

Voluntary Indemnity Plan

A HOSPITAL CONFINEMENT INDEMNITY POLICY

American Family Life Assurance Company
of Columbus (AFLAC)

Without it, no insurance is complete.

Level 1

Plan Benefits

- Hospital Confinement
- Short-Stay
- Surgical
- Heart Attack,
Stroke, Coma and
Paralysis
- Ambulance



Voluntary Indemnity Plan

Policy Form A-44100-TX

HOSPITAL CONFINEMENT BENEFIT

AFLAC will pay the amount shown when a covered person is charged* for required hospital confinement of 14 or more hours for a covered sickness or injury. **No lifetime maximum.**

- ◆ **\$50 per day for Days 1 through 7**
- ◆ **\$100 per day for Days 8 through 30**
- ◆ **\$200 per day for Days 31 through 180**

Benefits are not payable for days beyond the 180th day in a period of hospital confinement.

**Treatment or confinement in a U.S. government hospital does not require a charge for benefits to be payable.*

SHORT-STAY BENEFIT – \$50

AFLAC will pay \$50 when a covered person is charged for a bed due to a medically necessary confinement in a hospital for a period of at least six but less than 14 hours and is not eligible for any other benefit in the policy. **This benefit is not payable for confinement or treatment in an emergency room** and is payable only once per 24-hour period. **No lifetime maximum.**

SURGICAL BENEFIT – \$50 TO \$1,000

AFLAC will pay \$50 to \$1,000 when a covered person has surgery performed for a covered sickness or injury in a hospital or ambulatory surgical center. Only one benefit is payable per 24-hour period for surgery even though more than one surgical procedure may be performed. The highest eligible benefit will be paid. Surgical Benefits are not payable for surgery performed in a doctor's or dentist's office, clinic or other such location. Benefits are not payable within the first 12 months of the effective date of this policy for elective surgery that is not medically necessary. See schedule in policy. (Surgery performed but not listed in the schedule will be paid according to the amount shown for the surgery most similar in severity and gravity.) **No lifetime maximum.**

AMBULANCE BENEFIT – \$100/\$1,000

AFLAC will pay \$100 for ground ambulance and **\$1,000** for air ambulance if, due to a covered sickness or injury, a covered person requires transportation by a licensed professional ambulance service to or from a hospital. This benefit is limited to two trips per calendar year, per covered person. **No lifetime maximum.**

WAIVER OF PREMIUM BENEFIT

After you have received hospital confinement benefits for 30 days in a period of hospital confinement, AFLAC will waive from month to month any premium(s) falling due during your continued hospital confinement. When confinement benefits are no longer being paid, premium payments must be resumed.

HEART ATTACK, STROKE, COMA AND PARALYSIS BENEFIT – \$1,000/\$500

- ◆ **AFLAC will pay \$1,000** the first time a covered person is diagnosed as having had any one of the following, whichever occurs first: heart attack, stroke, coma for at least seven days, or paralysis for at least 30 days. We will pay this benefit once per covered person. **Lifetime maximum of \$1,000 per covered person.**
- ◆ **AFLAC will pay \$500** when a covered person is later diagnosed as having had any one of the following, whichever occurs first: heart attack, stroke, coma for at least seven days, or paralysis for at least 30 days. The heart attack, stroke, coma or paralysis must occur more than 180 days after the above benefit becomes payable. **This \$500 benefit will again become payable** for a diagnosis occurring more than 180 days after it was last paid. The heart attack, stroke, coma or paralysis must occur while coverage is in force and is subject to a 30-day waiting period. **No lifetime maximum.**

CONTINUATION OF COVERAGE BENEFIT

AFLAC will waive all monthly premium due for the policy and riders for up to two months if you meet all of the following conditions: 1) Your policy has been in force for at least six months; 2) We have received premiums for at least six consecutive months; 3) Your premiums have been paid through payroll deduction and you leave your employer for any reason; 4) You or your employer notifies us in writing within 30 days of the date your premium payments cease due to your leaving employment; and 5) You re-establish premium payments through your new employer's payroll deduction process or direct payment to AFLAC. You will again become eligible to receive this benefit after you re-establish your premium payments through payroll deduction for a period of at least six months and we receive premiums for at least six consecutive months. *Payroll deduction* means your premium is remitted to AFLAC for you by your employer through a payroll deduction process.

PRE-EXISTING CONDITIONS

A sickness or injury for which, within the 12-month period before the effective date of coverage, medical advice, consultation or treatment was recommended or received, or for which symptoms existed that would ordinarily cause a prudent person to seek diagnosis, care or treatment. Care or treatment caused by a pre-existing condition will not be covered unless it begins more than six months after the effective date of coverage.

A *sickness* is an illness, disease, or disorder diagnosed or treated 30 days or more after the effective date of coverage and while coverage is in force. It also includes a pregnancy which starts more than 30 days after your effective date of coverage and while coverage is in force. A sickness that is diagnosed or treated within the 30-day waiting period will not be covered for 12 months from the effective date of coverage.

