

Group Hospital Confinement Indemnity Insurance

Group Medical Bridge[™] insurance can help with medical costs that your health insurance may not cover. These benefits are available for you, your spouse and



For more information, talk with your benefits counselor.

Diagnostic procedures

eligible dependent children.

The following is a list of common diagnostic procedures that may be covered.

Maximum of one day per outpatient surgical procedure

- Breast
 - Biopsy (incisional, needle, stereotactic)
- Cardiac
 - Angiogram
 - Arteriogram
 - Thallium stress test
 - Transesophageal echocardiogram (TEE)
- Diagnostic radiology
 - Computerized tomography scan (CT scan)
 - Electroencephalogram (EEG)
 - Magnetic resonance imaging (MRI)
 - Myelogram
 - Nuclear medicine test
 - Positron emission tomography scan (PET scan)
- Digestive
 - Barium enema/lower GI series
 - Barium swallow/upper GI series
 - Esophagogastroduodenoscopy (EGD)
- Ear, nose, throat, mouth
 - Laryngoscopy
- Gynecological
 - Amniocentesis
 - Cervical biopsy
 - Cone biopsy
 - Endometrial biopsy
 - Hysteroscopy
 - Loop electrosurgical excisional procedure (LEEP)

- Liver
- Biopsy

_____ per covered person per calendar year for Tier 1 and 2 combined

- Lymphatic
 - Biopsy
- Miscellaneous
 - Bone marrow aspiration/biopsy
- Renal
 - Biopsy
- Respiratory
 - Biopsy
 - Bronchoscopy
 - Pulmonary function test (PFT)
- Skin
 - Biopsy
- Excision of lesion
- Thyroid
 - Biopsy
- Urinary
 - Cystoscopy

The surgeries listed below are only a sampling of the surgeries that may be covered. Surgeries must be performed by a doctor in a hospital or ambulatory surgical center. For complete details and definitions, please refer to your certificate.

Tier 1 outpatient surgical procedures

Breast

- Axillary node dissection
- Breast capsulotomy
- Breast reconstruction
- Lumpectomy

Cardiac

- Pacemaker insertion

Digestive

- Colonoscopy
- Fistulotomy
- Hemorrhoidectomy (external)
- Lysis of adhesions

Skin

- Laparoscopic hernia repair
- Skin grafting

Ear, nose, throat, mouth

- Adenoidectomy
- Removal of oral lesions
- Myringotomy
- Tonsillectomy
- Tracheostomy

■ Gynecological

- Dilation and curettage (D&C)
- Endometrial ablation
- Lysis of adhesions

Liver

- Paracentesis

Musculoskeletal system

- Carpal/cubital repair or release
- Dislocation (closed reduction treatment) other than a finger or toe
- Foot surgery (bunionectomy, exostectomy, arthroplasty, hammertoe repair)
- Fracture (closed reduction treatment) other than a rib, finger or toe
- Removal of orthopedic hardware
- Removal of tendon lesion

Tier 2 outpatient surgical procedures

Breast

- Breast reduction

Cardiac

- Angioplasty
- Cardiac catheterization

Digestive

- Exploratory laparoscopy
- Laparoscopic appendectomy
- Laparoscopic cholecystectomy

Ear, nose, throat, mouth

- Ethmoidectomy
- Mastoidectomy
- Septoplasty
- Stapedectomy
- Tympanoplasty
- Tympanotomy

Eye

- Cataract surgery
- Corneal surgery (penetrating keratoplasty)
- Glaucoma surgery (trabeculectomy)
- Vitrectomy

■ Gynecological

- Myomectomy

Musculoskeletal system

- Arthroscopic knee surgery with meniscectomy (knee cartilage repair)
- Arthroscopic shoulder surgery
- Clavicle resection
- Dislocations (open reduction with internal fixation)
- Fracture (open reduction with internal fixation)
- Removal or implantation of cartilage
- Tendon/ligament repair

Thyroid

- Excision of a mass

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THIS POLICY PROVIDES LIMITED BENEFITS.

EXCLUSIONS

We will not pay benefits for losses which are caused by: alcoholism, drug addiction, dental procedures, elective procedures, cosmetic surgery, felonies or illegal occupations, pregnancy of a dependent child, psychiatric or psychological conditions, suicide, intentional injuries, war, armed forces service or giving birth within the first nine months after the certificate effective date. We will not pay benefits for hospital confinement of a newborn who is neither injured nor sick. We will not pay benefits for loss during the first 12 months after the effective date due to a pre-existing condition, which means a sickness or physical condition, whether diagnosed or not, for which a covered person was treated, had medical testing, received medical advice or had taken medication within the 12 months before the certificate effective date.

For cost and complete details, see your Colonial Life benefits counselor. Applicable to policy number GMB1.0-P-MA-Rev. This is not an insurance contract and only the actual policy provisions will control.

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