

***Aflac Hospital Intensive Care Protection  
Hospital Intensive Care Unit Insurance  
Policy A18400GA***

**Effective Date: October 1, 2009**

**Aflac insurance policies are subject to health underwriting.**

**Hospital Intensive Care Unit Benefit\***

*Aflac will pay* the following benefits when a covered person incurs a charge for confinement in a hospital intensive care unit or a step-down intensive care unit for a covered sickness or injury:

**Confinement in a Hospital Intensive Care Unit:**

	Sickness	Injury
Days 1–7	\$ 700 per day	\$ 800 per day
Days 8–15	\$1,200 per day	\$1,300 per day

This benefit is limited to 15 days per period of confinement. No lifetime maximum.

**Confinement in a Step-Down Intensive Care Unit:**

*Aflac will pay* benefits for confinement in a step-down intensive care unit after exhaustion of benefits paid for confinement in a hospital intensive care unit or for Days 1–15 of a step-down intensive care unit confinement. This benefit is limited to 15 days per period of confinement. No lifetime maximum.

	Sickness	Injury
Days 1–15 (Step-Down Intensive Care Unit)	\$350 per day	\$350 per day
or		
Days 16–30 (Hospital Intensive Care Unit)	\$350 per day	\$350 per day

Benefits payable for confinement in a hospital intensive care unit or for confinement in a step-down intensive care unit are not payable on the same day. If a covered person is charged for both on the same day, only the highest eligible benefit will be paid. Treatment or confinement in a U.S. government hospital does not require a charge for benefits to be payable. Benefits reduce by one-half for losses incurred on or after the policy anniversary date following the 70th birthday of a covered person.

**Progressive Benefit for Hospital Intensive Care Unit/Step-Down Intensive Care Unit Confinement\***

A \$2 indemnity will accumulate for the named insured and the covered spouse for each calendar month the policy remains in force after the effective date. This accumulated indemnity, if any, will be paid in addition to any benefits paid under the Hospital Intensive Care Unit Benefit. This progressive benefit will cease to build on the policy anniversary date following the 65th birthday of a covered

person. Any amount accrued at the time this benefit ceases to build for a covered person will continue to be added to the benefit amount for all hospital intensive care unit/step-down intensive care unit confinements commencing prior to the policy anniversary date following the 70th birthday of a covered person. This accumulated benefit will be reduced by one-half for hospital intensive care unit/step-down intensive care unit confinements commencing on or after the policy anniversary date following the 70th birthday of a covered person. This benefit is not applicable and will not accrue to any covered person who has attained age 65 prior to the effective date of the policy. The named insured and covered spouse, if any, are the only persons eligible for this benefit. Dependent children do not qualify for this benefit. When a spouse is added to an existing policy, this benefit will begin to accrue from the endorsement date adding such spouse, provided the spouse has not yet attained age 65.

\*Benefits are not payable for confinement in a hospital intensive care unit under the Hospital Intensive Care Unit Benefit and the Progressive Benefit for Hospital Intensive Care Unit/Step-Down Intensive Care Unit Confinement for confinements in units such as telemetry or surgical recovery rooms, postanesthesia care units, progressive care units, intermediate care units, private monitored rooms, observation units located emergency rooms or outpatient surgery units, step-down intensive care units, or other facilities that do not meet the standards for a hospital intensive care unit.

\*Benefits are not payable for confinement in a step-down intensive care unit under the Hospital Intensive Care Unit Benefit and the Progressive Benefit for Hospital Intensive Care Unit/Step-Down Intensive Care Unit Confinement for confinements in units such as telemetry or surgical recovery rooms; postanesthesia care units; beds, wards, or private or semiprivate rooms with or without telemetry monitoring equipment; observation units located in emergency rooms or outpatient surgery units; emergency rooms; labor or delivery rooms; or other facilities that do not meet the standards for step-down intensive care units.

