call or send us an email and let us know (1) the name of the insured, (2) the type of screening, and (3) the date the screening was completed.

### Eligible screening tests

	Accident	Critical illness	Hospital indemnity
Abdominal aortic aneurysm ultrasonography	✓		✓
Baseline testing for concussion	✓		
Biopsy		✓	
Blood test for lipids, including total cholesterol, LDL, HDL and triglycerides	✓		✓
Blood test for triglycerides		✓	
Bone density screening	✓		✓
Bone marrow testing	✓	✓	✓
Breast MRI		✓	
Breast ultrasound	✓	✓	✓
CA 125 (blood test for ovarian cancer)	✓	✓	✓
CA 15-3 (blood test for breast cancer)	✓	✓	✓
Carotid Doppler	✓		✓
CEA (blood test for colon cancer)	✓	✓	✓
Chest X-ray	✓	✓	✓
Child sports physicals	✓		✓
Colonoscopy	✓	✓	✓
COVID-19 (PCR, rapid, antibody)	✓	✓	✓

You can also submit claims through My Group Online (MyGO). Simply use the policy information above to self-register and create an account.

[Continued >](#)

	Accident	Critical illness	Hospital indemnity
CT angiography	✓		✓
Electrocardiogram	✓		✓
Fasting blood glucose test	✓	✓	✓
Flexible sigmoidoscopy	✓	✓	✓
Hemoccult stool specimen		✓	
Mammogram	✓	✓	✓
Pap test	✓	✓	✓
Prostate-specific antigen (PSA) test	✓	✓	✓

	Accident	Critical illness	Hospital indemnity
Serum cholesterol test to determine HDL/LDL level	✓	✓	✓
Serum protein electrophoresis (blood test for myeloma)		✓	
Stress test on a bicycle or treadmill	✓	✓	✓
Testicular ultrasound	✓		✓
Thermography	✓	✓	✓
ThinPrep Pap test	✓		✓

## Frequently asked questions

### How do I let Symetra know I had a screening test?

It's easy. Give us a call or send us an email and let us know three things: the name of the insured, the type of screening, and the date the screening was completed.

You can also submit a claim through **MyGO**. Once you've created an account and logged in, click **Submit my claim** and add any required information. You can also upload any relevant documentation from a desktop computer or mobile device.<sup>1</sup>

### Is there another way to file my health screening or wellness benefit claim?

Yes. You can also send claims by mail or fax. Please use the contact information on the first page and we'll be happy to assist.

### Who can receive a health screening or wellness benefit?

Anyone covered under your plan is eligible for these benefits. Please review your enrollment information for more details.

### How often can I receive a health screening or wellness benefit?

Please refer to your policy information or call Symetra at 1-800-497-3699 to confirm how often you can file a health screening or wellness benefit claim.

### What if I have a screening test that qualifies for benefits under more than one of my Symetra plans?

If you have multiple coverages with Symetra, we'll automatically cross-check to see if you're eligible for more than one benefit and submit the claim on your behalf.

Group benefits policies are insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004. They are not available in all states or any U.S. territory. They are not a replacement for a major medical policy or other comprehensive coverage and do not satisfy the minimum essential coverage requirements of the Affordable Care Act.

Critical illness and fixed-payment (also known as hospital indemnity) coverages provide benefits at a preselected, fixed dollar amount. Base certificate form numbers are SBC-00535-CERT 4/14 and SBC-04535 1/21 and SBC-01505 6/20.

Accident coverage provides benefits up to a preselected, per occurrence amount. Certificate form number is SBC-03515 1/18.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, contact your HR or benefits representative.

**THIS POLICY IS ISSUED AS AN ACCIDENT-ONLY POLICY. IT DOES NOT PAY BENEFITS FOR LOSS CAUSED BY ILLNESS.**

<sup>1</sup> If your policy was issued in CA or PA, please upload the actual bill and the Explanation of Benefits (EOB) from your health insurance carrier.



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## Value-Add Benefits

# Help is just a phone call away

Your coverage includes **24/7 access to value-add benefits and programs** provided by Health Advocate at no additional cost to you.

These services can help you and your eligible family members with a wide range of health care and insurance-related issues.



### EAP+Work/Life™

This **confidential program** offers unlimited, toll-free access to licensed professional counselors and work/life specialists for short-term assistance with a wide range of family- and work-related issues. Educational materials, webinars and other resources are available through a dedicated website. Specialists can help you address:

- Stress, depression and anxiety.
- Substance abuse.
- Financial and legal problems.
- Divorce, grief and loss.
- Child and elder care concerns.



### Health Advocacy

You have **unlimited access** to a Personal Health Advocate, typically a registered nurse supported by medical directors and benefits and claims specialists, who can help:

- Find qualified doctors, hospitals and other providers.
- Explain conditions and treatments.
- Resolve billing and claims issues.
- Arrange for second opinions and the transfer of medical records.
- Clarify health insurance benefits and answer coverage questions.



