

Meridio



2024

Affordable Health

Medical Essentials

Dental & Vision

Voluntary Benefits

Meridio

1-855-697-0007

hello@getmeridio.com

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Contents

MEDICAL ESSENTIALS

DENTAL & VISION

VOLUNTARY BENEFITS

Medical Essentials

Affordable health coverage for
Preventive and Wellness care

Plans

MEC CHOICE

MEC CHOICE HI

Partner



Medical Essentials: Plan Comparison

Compares In-Network Services Only. Review Each Plan For Further Details.

TIERS	MEC CHOICE	MEC CHOICE HI
Employee Only	\$162	\$221.78
Employee +Spouse	\$254	\$377.28
Employee + Kids	\$264	\$361.67
Family	\$352	\$513.17

MEDICAL BENEFITS

Wellness and Preventive	Covered at 100%	Covered at 100%
Primary Care Visits	\$15 Copay	\$15 Copay
Specialist Visits	\$15 Copay	\$15 Copay
Urgent Care Visits	\$50 Copay	\$50 Copay
Lab Services	\$50 Copay	\$50 Copay
X-Rays	\$50 Copay	\$50 Copay

RX BENEFITS

Generic Rx	Tier 1: \$10 Copay	Tier 1: \$10 Copay
	Tier 2: \$25 Copay	Tier 2: \$25 Copay
Brand Rx	Tier 1: \$50 Copay	Tier 1: \$50 Copay
	Tier 2: \$75 Copay	Tier 2: \$75 Copay

VIRTUAL HEALTH BENEFITS

Telemedicine	\$0 Copay	\$0 Copay
Virtual Behavioral Health	\$50 Copay - 3x / year	\$50 Copay - 3x / year

MEC COMPANION CARD

MEC Companion Card	Dental, Vision, Durable Equipment, Fitness Discounts, Hearing Aids, Diabetic Supplies
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HOSPITAL INDEMNITY (HI)

Admission Benefit	-	\$2,500 - 1x year
Confinement Benefit	-	\$200/day - 30x year
Inpatient Rehabilitation	-	\$100/day - 15x year
Inpatient Surgery Benefit	-	\$1,000/day - 1x year
Outpatient Surgery Benefit	-	\$750/\$1500 - 1x year
Ambulance Benefit	-	\$500 air transportation - 2x year
		\$200 Ground Transportation - 2x year
Diagnostic Procedure	-	\$250/day - 1x year
Emergency Room	-	\$100/day - 2x year
Health Screenings	-	\$50/day - 1x year

LIFE INSURANCE

Life Insurance	-	\$10,000
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Costs Include Plan Document, Multplan Network, ID Cards, Enrollment Guides, Claims Adjudication, SBCs And COBRA Administration. MEC Preventive Benefits Are Covered 100% For In Network Services. Office Visits, Specialist Visits, Urgent Care, Lab And X-Rays Are All Member Copays. Services Are Repriced Through The Multplan Network.

EXCLUSIONS

- Abortion
- Acupuncture/spinal manipulation
- Advanced diagnostic imaging including CT/PET scans and MRIs
- Anesthesia
- Biofeedback
- Biopsies
- Chemical dependency treatment
- Chemotherapy/radiation
- Childbirth/delivery facility services
- Childbirth/delivery professional services
- Chiropractic care
- Cochlear implants
- Cosmetic surgery
- Dental care
- Diabetic supplies including insulin injectors and pumps
- Diagnostic colonoscopies
- Diagnostic mammograms (preventive mammograms are covered)
- Diagnostic testing including non-preventive lab work
- Dialysis
- Durable medical equipment including boots, canes, crutches, splints, prosthetics, orthotics, hospital beds, oxygen equipment, sleep apnea machines, walkers, wheelchairs and scooters
- Electrocardiogram
- Electrocardiography
- Emergency room care
- Emergency transportation including ambulance
- Experimental drugs, procedures or studies
- Eye care
- Foot care
- Genetic testing including breast cancer (BRCA)
- Habilitation services
- Hearing aids
- Home health care
- Hospice Services
- Hospitalization including facility fees and physician/surgeon fees
- Infertility treatment
- Long-term care
- Medical care outside the United States
- Mental health services
- Naturopathic services
- Non-preventive therapy and tests
- Nutritional supplies, vitamins or supplements
- Occupational therapy
- Out-of-network services
- Outpatient laboratory services in hospital setting
- Outpatient surgery including facility fees and physician/surgeon fees
- Pathology
- Physicals