AFLAC's Voluntary Indemnity Plan pays cash benefits directly to you, unless assigned, regardless of any other insurance you may have.

GUARANTEED-RENEWABLE

Guaranteed-renewable for your life subject to the company's right to change applicable table of premium rates by class upon any renewal date.

EFFECTIVE DATE

The date shown in the Policy Schedule, not the date the application is signed. Payroll rate may be retained after one month's premium payment on payroll deduction.

FAMILY COVERAGE

Includes the insured; spouse; and dependent, unmarried children under age 25. Newborns are automatically insured as any other family member. One-parent coverage includes the insured and all of the insured's unmarried, dependent children under age 25.

GRACE PERIOD

A grace period of 31 days will be granted for the payment of each premium falling due after the first premium. During the grace period, this policy shall continue in force.

PREMIUMS

Premiums are subject to change.

	Annual	Semiannual	Quarterly	Monthly
Policy:	\$ _____	\$ _____	\$ _____	\$ _____
Riders:				
A-44150:	\$ _____	\$ _____	\$ _____	\$ _____
A-44250:	\$ _____	\$ _____	\$ _____	\$ _____

The person to whom this policy is issued is permitted to return the policy to AFLAC within 30 days of its delivery and to have the premium paid refunded.

LIMITATIONS AND EXCLUSIONS

*The sickness benefits of this policy are subject to a 30-day waiting period. Benefits are not payable for any sickness that is diagnosed or treated before coverage has been in force 30 days from the effective date as shown in the Policy Schedule or any sickness diagnosed or treated prior to the effective date of this policy. If the period of hospital confinement follows a previously covered confinement, it will be considered a continuation unless the later confinement is the result of an entirely unrelated sickness or injury or the confinements are separated by 30 days or more. **Newborn children born within the first ten months of the policy effective date will be subject to a 30-day waiting period for sickness.***

This policy does not cover losses caused by or resulting from: ♦ intentionally self-inflicting bodily injury or attempting suicide; ♦ participating in any illegal activity that is classified as a felony (the term felony is as defined by the law of the jurisdiction in which the activity takes place); ♦ being exposed to war or any act of war, declared or undeclared, or service in the armed forces; ♦ having treatment for a mental or nervous disorder without demonstrable organic disease; alcoholism or drug dependency; any loss sustained or contracted due to a covered person's being intoxicated or under the influence of alcohol, drugs or any narcotic unless administered on the advice of a physician and taken according to the physician's instructions (the term intoxicated refers to that condition as defined by the law of the jurisdiction in which the injury or cause of the loss occurred); ♦ having cosmetic surgery that is not medically necessary; ♦ having elective surgery that is not medically necessary within the first 12 months of the effective date of this policy; ♦ being pregnant on the effective date of this policy (complications of such pregnancy will be covered to the same extent as a sickness); ♦ routine nursing or routine well-baby care for a newborn child; ♦ being hospitalized before the effective date of coverage.

Hospital does not include any institution, or part thereof, used as: an ambulatory surgical center; a hospice unit (including any bed designated as a hospice bed or a swing bed); a convalescent home; a rest or nursing facility; a psychiatric unit; an extended-care facility; a skilled nursing facility; or a facility primarily affording custodial, educational care, or care or treatment for persons suffering from mental disease or disorders, or care for the aged, drug addicts or alcoholics.

Refer to the policy, riders, and outline of coverage for complete details, limitations, and exclusions.

This brochure is for illustration purposes only.



Without it, no insurance is complete.

AFLAC is ...



- Rated “AA” in insurer financial strength by Standard & Poor’s (April 2004), “Aa2 (Excellent)” in insurer financial strength by Moody’s Investors Service (March 2003), “A+ (Superior)” by A.M. Best (June 2004), and “AA” in insurer financial strength by Fitch, Inc. (December 2003).*
- Named by *Fortune* magazine to its list of “America’s Most Admired Companies” for the fourth consecutive year in March 2004.
- A premier provider of payroll-deducted benefits with more than 300,000 payroll accounts nationally (company statistics, May 29, 2004).
- Outstanding in claims service, with most claims paid in just three or four days (company statistics, March 12, 2004).
- Included by *Forbes* magazine in its annual Platinum 400 List of “America’s Best Big Companies” since 2000 (January 2004).
- Named by *Fortune* magazine to its list of “The 100 Best Companies to Work For in America” for the sixth consecutive year in January 2004.

**Ratings refer only to the overall financial status of AFLAC and are not recommendations of specific policy provisions, rates, or practices.*



Your local AFLAC representative

**1-800-99-AFLAC
(1-800-992-3522)**

**En español:
1-800-SI-AFLAC
(1-800-742-3522)**

Visit our Web site at www.aflac.com.