Aflac isn't major medical insurance

AFLAC IS INSURANCE FOR EVERYDAY LIVING. IT HELPS WITH EXPENSES THAT HEALTH INSURANCE ISN'T DESIGNED TO COVER.

41 million 53%

Nearly a quarter

(41 million) of working-age adults with job-based coverage had such high out-of-pocket costs and deductibles relative to their income that they were **effectively** "underinsured."

The Commonwealth Fund¹

Over the past five years, the average annual deductible among all covered workers has increased 53 percent.

> - The Kaiser Family Foundation²

52%

About half of consumers with a high-deductible health plan say it would be hard to afford the deductible.

- PwC Health Research³

-20%

On average, people in their 50s who are admitted to the hospital will experience a 20 percent drop in income that persists for years.

- Northwestern University⁴

3 REASONS WHY AFLAC ISN'T LIKE REGULAR INSURANCE

Aflac pays policyholders directly,

unless otherwise assigned, to help with out-of-pocket expenses such as:



- · Mortgage or bill payments while out of work.
- · Child care.
- · Other unexpected costs.



Major medical pays doctors and hospitals

for covered expenses, such as treatments, procedures and prescriptions.

Mini-medical plans (aka mini-meds) are a lower-cost health plan that cover a fixed amount of in-patient and out-patient health care expenses.

Short-term plans offer coverage during a gap in regular health care coverage.



Aflac pays customers regardless of what their major medical plan pays.



Major medical coordinates with multiple plans to determine the claims paid.

Mini-medical plans are not comprehensive and do not provide coverage for a catastrophic health event.



Aflac is portable even if there is an employment change.



Major medical isn't transferable when changing jobs or unemployed.



POLICIES THAT QUALIFY AS HIPAA EXCEPTED BENEFITS

Aflac policies are considered HIPAA excepted benefits because they are not major medical health insurance. This means they're offered separately from major medical coverage and are not an integral part of an individual's health plan. Being excepted, these benefits are generally excluded from rules and regulations designed for major medical insurance.



Accident

Helps reduce the financial impact of a covered accident by providing



Critical Illness (Specified Health Event)

Helps with out-of-pocket costs if you experience a covered health event.



Lump-Sum Critical Illness

Provides a lump-sum cash benefit if you're diagnosed and treated for a covered critical illness event.



Hospital Confinement Indemnity

Helps ease the financial burden associated with hospital stays due to a covered accident or illness by providing cash benefits.



cash benefits.

Dental

Provides benefits for covered dental exams and procedures.



Vision

Helps with the costs of covered vision exams, treatments and correction materials.



Lump-Sum Cancer

Provides a lump-sum cash benefit if you're diagnosed with a covered cancer.



Cancer/
Specified
Disease

Helps with the costs associated with covered treatments.



Short-Term Disability

Provides you with a source of income if you're disabled due to a covered accident or illness.



Life and Juvenile Life

Helps with unexpected costs if something happens to you or a covered dependent.



SOURCES

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- ²The Henry J. Kaiser Family Foundation (2018). The 2018 Employer Health Benefits Survey. Accessed on Jan. 31, 2019, from www.kff.org/report-section/2018-employer-health-benefits-survey-summary-of-findings/.
- ³ PwC Health Research Institute (2018). Top health industry issues of 2019. Accessed on Feb. 4, 2019, from www.pwc.com/us/en/industries/health-industries/top-health-industries/top-health-industry-issues.html.
- ⁴ New York Times (2018). Getting Sick Can Be Really Expensive, Even for the Insured. Accessed on Jan. 31, 2019, from www.nytimes.com/2018/03/21/upshot/getting-sick-is-real-ly-expensive.html.

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