EXCLUSIONS (continued)

- Private duty nursing
- Rehabilitation services including physical therapy or substance abuse
- Services for sexual dysfunction including drugs, supplies and therapy
- Sex change services including drugs, supplies and therapy
- Sleep studies
- Skilled nursing care
- Specialty prescription drugs
- Strength and performance services including devices and drugs
- Surgical procedures including transplants
- TMJ and orthognathic services
- Ultrasounds
- Weight loss drugs, procedures (including gastric bypass surgery and lap banding), programs and supplies

LIMITATIONS

- Behavioral health visits are limited to 3 per plan year at the \$50 copay.
- Birth control implants including intrauterine devices (IUD) insertion/removal - 1 per plan year unless due to medical necessity
- Breast Cancer Genetic Testing (BRCA) - counseling only; no testing
- COVID-19 testing is limited to FFCRA¹ and CDC² guidelines or due to medical necessity. Testing is also limited to outpatient settings excluding emergency facilities and/or hospitals.
- Prescription drug coverage is limited to the formulary list. For additional information visit <https://www.sbmabenefits.com/smithrxformulary>
- Preventive breast cancer mammography Screening - 1 per plan year
- Routine preventive/wellness visits (men, women and children) - 1 per plan year
- Timely filing on claims is 12 months from the date of service. Claims not received within the timely filing limit will be denied.

¹Families First Coronavirus Response Act

²Centers for Disease Control and Prevention

DEFINITIONS

- Counseling - providing patients with advice or education about a condition or disease and the potential treatment options available
- Medical Necessity - determined to be of need as evidenced by documented diagnosis from an individual's attending healthcare provider
- Screening - a method of identifying a medical condition or disease without the existence of any signs or symptoms
- Testing - a process or procedure performed to detect, diagnose or monitor a condition or disease based on a patient's illness, injury or symptoms

THIS LIST IS NOT INTENDED TO BE A COMPLETE LIST OF EXCLUSIONS. ADDITIONAL EXCLUSIONS/LIMITATIONS MAY APPLY. ONLY THE SERVICES LISTED UNDER THE SUMMARY OF BENEFITS ARE COVERED BY THE PLAN. AN OMISSION OF A NON-COVERED SERVICE FROM THE EXCLUSIONS LIST DOES NOT IMPLY THE SERVICE IS COVERED BY THE PLAN. MEMBERS AND PROVIDERS ARE ADVISED TO CONFIRM IF SERVICES ARE COVERED BY THE PLAN PRIOR TO THE SERVICES BEING RENDERED.

Any claims received for excluded services, or outside the coverage limitations listed above, will be denied and members will be responsible for the full out-of-pocket expense of the claim.

Medical Essentials:

How to Use Your Benefits



Access Your Benefits

ID Card: You should receive your cards at the member address on file.

Telemedicine: Call 1.855.373.7450 to activate. Provide your name and DOB and an email will be sent to you to create a login.

MEC Companion: Register at www.WellCardSavings.com with Group ID: MECPLUS.

If you have trouble with your MEC plan, call (888) 505-7724 option 2.

Find Your Provider

To locate providers participating in the MultiPlan® PHCS network call 866-918-7427 or visit www.multiplan.com.



