Underwritten by: **American Heritage Life Insurance Company**

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by American Heritage Life Insurance Company, Jacksonville, Florida in all states except New York. Product features and availability vary by state and are solely the responsibility of American Heritage Life Insurance Company.

Hospital Indemnity Insurance

Protection for hospital stays when a sickness or injury occurs



Think About This

Americans pay nearly 60% more for hospital stays than patients in Europe and Canada†

24

$11,700
The average cost of a 24-hour hospital stay in the U.S.††

Two-thirds of Americans received an unexpected medical bill following a hospital stay in 2020†††

A sickness or injury could land you in the hospital. Your medical insurance may only cover some of it, leaving you to pay for deductibles and coinsurance fees. Hospital Indemnity Insurance can help ease your financial burden so you can focus on recovery.

Here's How It Works

- Select the coverage that's right for you and your family
- If you or a family member requires a hospital stay, you file a claim
- A cash benefit is direct deposited or a check is mailed and can be used however you wish*

Protecting Your Finances

You've worked hard for your savings – don't let a hospital bill wipe them out.

- Protect your checking and savings
- Don't dip into your 401(k)

Protecting insureds for over 60 years

Meeting Your Needs

- Guaranteed Issue coverage with a Pre-Existing Condition Limitation*
- Coverage can include your dependents
- Premiums are affordable and can be conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details

†https://www.healthsystemtracker.org/brief/what-drives-health-spending-in-the-u-s-compared-to-other-countries/. ††https://www.debt.org/medical/hospital-surgery-costs/. †††https://newsroom.heart.org/news /poll-surprise-medical-bills-pose-significant-financial-burden. *Please refer to the Exclusions and Limitations section of this brochure.

Meet Tommy



Choose

Tommy's mom signed up for Hospital Indemnity Insurance during her employer's Open Enrollment.

Use

A few months later, Tommy complained of pain in his abdomen. He has a fever and is vomiting. Here's his story:

Ambulance
Tommy's parents call an ambulance to take him to the hospital emergency room

Tests
After running some tests, the doctors determine that Tommy has appendicitis

Hospital Stay
An appendectomy is recommended and Tommy is admitted for an overnight stay

Surgery
Tommy has surgery the next day and spends another night in the hospital

Recovery
Tommy is released to recover and follow-up visits with his doctor are scheduled

Claim

Tommy's mom files a claim with her Hospital Indemnity coverage through the convenient web portal, **MyBenefits. She receives cash benefits for:**

- First Day Hospital Confinement
- Daily Hospital Confinement

MyBenefits Claim Filing Portal

standard.com/ahl/mybenefits

Offers 24/7 access to important information about your benefits. eSign, submit and check your claims (including claim history), request cash benefits to be direct deposited, make changes to personal information, and more.

Here are some of the ways Tommy's mom can use the cash benefits

Finances
Can help protect savings, retirement plans and 401(k)s from being depleted

Travel
Can help pay for expenses while receiving treatment in another city

Home
Can help pay the mortgage, continue rental payments, or home repairs for after care

Expenses
Can help pay for her family's living expenses such as bills, electricity, and gas

The example above details a fictional situation; your individual experience may vary.
For a listing of benefits and benefit amounts, see pages 3 and 4.

Hospital Indemnity (GIM2)

Group Hospital Indemnity Insurance

from American Heritage Life Insurance Company

Offered to the employees of:

Meridian Public Schools

Benefit Amounts

Hospitalization Benefits	Plan 1	Plan 2
First Day Hospital Confinement	$500	$1,000
Limit to number of occurrences	One per Year	One per Year
Daily Hospital Confinement (daily)	$150	$250
If First Day Hospital Confinement Benefit is not payable	Days 1 - 10	Days 1 - 10
Hospital Intensive Care (daily)	$150	$250
Maximum Days Payable	10 Days	10 Days
Wellness Benefit	**Plan 1**	**Plan 2**
Fixed Wellness (daily)	$50	$50

Plan 1 Premiums

Mode	EE	EE + SP	EE + CH	F
Monthly	$11.83	$25.09	$15.60	$29.64

Plan 2 Premiums

Mode	EE	EE + SP	EE + CH	F
Monthly	$20.02	$43.03	$26.65	$50.44

Issue ages: 18 and over if actively at work

EE=Employee; **EE + SP** = Employee + Spouse;
EE + CH = Employee + Child(ren); **F** = Family

For Home Office Use Only - GIM2 (SR)
Opt 1 - FDHC $500/One per Year/Covered; DHC $150/10 Days; HIC $150/10; FW 2
Opt 2 - FDHC $1000/One per Year/Covered; DHC $250/10 Days; HIC $250/10; FW 2
Quote Pro Version 12.01.2025. REV2025.12.01. QY2023. Group UW. Lives 838. SIC 8211. UWE. COM 0.2

For use in the Meridian Public Schools enrollments situsued in: MS.

This material is valid as long as information remains current, but in no event later than December 12, 2028. Underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Insurance products are offered by American Heritage Life Insurance Company, Jacksonville, Florida in all states except New York. This information highlights some features of the policy/certificate but is not the insurance contract. Only the actual policy/certificate provisions control.

