# GROUP VOLUNTARY HOSPITAL INDEMNITY INSURANCE BENEFIT HIGHLIGHTS





The average cost for a hospital stay is \$2,607 per day<sup>1</sup>

# West Marine, Inc.

Hospital Indemnity (HI) insurance pays a cash benefit if you or an insured dependent (spouse or child) are confined in a hospital for a covered illness or injury. Even with the best primary health insurance plan, out-of-pocket costs from a hospital stay can add up.

The benefits are paid in lump sum amounts to you, and can help offset expenses that primary health insurance doesn't cover (like deductibles, co-insurance amounts or copays), or benefits can be used for any non-medical expenses (like housing costs, groceries, car expenses, etc.).



To learn more about Hospital Indemnity insurance, visit thehartford.com/employee-benefits/employees

## **COVERAGE INFORMATION**

Benefit amounts are based on the plan in effect for you or an insured dependent at the time the covered event occurs. Unless otherwise noted, the benefit amounts payable under each plan are the same for you and your dependent(s).

PLAN INFORMATION		Plan
Coverage Type		On and off-job (24 hour)
Covered Events		Illness and injury
HSA Compatible		Yes
BENEFITS		
HOSPITAL CARE <sup>2</sup>		Plan
First Day Hospital Confinement	Up to 1 day per year	\$1,000
Daily Hospital Confinement (Day 2+)	Up to 30 days per	\$200
Daily ICU Confinement (Day 2+)	year Up to 30 days	\$400
FEATURES		Plan
Ability Assist® EAP3 – 24/7/365 access to help for financial, legal or emotional issues		
HealthChampion <sup>SM4</sup> – Administrative & clinical support following serious illness or injury		

## **ASKED & ANSWERED**

# IS THIS COVERAGE HSA COMPATIBLE?

If you (or any dependent(s)) currently participate in a Health Saving Account (HSA) or if you plan to do so in the future, you should be aware that the IRS limits the types of supplemental insurance you may have in addition to a HSA, while still maintaining the tax-exempt status of the HSA.

This plan design was designed to be compatible with Health Savings Accounts (HSAs). However, if you have or plan to open an HSA, please consult your tax and legal advisors to determine which supplemental benefits may be purchased by employees with an HSA.

#### WHO IS ELIGIBLE?

You are eligible for this insurance if you are an active full-time employee who works at least 16 hours per week on a regularly scheduled basis

Your spouse and child(ren) are also eligible for coverage. Any child(ren) must be under age 26.

#### CAN I INSURE MY DOMESTIC OR CIVIL UNION PARTNER?

Yes. Any reference to "spouse" in this document includes your domestic partner, civil union partner or equivalent, as recognized and allowed by applicable law.

## **AM I GUARANTEED COVERAGE?**

This insurance is guaranteed issue coverage – it is available without having to provide information about your or your family's health. All you have to do is elect the coverage to become insured.

## WHEN CAN I ENROLL?

You may enroll during any scheduled enrollment period.

## WHEN DOES THIS INSURANCE BEGIN?

The initial effective date of this coverage is 1/1/2022. If you enroll for coverage prior to this date, insurance will become effective on this date. If you enroll for coverage after this date, insurance will become effective in accordance with the terms of the certificate (usually the first day of the month following the date you elect coverage).

You must be actively at work with your employer on the day your coverage takes effect. Your spouse and child(ren) must be performing normal activities and not be confined (at home or in a hospital/care facility).

#### WHEN DOES THIS INSURANCE END?

This insurance will end when you or your dependents no longer satisfy the applicable eligibility conditions, premium is unpaid, you are no longer actively working, you leave your employer, or the coverage is no longer offered.

## CAN I KEEP THIS INSURANCE IF I LEAVE MY EMPLOYER OR AM NO LONGER A MEMBER OF THIS GROUP?

Yes, you can take this coverage with you. Your spouse/partner may also continue insurance in certain circumstances.

1"Kaiser Family Foundation, November 2019. Adjusted expenses per inpatient day include expenses incurred for both inpatient and outpatient care; inpatient days are adjusted higher to reflect an estimate of the volume of outpatient services: https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day, viewed as of 4/16/202

<sup>2</sup>For Hospital Care benefits, when an insured is eligible for more than one benefit in a single day, only the highest benefit will be paid.

#### The Buck's Got Your Back ®

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Hospital does not include: convalescent homes, or convalescent, rest or nursing facilities; facilities affording primarily custodial, educational or rehabilitory care; or facilities primarily for care of the aged/elderly, persons with substance abuse issues/disorders or mental/nervous disorders. Confinement means the assignment to a bed in a medical facility for a period of at least 20 consecutive hours. Required hours may vary by state. The Hartford compensates both internal and external producers, as well as others, for the sale and service of our products. For additional information regarding Hartford's compensation practices, please review our website http://thehartford.com/group-benefits-producer-compensation. Hospital Indemnity Form Series includes GBD-2800, GBD-2900, or state equivalent. 5962h NS 08/21