1. Click "Find a Provider" located in the top right-hand corner of the page and follow the steps below.
2. Click on the green "Select Network" button.
 - MEC Ultimate – select "Preventive only"
 - MEC Ultimate HI – select "Specifics"

FILL A PRESCRIPTION

[Review the RX Benefit Summary here](#)

FILE A CLAIM

Submit claims to:

Electronic Claims Payer ID: SBMCO | **Clearing House:** Trizetto (800) 556-2231

SBMA | PO Box 2369 | Montclair, CA. 91763 | (888) 505-7724 option 3 | claims@sbmamec.com

HOW TO USE HOSPITAL INDEMNITY PLAN (FOR ULTIMATE HI MEMBERS)

Hospital Indemnity benefits help pay for out-of-pocket costs associated with being hospitalized in addition to your medical coverage. Payments are made directly to you, even if you did not actually incur any out-of-pocket expenses.

Step 1: Submit a Claim form and Invoice/Bill from your hospital visit

Step 2: A check with the amount listed on your benefit summary will be made out to you.

The hospital bill is the member's responsibility. The check may be used by the member to help pay that bill or other expenses as the member sees fit. Options Plus does not coordinate or submit any payment to the hospital.



WELLNESS & PREVENTIVE SERVICES

100% COVERED SERVICES

Preventive benefits for adults

- Abdominal Aortic Aneurysm one-time screening for men of specified ages who have ever smoked
- Alcohol Misuse screening and counseling
- Aspirin use to prevent cardiovascular disease and colorectal cancer for adults 50 to 59 years with a high cardiovascular risk
- Blood Pressure screening
- Cholesterol screening for adults of certain ages or at higher risk
- Colorectal Cancer screening for adults 45 to 75
- Depression screening
- Diabetes (Type 2) screening for adults 40 to 70 years who are overweight or obese
- Diet counseling for adults at higher risk for chronic disease
- Falls prevention (with exercise or physical therapy and vitamin D use) for adults 65 years and over living in a community setting
- Hepatitis B screening for people at high risk
- Hepatitis C screening for adults age 18 to 79 years
- HIV screening for everyone age 15 to 65, and other ages at increased risk
- PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adults at high risk for getting HIV through sex or injection drug use
- Immunizations for adults — doses, recommended ages, and recommended populations vary: Chickenpox (Varicella), Diphtheria, Flu (influenza), Hepatitis A, Hepatitis B, Human Papillomavirus (HPV), Measles, Meningococcal, Mumps, Whooping Cough (Pertussis), Pneumococcal, Rubella, Shingles, and Tetanus
- Lung cancer screening for adults 55 to 80 at high risk for lung cancer because they're heavy smokers or have quit in the past 15 years
- Obesity screening and counseling
- Sexually Transmitted Infection (STI) prevention counseling for adults at higher risk
- Statin preventive medication for adults 40 to 75 years at high risk
- Syphilis screening for all adults at higher risk
- Tobacco use screening for all adults and cessation interventions for tobacco users
- Tuberculosis screening for certain adults with symptoms at high risk

Preventive benefits for women

- Bone density screening for all women over age 65 or women age 64 and younger that have gone through menopause
- Breast cancer genetic test counseling (BRCA) for women at higher risk (counseling only; not testing)
- Breast cancer mammography screenings: every 2 years for women over 50 and older or as recommended by a provider for women 40 to 49 or women at higher risk for breast cancer
- Breast Cancer chemoprevention counseling for women at higher risk
- Breastfeeding comprehensive support and counseling from trained providers, and access to breastfeeding supplies, for pregnant and nursing women
- Birth control: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, as prescribed by a health care provider for women with reproductive capacity (not including abortifacient drugs). This does not apply to health plans sponsored by certain exempt "religious employers."
- Cervical Cancer screening: Pap test (also called a Pap smear) for women 21 to 65
- Chlamydia infection screening for younger women and other women at higher risk
- Diabetes screening for women with a history of gestational diabetes who aren't currently pregnant and who haven't been diagnosed with type 2 diabetes before
- Domestic and interpersonal violence screening and counseling for all women

Preventive benefits for women (continued)

