

Symetra (NEW) Hospital Indemnity (replacement for AFLAC)

	Low	High
	Benefit Amounts	
Hospital Stay	\$1,000 ¹	\$2,000 ¹
Intensive Care Unit	\$1,000 ¹	\$2,000 ¹
Substance Abuse Facility	\$200 ¹	\$200 ¹
Mental Health Facility	\$200 ¹	\$200 ¹
Nursing Facility	\$200 ²	\$200 ²
Monthly Premiums		
Employee	\$25.46	\$48.05
Employee + Spouse	\$36.07	\$71.64
Employee + Children	\$32.32	\$59.16
Family	\$38.31	\$72.01

¹ \$200 day 2+, 365 days per person per calendar year

² This benefit is paid only if following a covered hospital stay of at least 3 consecutive days.30 days maximum.

See [BROCHURE](#) for more details

Hospital Indemnity Policy Health Screening Benefit

Covered Health Screenings	
<input type="checkbox"/> Biopsy	<input type="checkbox"/> Fasting blood glucose test
<input type="checkbox"/> Blood test for triglycerides	<input type="checkbox"/> Flexible sigmoidoscopy
<input type="checkbox"/> Bone marrow testing	<input type="checkbox"/> Hemocult stool specimen
<input type="checkbox"/> Breast ultrasound	<input type="checkbox"/> Mammogram
<input type="checkbox"/> CA 125 (blood test for ovarian cancer)	<input type="checkbox"/> Pap test
<input type="checkbox"/> CA 15-3 (blood test for breast cancer)	<input type="checkbox"/> PSA (prostate-specific antigen tests)
<input type="checkbox"/> CEA (blood test for colon cancer)	<input type="checkbox"/> Serum cholesterol test to determine HDL/LDL level
<input type="checkbox"/> Chest x-ray	<input type="checkbox"/> Serum protein electrophoresis (blood test for myeloma)
<input type="checkbox"/> Colonoscopy	<input type="checkbox"/> Stress test on a bicycle or treadmill
<input type="checkbox"/> Chest x-ray	<input type="checkbox"/> Thermography

Benefit pays \$50 for a covered health screening, payable once per calendar year.
Available on Critical Illness/Hospital Indemnity coverage