

EMPLOYEE CHOICE

Critical Illness Plan

Critical Illness supplemental benefit provides additional coverage for medical emergencies like heart attack, stroke, invasive cancer or ESRD. Critical Illness will pay a lump sum benefit as shown in the schedule upon the first diagnosis of a covered condition for each incident (including reoccurrence). Benefits are paid directly to the primary member and can be used however they choose.

Any loss not stated in the benefit information provision is not covered. Any doctor or hospital can be used but services must be received in the United States or its territories. Each critical illness must be diagnosed by a physician qualified to make such diagnosis. Claims for benefits not satisfying all the criteria for diagnosis may be subject to review by an independent physician

consultant. Both individual and family coverages are available and no medical exam or underwriting is required. Dependent children are covered from birth to 26 years old. Spouse includes common law marriage partner, domestic partner or civil union partner if legally recognized in the governing jurisdiction. No deductibles or coinsurance apply to this benefit.

If another employer sponsored critical illness plan was in place prior to this effective date, then pre-existing conditions and waiting period restrictions may be reduced in proportion to the previous policy.

Maximum Basic Benefit Amount	2 Options: \$10,000 and \$20,000
Waiting Period	30 Days (applies to Invasive Cancer Only)
Pre-Existing Conditions Period	12 Months
Benefit Eligibility for Pre-Existing Conditions	12 Months After Effective Date
Benefit Termination Age	On the date the member turns age 65
Covered Spouse	100% of Benefit Amount
Covered Child(ren)	50% of Benefit Amount

WELNESS AND PREVENTATIVE CARE

Wellness Benefit	\$50 once per year per employee and per spouse
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SCHEDULE OF SPECIFIED DISEASE BENEFIT

Heart Attack	100%
Stroke	100%
Invasive Cancer	100%
End Stage Renal Failure	100%
Carcinoma in Situ	25%

RECURRENCE OF SPECIFIED DISEASE BENEFIT

Recurrence Benefits (limit 2)	50% of the initial schedule
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HOSPITAL BILL ERASER

INCLUDED BENEFIT WITHOUT ADDED COST

DO I QUALIFY FOR ASSISTANCE?

Our DIY Worksheet allows members to find out in seconds if they qualify. Better yet, call an HBE Advocate.

1. Enter household income
2. Number of family members
3. State of residence
4. Hospital where care was received or hospital choice when scheduling care
5. Amount the patient owes or \$10,000 default value

The worksheet calculates the discounted amount the member may owe. Also provided is the phone number and downloadable PDFs of the financial assistance application and policy.

HOSPITAL BILL HELPER WORKSHEET

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Texas

Ascension Dell Seton Medical Center a

10000 ▲▼

SUBMIT

YOU OWE: \$0

Contact Us Now To Help You Save Money

☎ 512-324-2039

[Click here to download financial assistance application.](#)

--[Financial assistance application \(Spanish\).](#)

[Click here to download financial assistance policy \(FAP\).](#)

--[Financial assistance policy \(Spanish\).](#)

RETURN TO THE FREE CARE WORKSHEET

HOSPITAL BILL ERASER

WHAT WE DO

We help members receive discounted care at local non-profit hospitals. Our service does more than save money. It puts an end to hospital harassment over unpaid bills members just can't afford to pay.

HOW?

Over 3,000 hospitals operate as non-profit hospitals under IRS tax code 501(r). Under this tax code, non-profit hospitals are required to offer financial assistance to qualifying individuals who reside within the hospital's service area. Assistance is offered in one of three ways:

CHARITABLE CARE (free care): Generally, applies to individuals with household income at or below 200% of Federal Poverty Level (FPL) guidelines.

DISCOUNTED CARE: Generally, individuals with household income between 201-400% of FPL may qualify for care on a sliding scale discount, e.g. 80%, 70%, etc., depending on income level.

CATASTROPHIC/HARDSHIP CARE: This type of assistance is offered to individuals whose total hospital bill equals or exceeds a certain percentage of household income, e.g., 15% or 25%.

HOW TO ACCESS YOUR BENEFIT: All active participants will receive an email from Pratter Health with credentials and instructions on how to access their specific benefit.

CHECK OUT THE HOSPITAL BILL ERASER INSTRUCTIONAL VIDEO [HERE.](#)

LIMITATIONS & EXCLUSIONS

The Employee Choice Critical Illness Plan does not provide benefits for the following

The plan does not provide benefits for:

- Claims for benefits received after the timely filing period of 12 months after first diagnosis.
- Any disease if the covered person was previously diagnosed any time prior to the effective date.
- Any disease first diagnosed within the waiting period as showing in the schedule, immediately following the effective date. If tissue is extracted during the waiting period or prior to the effective date and results in a positive diagnosis of cancer, this will not be a covered condition. The date of a positive diagnosis of cancer will be considered to be the earlier of the date of clinical diagnosis or the date the specimen used to diagnose cancer is taken. If a positive diagnosis of cancer is made and/or cancer is treated within the waiting period or if medical advice is given within the waiting period which leads to the subsequent positive diagnosis of cancer after the waiting period, the member has the option to cancel their plan and received a refund of all contributions paid.
- Any amount in excess of any maximum benefit for covered conditions.
- Diseases or conditions that do not meet the definition of a covered condition in the plan
- Suicide or attempted suicide while sane or insane.
- Intentionally self-inflicted injury.
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state of jurisdiction in which the injury occurs.
- Loss resulting from being under the influence of drugs or narcotics unless administered on the advice of a Physician.
- Any act of war or participation in a riot, insurrection or rebellion.

DID YOU KNOW?

- ▶ Every 34 seconds, someone in the United States has a heart attack.
- ▶ Every 40 seconds, someone in the United States has a stroke.
- ▶ On average in 2016, someone died of stroke every 3 minutes 33 seconds.
- ▶ In 2022, there will be an estimated 1.9 million new cancer cases diagnosed and 609,360 cancer deaths in the United States.

Content Source: National Center for Chronic Disease Prevention and Health Promotion, Division for Heart Disease and Stroke Prevention, American Cancer Society