

Underwritten by

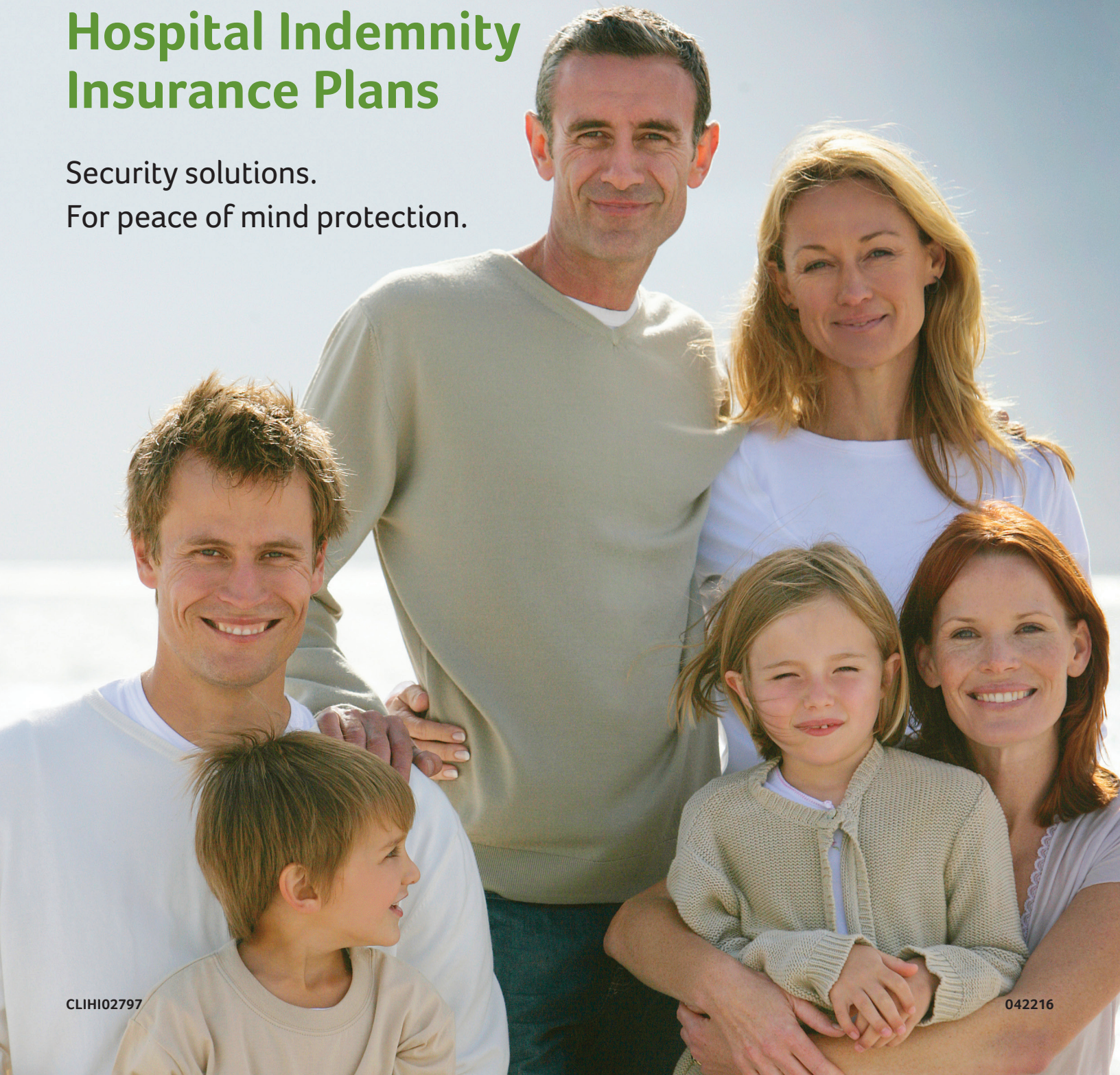
**Continental Life Insurance Company
of Brentwood, Tennessee**

An Aetna Company

aetna®

Protection SeriesSM — **Hospital Indemnity Insurance Plans**

Security solutions.
For peace of mind protection.



CLIH102797

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Our commitment

Continental Life Insurance Company of Brentwood, Tennessee, an Aetna Company headquartered in the Nashville, Tennessee area, has an unwavering commitment to providing the best personal service possible, quick claims payment, quality products with solid financial backing, and helpful, friendly associates with extensive knowledge and experience. For over 30 years, policyholders have relied on our company to be there when they need us. We take those obligations very seriously and everything we do is focused on fulfilling our commitments in a timely, hassle-free manner – so you can have the best experience possible. For more information, go to www.aetnaseniorproducts.com.

Notice to buyer:

- This is not a Medicare Supplement policy.
- This is not a Major Medical policy.
- This policy may not cover all of your medical or health care expenses.
- This policy should not be purchased as a substitute for Medicare or Medicare related health plans.
- This is a supplement to health insurance and is not a substitute for major medical coverage. Lack of major medical coverage (or other minimum essential coverage) may result in an additional payment with your taxes.