- Folic acid supplements for women who may become pregnant
- Gestational diabetes screening for women 24 weeks pregnant (or later) and those at high risk of developing gestational diabetes
- Gonorrhea screening for all women at higher risk
- Hepatitis B screening for pregnant women at their first prenatal visit
- Maternal depression screening for mothers at well-baby visits
- Preeclampsia prevention and screening for pregnant women with high blood pressure
- Rh Incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Sexually Transmitted Infections counseling for sexually active women
- Expanded tobacco intervention and counseling for all pregnant tobacco users
- Urinary incontinence screening for women yearly
- Urinary tract or other infection screening
- Well-woman visits to get recommended services for women

Preventive benefits for children

- Alcohol, tobacco, and drug use assessments for adolescents
- Autism screening for children at 18 and 24 months
- Behavioral assessments for children: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Bilirubin concentration screening for newborns
- Blood Pressure screening for children: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Blood screening for newborns
- Depression screening for adolescents beginning at age 12
- Developmental screening for children under age 3
- Dyslipidemia screening for all children once between 9 and 11 years and once between 17 and 21 years for children at higher risk of lipid disorders
- Fluoride supplements for children without fluoride in their water source
- Fluoride varnish for all infants and children as soon as teeth are present
- Gonorrhea preventive medication for the eyes of all newborns
- Hearing screening for all newborns; and regular screenings for children and adolescents as recommended by their provider
- Height, weight and body mass index (BMI) measurements taken regularly for all children
- Hematocrit or hemoglobin screening for all children
- Hemoglobinopathies or sickle cell screening for newborns
- Hepatitis B screening for adolescents at higher risk
- HIV screening for adolescents at higher risk
- Hypothyroidism screening for newborns
- PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adolescents at high risk for getting HIV through sex or injection drug use
- Immunizations for children from birth to age 18 — doses, recommended ages, and recommended populations vary: Chickenpox (Varicella); Diphtheria, Tetanus, and Pertussis (DTaP); Haemophilus influenza type B; Hepatitis A; Hepatitis B; Human Papillomavirus (HPV); Inactivated Poliovirus; Influenza (flu shot); Measles; Meningococcal; Mumps; Pneumococcal; Rubella; and Rotavirus
- Lead screening for children at risk of exposure
- Obesity screening and counseling
- Oral health risk assessment for young children from 6 months to 6 years
- Phenylketonuria (PKU) screening for newborns
- Sexually Transmitted Infection (STI) prevention counseling and screening for adolescents at higher risk
- Tuberculin testing for children at higher risk of tuberculosis: Age 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
- Vision screening for all children
- Well-baby and well-child visits



Telemedicine

Health Care Made Easy

Our telemedicine benefit provides you and your family access to board certified physicians around the clock (24/7/365) via telephone or secure video. Telemedicine physicians can give advice, diagnose or treat illness, and even prescribe medication right over the phone. With healthcare costs rising, an office visit with a PCP or Urgent Care Center can range from \$155 to upwards of \$300, and an ER visit can average almost \$1,000. With this benefit, there is no cost to you or your family for a consultation.

1 ACTIVATE YOUR ACCOUNT

Activate online or by calling member services. Once activated, you will need to setup your member profile and complete your electronic health record.

2 REQUEST A CONSULT

Login to your account online or call member services to request a consult anytime 24/7.

3 RECEIVE CARE

Receive diagnosis and treatment, giving you quality care and peace of mind wherever you are.

Common Conditions Treated

- Allergies
- Arthritic Pain
- Bronchitis
- Cold/Flu
- Conjunctivitis
- Sprains/Strains
- Respiratory Infections
- Sinus Infections
- Upset Stomach
- Urinary Tract Infections
- Diarrhea
- Ear Infections
- Gastroenteritis
- Headaches
- Insect Bites, etc.

**Talk to a Doctor
Anytime Day or Night...
For Free.**





Behavioral Health Getting Help Just Got Easier

Our Behavioral Health Benefit makes it easy to receive therapy and counseling from the comfort and privacy of your own home or office.

It can be difficult to wait days or weeks until your next appointment. Speak with one of our licensed psychiatrists or therapists online or by app.

