BCS

EssentialCare®

# Hospital Insurance

**Prepared for:**
**Utah Private Child Care Association**

EssentialCare®
Group Hospital Insurance

BCS

# A hospital stay can be expensive. Are you protected?



Accidents and illnesses can happen when you least expect it and your focus should be on your health—not your wallet. But even after your medical insurance pays its portion, you could be facing unplanned bills for deductibles, copays, and coinsurance. EssentialCare Group Hospital Insurance provides fixed payments that can help you manage these costs by providing a cash benefit for covered expenses. Use the money however you wish, so you can focus on your recovery, not your bills.



## How does Hospital Insurance work?

Hospital Insurance can supplement existing coverage and provide cash to help cover medical and living expenses. Below is an example of how benefits might be paid.*

**Hospital Insurance**

Provides fixed payments to help manage costs arising from a hospital stay

**55 year old female suffers heart attack and is admitted to hospital**

| | |
|---|---|
| Hospital Admission Benefit | $1,500 |
| Hospital Confinement Benefit ($200/day x 6 days) | $1,200 |
| **TOTAL** | **$2,700** |

*Payouts are estimates and not guaranteed. The examples shown may vary from the plan offering. Your individual experience may also vary. Benefits paid are determined based on individual situations. Terms, conditions, and exclusions apply. See full policy for details.

## How might you use these benefits?

Payments can be used for major medical copays and deductibles, or even things like transportation, child care, housekeeping help, or whatever else you may need.
**How you use the money is up to you!**

## Why EssentialCare Group Hospital Insurance?

- ✓ Easy to enroll through a self-service platform
- ✓ Benefits are paid directly to you to spend as you see fit
- ✓ Fast payment with simplified claims process

ESSENTIALCARE GROUP HOSPITAL INSURANCE IS A LIMITED BENEFIT POLICY—READ YOUR POLICY CAREFULLY. THIS POLICY IS NOT MAJOR MEDICAL INSURANCE AND IS NOT INTENDED TO BE A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.

BCS EssentialCare insurance is underwritten by BCS Insurance Company, Worthington, OH (Administrative Offices: Oakbrook Terrace, IL). See policy documents for a complete description of benefits, exclusions, limitations, and conditions of coverage.

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# Hospital Insurance Plan Options

| Daily Benefits per Covered Person | |
|---|---|
| First Day Hospital Confinement - up to 1 day per year | $1,500 |
| *maximum days per year* | 1 |
| Hospital Confinement (day 2 forward) - up to 10 day per year | $200 |
| *maximum days per year* | 10 |
| Rehabilitation Unit - up to 15 day per year | $100 |
| *maximum days per year* | 15 |
| Emergency Room Treatment - up to 1 day per year | $200 |
| *maximum days per year* | 1 |
| Wellness - up to 1 day per year | $50 |
| *maximum days per year* | 1 |

| Plan Features | |
|---|---|
| Pre-Existing Condition Limitation (months) | 12/12 |
| Normal Pregnancy Coverage (Complications of Pregnancy are always covered) | Included |
| Normal Pregnancy Waiting Period (does not apply to Complications) | 9 Months |
| Portability | Not Included |
| Annual Benefit Maximum | None |
| Benefit Waiting Period | 0 Days |
| Reduction in Benefits at Older Ages | None |
| Rate Guarantee Period (in Years) | 2 Years |

# Limitations and Exclusions

These are the standard limitations and exclusions and may vary by plan design selected and state requirements.

1. No benefits are payable under the Policy for any Covered Illness or Covered Injury that results from or is caused by an Insured's:
   - intentionally self-inflicted injuries, suicide or any attempt at suicide while sane or insane;
   - voluntary intoxication (as defined by the law of the jurisdiction in which the Covered Illness or Covered Injury occurred) or while under the influence of any narcotic, drug or controlled substance, unless administered by or taken according to the instructions of a Doctor or Medical Professional;
   - voluntary intoxication through use of poison, gas or fumes, whether by ingestion, injection, inhalation or absorption;
   - commission of or attempt to commit a felony, or voluntary participation in a riot or insurrection;
   - incarceration or imprisonment following conviction for a crime;
   - flying as a pilot or crew member of any aircraft or travel or flight, including boarding or alighting, in any vehicle or device while being used for any test or experimental purposes or while being operated by, for or under the direction of any military authority other than the Military Airlift Command (MAC) of the United States or similar air transport service of any other country;
   - riding in or on any motor vehicle or aircraft engaged in acrobatic tricks/stunts (for motor vehicles), acrobatic/stunt flying (for aircraft), endurance tests, off-road activities (for motor vehicles), or racing;
   - participation in any organized sport in a professional or semi-professional capacity;
   - participation in base jumping, bungee jumping, cliff jumping, kite surfing, kiteboarding, luging, missed climbing, mountain boarding, mountain climbing, mountaineering, parachuting, paragliding, parakiting, parasailing, Parkour, rock climbing, scuba diving, ski jumping, skydiving, spelunking, tricking, wingsuit flying, or other similar extreme sports or high risk activities;
   - travel or activity outside the United States or Canada;
   - active duty service or training in the military (naval force, air force or National Guard/Reserves or equivalent) for service/training extending beyond 31-days of any state, country or international organization, unless specifically allowed by a provision of this Certificate; or
   - involvement in any declared or undeclared war or act of war (not including acts of terrorism), while serving in the military or an auxiliary unit attached to the military, or working in an area of war whether voluntarily or as required by an employer.

2. In addition, we will not pay for any benefits under the Policy, unless required by law for:
   - pregnancy or childbirth, except Complications of Pregnancy, unless covered under the plan;
   - elective abortion or complications thereof;
   - artificial insemination, in vitro fertilization, test tube fertilization;
   - gender change, sterilization, tubal ligation or vasectomy, and reversal thereof;
   - aroma therapeutic, herbal therapeutic, or homeopathic services;
   - any Mental and Nervous Disorder, unless specifically allowed by a benefit provision of this Certificate;
   - Substance Abuse, unless specifically allowed by a benefit provision of this Certificate;
   - Treatment, supplies or services provided by, through, or on behalf of any government agency or program; unless payment is required by an
   - Custodial Care, unless specifically allowed by a benefit provision in this Certificate or any rider attached to the Policy (if applicable);
   - elective or cosmetic surgery or procedures, except for reconstructive surgery:
     - incidental to or following surgery for disease, infection or trauma of the involved body part; or
     - due to Congenital Anomaly or disease of a Dependent Child which has resulted in a functional defect;
   - dental care or Treatment, except for:
     - Treatment due to an Injury to sound natural teeth within 12 months of the Accident; and
     - Treatment necessary due to congenital disease or anomaly.