This brochure is an illustration for policy form CLIHIPL14 and is not a contract of insurance. For complete details of all provisions or benefits, please read your policy carefully.

Security, stability, service...and help to pay for out-of-pocket costs associated with medical expenses.

That's what you can expect when you choose a Hospital Indemnity insurance plan from Continental Life Insurance Company of Brentwood, Tennessee, an Aetna Company.

The cost of healthcare



If you've had medical treatments recently, you know that health care costs can be expensive.

Most insurance plans don't cover all of the necessary treatments

and leave medical expenses that have to be paid from out-of-pocket. Unless you have an insurance plan that accounts for the extra expenses associated with health care, you could end up tapping into your savings to pay for outstanding medical costs.



Protect your savings

Indemnity means "protection or security against damage or loss."*

Hospital Indemnity

insurance is designed to do just that – help protect your savings, your security for the future. This insurance can offset the cost of deductibles, co-pays, and unexpected or additional expenses incurred but not covered by your other insurance plans. Benefits are paid directly to you, or a medical provider that you designate, and are **paid in addition to any other health care coverage.**



*Source: dictionary.com

Our solutions for protection. Your choice.

Our plan benefits give you the choice of which options are right for you. Whether you want hospital, skilled nursing, outpatient doctor or surgical coverage, or emergency room benefits, we can help you have peace of mind now about the choices that you've made for the future.

The benefits and premiums for this plan will vary based on the plan options selected. For complete details of all provisions or benefits, please read your policy carefully.



Plan benefits (base)

Hospital Indemnity

This benefit will pay a hospital indemnity amount if you are confined in a hospital. Includes observation stays in a hospital. The benefit is for one time per period of care and is available in \$250 units, up to a maximum of \$2500.

More benefits to choose from (optional)



Daily Hospital Indemnity

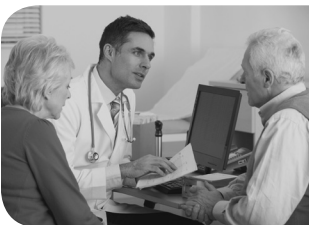
This benefit will pay a daily hospital indemnity amount if you are confined in a hospital. Includes observation stays in a hospital. The benefit will be paid for each day of confinement and is available in \$10 units, up to a daily maximum of \$300. Period of care is 20 days with a lifetime maximum of 365 days.



Daily Skilled Nursing Facility Indemnity

This benefit will pay a daily indemnity amount for skilled care received at a nursing facility. Skilled care services are services that can only be provided in a nursing facility, on a daily basis, and ordered by a doctor. Admission to the nursing facility must immediately follow a hospital confinement of at least three consecutive days, with the skilled care being received on a covered day/period of care.

The benefit is available in \$10 units, up to a daily maximum of \$200. Choice of covered days/period of care includes: days 1-20, days 21-100, or days 1-100.



Doctor's Office Visit Indemnity

This benefit will pay an indemnity amount for a doctor's office visit for a covered illness or injury. The benefit is available in \$10 units, up to a maximum of \$60 per visit and up to 20 visits per year.



Outpatient Surgical Procedure Indemnity

This benefit will pay an indemnity amount for an outpatient surgical procedure performed at an ambulatory surgical center or outpatient surgical facility for a covered illness or injury. The benefit is available in \$250 units, up to a maximum of \$1500 per surgical procedure, one time per year.



Hospital Emergency Room Visit or Ambulance Service

This benefit will pay an indemnity amount for either a hospital emergency room visit or an ambulance service. Services must be medically necessary and on an emergency basis. The maximum benefit amount for this service is \$200 per visit/service, two times per year.



Definitions

▼ Ambulance service

Physical transportation by ground, air, or water in a vehicle registered to a licensed medical transportation service.

▼ Ambulatory surgical center or outpatient surgical facility

A public or private permanent establishment with an organized staff of doctors, equipped and operated for the primary purpose of performing surgeries. Does not accommodate overnight patient stays.

▼ Benefit amount

The amount paid to the policyholder for an insured event, as shown on the schedule of benefits page in the policy.

▼ Covered days

The range of days that makes up the period of time that the benefits are covered. Benefits begin on the first day of the range of days selected.

▼ Covered illness

Sickness, disease, or complications of pregnancy that require treatment by a doctor.

▼ Covered injury

Injury to the body caused by an accident which requires treatment by a doctor.

▼ Doctor's office visit

A direct personal contact with a doctor in the doctor's office for diagnosis or treatment of a covered illness or injury.

▼ Emergency

The sudden onset of a severe medical condition that requires immediate treatment.

▼ Emergency room

A facility located on the premises of or physically part of a hospital, and provides initial medical treatment to patients that require immediate attention. This is not an Urgent Care Facility.

▼ Hospital

A legally constituted and operated institution under the supervision of doctors that provides medical care and treatment of sick and injured persons on an inpatient basis.

▼ Hospital confinement or confined

When the insured is formally admitted to a hospital as an inpatient or receives necessary and continuous observation in a hospital for at least 24 hours.

▼ Hospital observation stay or services

Hospital outpatient services given to help the doctor decide if the patient needs to be admitted as an inpatient or can be discharged.