### **Ambulance Benefit**

*Aflac will pay \$250 for ground ambulance transportation of a covered person to and from a hospital where the covered person is confined in a hospital intensive care unit or step-down intensive care unit. Aflac will pay \$2,000 if air ambulance transportation of a covered person is required to and from a hospital where the covered person is confined in a hospital intensive care unit or step-down intensive care unit. The ambulance service must be performed by a licensed professional or licensed volunteer ambulance company. This benefit is limited to two trips per confinement. No lifetime maximum.*

### **Major Human Organ Transplant Benefit**

*Aflac will pay \$25,000 as a result of a human organ transplant procedure when a covered person is confined in a hospital and receives one or more of the following human organs:*

- Kidney
- Liver
- Heart
- Lung
- Pancreas

**Refer to the policy for complete details, limitations, and exclusions.  
This information is for illustration purposes only.**

Transplant procedures involving more than one organ will be considered one organ transplant procedure. This benefit is not payable for transplants involving mechanical or nonhuman organs and is limited to one procedure per 180-day period. No lifetime maximum.

### **Continuation of Coverage Benefit**

Aflac will waive all monthly premiums due for the policy for 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; (4) You or your employer has notified us in writing within 30 days of the date your premium payments ceased due to your leaving employment; and (5) You re-establish your 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.

### **Guaranteed-Renewable**

The policy is guaranteed-renewable for your lifetime with benefits reduced at age 70, subject to Aflac's right to change premiums by class upon any renewal date.

### **Family Coverage**

Family coverage includes the insured; spouse; and dependent, unmarried children to age 26. Newborn children are automatically covered under the terms of the policy from the moment of birth. However, children born within ten months of the effective date of the policy will not be covered for any losses or confinements that occur or begin within the first 28 days of life.

### **Effective Date**

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

### **Limitations and Exclusions**

Benefits payable under the policy will be reduced by one-half for losses that begin on or after the policy anniversary date following the 70th birthday of a covered person. Children born within ten months of the effective date of the policy will not be covered for any losses or confinements that occur or begin within the first 28 days of life. Benefits are not payable for losses or confinements that occur or begin before the policy effective date or after termination of the policy.

The policy does not cover losses caused by or resulting from:

- Intentionally self-inflicting bodily injury or attempting suicide;
- Participating in or attempting to participate in any illegal activity that is classified as a felony, whether charged or not (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 actively serving in any of the armed forces or units auxiliary thereto, including the National Guard or Reserve;
- Having treatment for a mental or nervous disorder or disease; alcoholism or drug dependency; any loss sustained or contracted due, directly or indirectly 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).

Please see the Hospital Intensive Care Unit Benefit and the Progressive Benefit for Hospital Intensive Care Unit/Step-Down Intensive Care Unit Confinement for other applicable limitations and exclusions.

A *hospital* does not include any institution, or part thereof, used as an emergency room; a rehabilitation unit; a hospice unit, including any bed designated as a hospice bed or a swing bed; a transitional care unit; 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 or educational care, care or treatment for persons suffering from mental disease or disorders, care for the aged, or care for persons addicted to drugs or alcohol.

A *physician* does not include a member of your immediate family.

**American Family Life Assurance Company of Columbus (Aflac)**

**HOSPITAL INTENSIVE CARE PROTECTION**  
**Hospital Intensive Care Unit Insurance**

**14-Day Biweekly Premium Rates**

	<b>Individual</b>	<b>Named Employee/ Spouse Only</b>	<b>One-Parent Family</b>	<b>Two-Parent Family</b>
Ages 18–35	\$4.80	\$ 9.60	\$ 9.42	\$11.34
Ages 36–45	\$5.22	\$ 9.60	\$ 9.42	\$11.34
Ages 46–55	\$6.30	\$11.70	\$10.32	\$12.66
Ages 56–64	\$7.14	\$14.28	\$13.32	\$15.72

**The rates do not imply coverage.**  
**Refer to the policy for complete details, limitations, and exclusions.**

American Family Life Assurance Company of Columbus (Aflac)

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**Visit our Web site at [aflac.com](http://aflac.com).**