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Benefits - Benefits are payable for the following conditions (subject to limits listed on page 3)

Hospitalization Benefit(s)

First Day Hospital Confinement - payable once per continuous confinement per covered person, up to the limit stated (see pg. 3). Not paid for newborn child's initial confinement after birth (see Hospitalization Due to Pregnancy)

Daily Hospital Confinement - payable up to the maximum number of days for each confinement. Hospitalization due to pregnancy is covered, subject to the Pre-Existing Condition Limitation. Not paid for any day the First Day Hospital Confinement benefit is paid (see How We Pay the Daily Hospital Confinement Benefit)

Hospitalization Due to Pregnancy - your First Day Hospital Confinement does include hospitalization due to normal pregnancy or complications of pregnancy, subject to the Pre-Existing Condition Limitation. A newborn child's initial confinement in a hospital is not payable for Daily Hospital Confinement. A newborn child's initial confinement in a hospital includes any transfers to another hospital before being discharged to go home. A newborn child's routine nursing or well-baby care during the initial confinement in a hospital is not payable for Daily Hospital Confinement

How We Pay the Daily Hospital Confinement Benefit - the Daily Hospital Confinement Benefit pays for each day after the first day of a continuous confinement in a hospital for one day less than the maximum number of days (see pg. 3)

Hospital Intensive Care - up to the maximum number of days stated on page 3 for each confinement. Pays in addition to the First Day Hospital Confinement benefit and Daily Hospital Confinement benefit

Wellness Benefit

Fixed Wellness - once per day per covered person per coverage year, if one of the following services is received:

Biopsy for skin cancer; Blood test for triglycerides; Bone Marrow Testing; CA15-3, CA125, CEA and PSA (blood tests for breast, ovarian, colon and prostate cancer); Chest X-ray; Colonoscopy; Doppler screenings for carotids and peripheral vascular disease; Echocardiogram; EKG (Electrocardiogram); Flexible sigmoidoscopy; Hemoccult stool analysis; HPV Vaccination (Human Papillomavirus); Lipid panel (total cholesterol count); Mammography, including Breast Ultrasound; Pap Smear, including ThinPrep Pap Test; Serum Protein Electrophoresis (test for myeloma); Stress test on bike or treadmill; Thermography; or Ultrasound screening for abdominal aortic aneurysms



Protecting individuals & families for over 60 years

Beneficial insurance coverage to **help you and your family enjoy greater financial peace of mind** when the unexpected happens.

When you choose our
Group Voluntary Insurance Coverage,
we can help give you financial peace of mind.

We have been in the business of protecting America's families for over 60 years. Our valuable coverage options help empower people to make the best decisions for their finances and their futures.

Once you've elected coverage, register with our convenient customer service portal, MyBenefits, for anytime access to your coverage details and important documents. MyBenefits also allows you to file claims quickly and easily – and get benefits deposited directly into your bank account (authorization required).

Certificate Specifications

Conditions and Limits - We pay benefits as stated for service and treatment received by the covered person while coverage is in force, for sickness or injury. Hospital room and board charges must be incurred for benefits to be payable. **Treatment must be received in the United States or its territories.**

Eligibility - Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

Dependent Eligibility/Termination of Coverage - Coverage may include you, your spouse or domestic partner, and children. Coverage for children ends upon your death or when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends upon termination of domestic partnership or your death.

When Coverage Ends - Coverage under the policy ends on the earliest of: the date the policy is canceled; the last day of the period for which you made any required contributions; the last day you are in active employment or a member in an association, labor union or other entity, except as provided under the "Temporary Layoff, Leave of Absence, or Family and Medical Leave of Absence" provision; the date you are no longer in an eligible class; the date your class is no longer eligible; upon discovery of fraud or material misrepresentation when filing for a claim.

Portability - You may be eligible to continue your coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

Exclusions and Limitations

Pre-Existing Condition Limitation - We do not pay benefits due to a pre-existing condition if the loss occurs during the first 12 months of coverage. A pre-existing condition is a condition for which: medical treatment, consultation, care or services were received, including diagnostic measures, drugs or medicines were taken or prescribed, over-the-counter medications were taken or treatment recommendations were followed in the 12 months prior to the effective date or the date an increase in benefits would be effective; or symptoms existed within the 12 months prior to the effective date or the date an increase in benefits would be effective. This limitation applies if the insured person is pregnant prior to the effective date.

Exclusions - Benefits are not paid for any loss caused by or resulting from (directly or indirectly): injury or sickness incurred before the effective date; any act of war or participation in a riot, insurrection or rebellion; suicide or attempt at suicide; engaging in an illegal occupation or committing or attempting an assault or felony; cosmetic dentistry or plastic surgery, except to treat an injury or correct a disorder of normal body function; intentionally self-inflicted injuries; confinement that begins before the effective date of coverage; the reversal of a tubal ligation or vasectomy; artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications or physician services, unless required by law; participation in aeronautics (including parachuting and hang gliding) unless a fare-paying passenger on a licensed common-carrier aircraft operating between established airports; a newborn child's routine nursing or well-baby care during the initial confinement in the hospital; driving in any race or speed test or testing any motorized vehicle on any racetrack or speedway.

Rev. 6.24. This brochure is for use in enrollments sitused in MS. This advertisement is a solicitation of insurance; contact may be made by an Agent, Agency, or Representative of The Standard.

This material is valid as long as information remains current, but in no event later than December 12, 2028.

Group Hospital Indemnity benefits are provided under policy form GVSP2, or state variations thereof.

The coverage provided is limited benefit hospital indemnity insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from American Heritage Life Insurance Company. There may be instances when a law requires that benefits under this coverage be paid to a third party, rather than to you. If you or a dependent have coverage under Medicare, Medicaid, or a state variation, please refer to your health insurance documents to confirm whether assignments or liens may apply.

This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the coverage, including exclusions and other limitations are included in the certificates issued. For additional information, you may contact your Representative at The Standard.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

The Standard is the marketing name used by American Heritage Life Insurance Company, a subsidiary of StanCorp Financial Group, Inc.
standard.com or standard.com/ahl