WHAT WE TREAT

We provide care for many of the most common behavioral health concerns with the added benefits of privacy and convenience.

- Abuse
- Codependency
- Domestic Violence
- OCD
- Addiction
- Conduct Disorder
- Eating Disorders
- Parenting Issues
- ADHD/ADD
- Cognitive Behavioral
- Grief & Loss
- Relationships
- Anger Management Therapy
- LGBT Issues
- Sexuality
- Anxiety & Stress
- Depression & Mood
- Med. Management
- Trauma & PTSD
- Bipolar Disorder
- Divorce
- Men's & Women's Issues
- And more

HOW IT WORKS

1 LOG IN

LOG IN TO YOUR ACCOUNT

2 SCHEDULE AN APPOINTMENT

SCHEDULE AN APPOINTMENT WITH
THE BEHAVIORAL HEALTH PROVIDER
OF YOUR CHOICE

3 CHAT

VIDEO CHAT WITH YOUR PROVIDER
AND RECEIVE A PERSONALIZED
TREATMENT PLAN.

When I show my **MEC
Companion Card...**

my card
shows me the **Savings!**



Dental – save up to 50%

Accepted at over 80,000 provider locations nationwide, and covers all dental services and specialties, including orthodontia. Savings can be as high as 50%, and there is no limitation on services or use.



Vision – save up to 50%

Accepted by over 11,000 OUTLOOK vision providers. Cardholders receive up to 50% savings on lenses, frames, and other vision needs.



MRI & Imaging – save up to 75%

Members receive concierge appointment service and enjoy savings up to 75% and more on MRI, PET, and CT scans, as well as other imaging services at over 4,000 locations nationwide.



Lab – save up to 50%

Members save up to 50% using the online search tool to locate a lab and order their test. Actual savings are displayed immediately. Test results are available within 48-96 hours.



Hearing – save up to 70%

Members receive a free hearing test and up to 70% discount on hearing aids at 2,200 providers nationwide.



Diabetic Care Services – save up to 70%

A full line of diabetes testing supplies are delivered directly to the member's home.



Vitamins – save 5%

A wide range of vitamin and mineral supplements are delivered directly to the member's home at discounted rates.



Daily Living Products – save up to 10%

A wide range of medical supplies, safety equipment, and health products are delivered directly to the member's home at discounted rates.

Dental Vision

Plans

Preventive Dental & Vision

Comprehensive Dental &
Vision

Partner



MONTHLY	PREVENTIVE DENTAL + VISION		COMPREHENSIVE DENTAL + VISION	
• Employee Only		\$30		\$50
• Employee + Spouse		\$55		\$98
• Employee + Child(ren)		\$60		\$92
• Family		\$98		\$156

DENTAL BENEFITS	In-Network	Out-Of-Network	In-Network	Out-Of-Network
<ul style="list-style-type: none"> Preventive & Diagnostic Exams; Cleanings; Bitewing X-Rays; Full Mouth X-Rays; Fluoride Treatments (Frequency limitations apply); Space Maintainers 	100%	100%	100%	80%
<ul style="list-style-type: none"> Basic Fillings; Simple Extractions; Oral Surgery; Periodontics; Root Canals (Endodontics); Sealants 	-	-	80%	50%
<ul style="list-style-type: none"> Major Crowns & Gold Restorations; Bridgework; Full & Partial Dentures; Repair of Dentures; Implants 	-	-	50%	50%
• Annual Maximum (per person)	\$1 000	\$1 000	\$1 500	\$1 500
• Annual Deductible				
Per person	None	None	\$50	\$100
Family Maximum	None	None	\$150	\$300
• Waived For	Preventive & Diagnostic			

DENTAL PROVIDER LOOKUP

Visit [Delta Dental](#)

Specialty: Choose one or Choose Any | Your Plan: Delta Dental PPO

Search by Current Location: No, Enter Zip Code | Find Dentists



DENTAL PLAN NOTES

Carryover MaxSM from Delta Dental allows you to increase your benefits.