▼ Medically necessary

Services, care, or supplies required to identify or treat the condition and are: (a) consistent with the symptom or diagnosis, and treatment is distinctly aimed at improvement of the condition; (b) in accordance with standards of good medical practice; (c) not mainly for convenience of the insured, a physician, or other provider; and (d) the most appropriate medical supply or level of care, which can safely be provided.

▼ Outpatient

Emergency room services, observation services, outpatient surgery, lab tests, x-rays or any other hospital service received and a doctor has not written an order to admit to a hospital as an inpatient.

▼ Period of care

Begins with the first day of hospital confinement due to a covered illness or injury. Ends when out of the hospital or skilled nursing facility and do not require medical care for 60 continuous days.

▼ Pre-existing condition

A condition for which the insured has been medically diagnosed, treated by, or sought advice from, or consulted with, a doctor during the six months before the insured's coverage effective date. Pre-existing conditions are not covered unless the loss begins more than three months after the coverage effective date.

▼ Skilled nursing facility

A legally constituted and operated institution under the supervision of doctors that provides for convalescing from a covered illness or injury. Provides 24 hours/day, inpatient facilities with full time registered nurses.

▼ Surgical procedure

Includes a cutting operation, suturing of a wound, treatment of a fracture, reduction of a dislocation, radiotherapy, electro cauterization, diagnostic and therapeutic endoscopic procedures, and injection treatment of hemorrhoids and varicose veins.



▼ Guaranteed renewable

You have the right to renew your policy for consecutive terms by paying the required premium before the end of each grace period. Subject to the Policy and Coverage Termination provisions detailed in the policy.

▼ Payment options

You have a choice among several payment options or modes for paying your premium – annual, semi-annual, quarterly, and monthly bank draft. Each payment mode, other than annual and monthly bank draft, results in higher total yearly premium costs. Reasons for higher costs include added collection and administrative costs, time value of money considerations, and lapse rates.

The annual and monthly bank draft modes have the same total yearly premium costs. As a result, there is a time value of money advantage to you for paying monthly versus annually. However, there may be other advantages to you for choosing an annual payment based on your preferences. Your agent can explain the differences in modes and help you decide which is best for you. You have the right to change your payment mode, among the modes available, during the life of your policy.

Payment modes

Annual	Annual x 1
Semi-annual	Annual x .52
Quarterly	Annual x .265
Monthly	Annual x .08333

Exclusions

We will not pay for losses resulting from, or expenses of:

1. Treatment, services or supplies including: experimental/investigational procedures or participation in clinical trials; diagnostic lab testing, x-rays, advanced studies and venipuncture; cosmetic surgery, routine foot care, dental services, acne or varicose veins; allergy testing/injections; speech, occupational and physical therapy; pre-employment, pre-marital or routine physical examinations; therapy or treatment of learning disorders or disabilities, developmental delays, mental, nervous or sleep disorders; programs, treatment or procedures for tobacco cessation or substance use disorders; and weight reduction, including, but not limited to, wiring of the teeth and all forms of surgery including, but not limited to, bariatric surgery, intestinal bypass surgery and complications resulting from any such surgery.
2. Eye examinations, eyeglasses, or contact lenses to correct refractive errors and related services including surgery performed to eliminate the need for eyeglasses, for refractive errors such as radial keratotomy or keratoplasty; treatment for cataracts; orthoptics and visual eye training.
3. Hospice care, custodial care or home health care.
4. Pregnancy and reproduction.
5. War or an act of war, riot or in the commission or attempted commission of an assault or felony. This includes an act of international armed conflict.
6. The commission or attempted commission of a crime or felony or while engaged in an illegal act; or while imprisoned.
7. Suicide or attempted suicide or intentionally self-inflicted injury, whether while sane or insane.
8. Treatment, services and supplies resulting from participation in skydiving, scuba diving, hand or ultralight gliding, ballooning, bungee jumping, parakiting, riding an all-terrain vehicle such as a dirt bike, snowmobile or go-cart, racing with a motorcycle, motor vehicle, boat or any form of aircraft, any participation in sports for pay or profit, or participation in rodeo contests.
9. Injury sustained while operating a motor vehicle where the insured's blood alcohol level, as defined by law, exceeds that level permitted by law or otherwise violates legal standards for a person operating a motor vehicle in the state where the injury occurred.
10. Medical treatment, services and supplies received outside of the United States.

Reference Outline of Coverage for complete details.

About Aetna

Aetna is one of the nation's leading diversified health care benefits companies, serving an estimated 44 million people with information and resources to help them make better informed decisions about their health care. Aetna offers a broad range of traditional, voluntary and consumer-directed health insurance products and related services, including medical, pharmacy, dental, behavioral health, group life and disability plans, and medical management capabilities, Medicaid health care management services, workers' compensation administrative services and health information technology products and services. Aetna's customers include employer groups, individuals, college students, part-time and hourly workers, health plans, health care providers, governmental units, government-sponsored plans, labor groups and expatriates. For more information, see www.aetna.com.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Continental Life Insurance Company of Brentwood, Tennessee, and its affiliates (Aetna).



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