### NurseLine™

You can reach a registered nurse **24 hours a day, 7 days a week** for trusted advice when you need it most. Our experienced nurses are available to:

- Answer questions about symptoms or medications.
- Offer self-care information for non-urgent health issues.
- Explain health conditions and treatments.
- Direct you to the appropriate care for immediate attention, if needed.



### Medical Bill Saver™

Expert negotiators will work with providers to **reduce the cost** of medical and dental bills that are not covered by your insurance—saving you time and money. Our skilled negotiators can:

- Help reduce your out-of-pocket costs on non-covered bills.
- Handle negotiations and obtain provider signoff.
- Give you an itemized summary of the outcome and payment terms.



### Wellness Coaching

Our Wellness Coaching program provides a personalized, **action-oriented approach** to help you and your eligible family members reach and maintain your best possible health. Features include:

- Unlimited, confidential support from a personal Wellness Coach by telephone, email or secure web messaging.
- A comprehensive website featuring a personalized health profile to identify health risks, wellness tools and trackers, and self-guided programs on weight loss, nutrition and exercise.

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**To learn more, contact Symetra at [symsba@symetra.com](mailto:symsba@symetra.com) or 1-800-497-3699.**

*Continued >*

## Who's eligible?

Health Advocate benefits are available to the enrolled member and their spouse/domestic partner, dependent children, parents and parents-in-law. The Wellness Coaching feature is available to enrolled members, their spouse and dependent children age 18+.

## Questions?

For more information about your Health Advocate benefits or your specific group coverage, contact your company's benefits representative or Symetra at [symsba@symetra.com](mailto:symsba@symetra.com) or 1-800-497-3699.



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Value-add programs are offered by Health Advocate™ through Symetra Life Insurance Company. Health Advocate, a subsidiary of West Corporation, is not affiliated with any insurance or third-party provider. Health Advocate does not replace health insurance coverage, provide medical care or recommend treatment.

Value-add programs may not be available in all states.

# How to file a claim

**Policy #:**

**Policyholder:**

When using MyGO for the first time, please use the policy information above to self-register before submitting a claim.

## Contact us:

**sbclaims@symetra.com**  
**symetra.com/MyGO**

**Call 1-800-497-3699**

Monday–Friday

6:30 a.m. to 5 p.m. CT

Fax: (715) 682-5919

Mailing address:

P.O. Box 440

Ashland, WI 54806

## Option 1

### Use your Symetra benefits ID card

- 1 Present your card at the time of service, and assign your benefits to your provider.
- 2 Your provider will file a claim with Symetra, and Symetra will pay the provider according to the policy.
- 3 Symetra will send you an Explanation of Benefits (EOB) showing how the claim was paid. You are responsible for paying any remaining balance.

## Option 2

### Use My Group Online (MyGO)

Initiate a claim within minutes on MyGO. This secure, user-friendly platform is available 24/7 through your computer or mobile device.

To submit your claim:

- 1 Log in to your account at [symetra.com/MyGO](https://symetra.com/MyGO) and click “Submit my claim.”
- 2 Fill out a few simple fields and upload documents.
- 3 Hit “Submit.”

## Option 3

### Email, mail or fax a claim

- 1 Request an itemized bill (form UB04 or HCFA 1500) from your provider with a diagnosis code. For accident claims, you also need to write a statement explaining the date, place and cause of the accident.
- 2 Complete a claim submission form, which can be found on [symetra.com/MyGO](https://symetra.com/MyGO) under “Forms.” We can also email, mail or fax this form to you.
- 3 Submit the above information to Symetra by email, mail or fax.

## More with MyGO

With MyGO, you can also:

- Check the status of a claim.
- View an Explanation of Benefits.
- Download important forms.
- Request and/or view a benefits ID card.
- Submit scans, photos or electronic versions of claim documents.
- Set up direct deposit for benefit payments.

*Continued >*

## Frequently asked questions

### **Do I need a referral to see a specialist?**

No. Referrals are not required, and you do not need pre-authorization to see a specialist.

### **How much time do I have to file a claim?**

You have 90 days from the date of service to file a fixed-payment insurance claim. The first expense for an accident claim must be incurred within 60 days after the date of accident.

### **When will Symetra make a decision on my claim?**

Symetra typically makes a decision on a claim within 10 days of receiving completed claim forms and any additional required information. Depending on the complexity of the claim, this review period may be extended up to an additional 15 days. If your claim is approved, you can expect to receive payment within 7-10 days.

### **Can Symetra help me gather any remaining information from my medical provider?**

Yes. Additional information such as doctor notes may be requested, and we're happy to help you gather the remaining details after you or a provider initiates a claim. We'll just need you to sign a release of information form so we can contact the provider on your behalf.

### **Does the policy have to be effective to receive benefits?**

Yes. The services received must occur while the policy is active.



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