This feature allows you to carry over a portion of your unused standard annual maximum benefit limit into the next year, and beyond. You can accumulate part of your unused benefit dollars from a healthy year and use it for larger, more expensive procedures in the future- such as bridges, crowns, and root canals.

The benefits outlined above are a summary of the quoted plan design. Full details on the plan of benefits and applicable policy provisions, including limitations and exclusions, are provided in the group contract.

BENEFITS

- | | |
|---------------------------|------------|
| • Network/Plan | VSP Choice |
| • Copay (Exams/Materials) | \$10/\$25 |

SERVICE FREQUENCIES

- | | |
|------------------|----------------------|
| • Eye Exams | Once Every 12 months |
| • Lenses Benefit | Once Every 12 months |
| • Contact Lenses | Once Every 12 months |
| • Frames | Once Every 24 months |

REIMBURSEMENT SCHEDULE

	In-Network (Copay)	Out-Of-Network (Before Copay)
• Eye Exams	\$10	\$45 max
• Contact lens fit/evaluation	\$60	--
• Lenses Benefit		
Single Vision	\$25	\$30 max
Bifocal	\$25	\$50 max
Trifocal	\$25	\$65 max
Lenticular	\$25	\$100 max
• Contact Lenses Benefit		
Medically Necessary	Covered (Copay Waived)	\$210 max
Elective Materials	\$130 max	\$105 max
• Frames Benefit	\$130 max \$70 Walmart/Sam's Club/Costco	\$70 max

VISION PROVIDER LOOKUP

Visit: <https://www.vsp.com/eye-doctor>

Search by Location, Office Name, or Doctor Name





Connect With Your Benefits On MySmile®

MySmile offers free, easy-to-use tools that make navigating your Delta Dental benefits a whole lot simpler.



Benefits Information with a Click (or Tap)

Access MySmile from your computer or mobile device to securely:

- View your coverage
- Check on your dental claims
- View and print your ID card
- Review your treatment history
- Find a dentist
- Get cost estimates
- And more

Visit our Website or Download our App

How to Register:

1. Visit DeltaDentalNJ.com; click “Sign In or Register” on the top right corner of the homepage.
2. Click “Register Now” and enter your contact information.
3. Create a username and password when prompted.
4. Read and check the box to “agree to Terms of Use” for our website.
5. Click “Register”; you will be emailed a code within 24 hours to the email address you used when registering.
6. Enter the code when prompted.
7. Once you enter the code, you will be able to access your account using your newly created username and password!



Download on the
App Store

GET IT ON
Google Play

The subscriber and any adult dependents on the plan can create their account with or without an ID number.

Voluntary Benefits

Voluntary Benefits complement health coverage, helping you save money when it matters most.

Plans

ACCIDENT

CRITICAL ILLNESS

DISABILITY

HOSPITAL CONFINEMENT

TERM LIFE INSURANCE

Partner

Colonial Life.





Accident Insurance



Talk with your
Colonial Life benefits counselor
to learn more.

ColonialLife.com

Accidents can happen to anyone

You never know when you or someone you love could get hurt in an accident. And accidents come with costs, such as emergency room fees, doctor's bills and lost income from missing work. Even if you have good health insurance, deductibles and co-pays can really add up.

With accident insurance from Colonial Life, you can receive benefits to help with the expenses of a covered accident. This financial protection can help you focus on what really matters: healing.

With this coverage:

- A set amount is payable based on the injury you suffer and the treatment you receive.
- You do not need to answer medical questions or have a physical exam to get basic coverage.
- Unlike workers' compensation, which only covers on-the-job injuries, accident insurance covers injuries that happen on-the-job or off-the-job.
- Coverage is available for you, your spouse and eligible dependent children.

*If guaranteed-issue coverage is available, you won't have to answer health questions.
For more details, talk with your Colonial Life benefits counselor.*

ACCIDENT POLICIES PROVIDE LIMITED BENEFITS.

The policies or their provisions may vary or be unavailable in all states. The policies have exclusions and limitations which may affect any benefits payable. See the actual policy or your Colonial Life representative for specific provisions and details of availability.

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Ac



Critical illness insurance



Talk with your
Colonial Life benefits counselor
to learn more.

ColonialLife.com

You can't predict an illness, but you can be prepared

No matter where you are in life, you never know when you or a loved one could experience a critical illness, such as a heart attack or stroke. Medical advancements and early detection are helping many people survive critical illnesses. However, preventive tests and treatment can lead to increased medical expenses, and your health insurance may not cover these costs.

Critical illness insurance helps supplement your major medical coverage by providing a lump-sum benefit that you can use to pay the direct and indirect costs related to a covered critical illness.

With this coverage:

- Benefits are paid directly to you, unless you specify otherwise.
- You may receive additional benefits if you're diagnosed with more than one critical illness.
- Coverage options are available for you, your spouse and eligible dependent children.

*If guaranteed-issue coverage is available, you won't have to answer health questions.
For more details, talk with your Colonial Life benefits counselor.*

CRITICAL ILLNESS POLICIES PROVIDE LIMITED BENEFITS.

The policies or their provisions may vary or be unavailable in all states. The policies have exclusions and limitations which may affect any benefits payable. See the individual policy or the group certificate, as applicable, or your Colonial Life representative for specific provisions and details of availability.



Disability insurance



Help protect your income

You never know when a disability could impact your way of life. Fortunately, there's a way to help protect your income. If a covered accident or sickness prevents you from earning a paycheck, disability insurance from Colonial Life can provide a monthly benefit to help you cover your ongoing expenses.

Disability insurance from Colonial Life helps protect your income, so you can have help paying the bills while you recover from a covered accident or sickness.

With this coverage:

- You can choose the amount of your disability benefits, subject to income.
- You're paid regardless of any insurance you may have with other companies.
- Benefits are paid directly to you, and you can use these benefits however you choose.

Talk with your
Colonial Life benefits counselor
to learn more.

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ColonialLife.com

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Hospital Confinement Indemnity Insurance



Get help with rising health care costs

If you're admitted to the hospital because of an accident or sickness, it's important to focus on your recovery – not your finances. That's easier said than done if you have costly co-payments, deductibles and other expenses coming your way.

Hospital confinement indemnity insurance from Colonial Life can help you pay for medical expenses that your health insurance may not cover.

With this coverage:

- Benefits are paid directly to you (unless you specify otherwise) and can be used as you see fit.
- Coverage is available for you, your spouse and eligible dependent children.
- You're paid regardless of any other insurance you may have with other companies.

Talk with your
Colonial Life benefits counselor
to learn more.

*If guaranteed-issue coverage is available, you won't have to answer health questions.
For more details, talk with your Colonial Life benefits counselor.*

HOSPITAL CONFINEMENT INDEMNITY POLICIES PROVIDE LIMITED BENEFITS.

ColonialLife.com

The policies or their provisions may vary or be unavailable in all states. The policies have exclusions and limitations which may affect any benefits payable. See the actual policy or your Colonial Life representative for specific provisions and details of availability.

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Hc



Term Life Insurance



Life insurance protection when you need it most

Life insurance needs change as life circumstances change. You may need more coverage if you're getting married, buying a home or having a child.

Term life insurance from Colonial Life provides protection for a specified period of time, typically offering the greatest amount of coverage for the lowest initial premium. This fact makes term life insurance a good choice for supplementing cash value coverage during life stages when obligations are higher, such as while children are young. It's also a good option for families on a tight budget – especially since you can convert it to a permanent cash value plan later.

With this coverage:

- A beneficiary can receive a benefit that is typically free from income tax.
- The policy's accelerated death benefit can pay a percentage of the death benefit if the covered person is diagnosed with a terminal illness.
- You can convert it to a Colonial Life cash value insurance plan, with no proof of good health, to age 75.

Talk with your
Colonial Life benefits counselor
to learn more.

For more details, talk with your Colonial Life benefits counselor.

ColonialLife.com

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Making Health Affordable

Meridio