Frequently Asked Questions

Q. What is supplemental hospital insurance?

A. Hospital insurance provides you with payments when you are admitted and when you are confined to a hospital, due to an accident or illness, as long as the policy and certificate requirements are met. Typically, a flat amount is paid for admission and a daily amount is paid for each day of a hospital stay. It also pays extra benefits for admission to or confinement in an Intensive Care Unit (ICU), and for other benefits and services.

Payments are made directly to you to use as you see fit. They can be used to help pay for medical plan deductibles and copays, for out-of-network stays, for your family’s everyday living expenses, or for whatever else you need while recuperating from an illness or accident.

Q. Who is eligible to enroll for this coverage?

A. You are eligible to enroll yourself and your eligible family members! You just need to enroll during your open enrollment period and be actively at work for coverage to be effective. Dependents to be enrolled may not be subject to a medical restriction as set forth in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

Q. I have a good medical plan through work. Why do I need supplemental hospital insurance?

A. Even quality medical plans can leave you with unexpected expenses when you are hospitalized. Costs like plan deductibles, copays and co-insurance for doctor and emergency room care, testing and supplies, and extra costs for out-of-network care may not be covered. Many people aren’t financially prepared to handle these extra costs. Having extra financial support may mean less worry for you and your family, and it will give you the ability to protect your savings and focus on your recovery.

Q. Can I enroll for this coverage without having to take a medical exam?

A. Yes. Your supplemental hospital coverage is guaranteed issue, which means your acceptance is guaranteed. You just need to be actively at work for your coverage to be effective. There are no medical exams to take and no health questions to answer.
Q. How much does supplemental hospital insurance cost?

A. It may be less expensive than you think! This insurance is designed to be an economical way for you to supplement your health care plan. Be sure to review your plan-specific rates to see if this coverage is a good fit for your family’s budget.

Q. How do I pay for my coverage?

A. Premiums will be conveniently paid through payroll deduction, so you don’t have to worry about writing a check or missing a payment.

Q. Are benefits paid directly to me or to my health care provider?

A. Payments will be paid directly to you, not to the doctors, hospitals or other health care providers. You will receive a check, payable to you, for maximum convenience. There is no coordination of benefits with any other insurance you may have.

Q. What happens if my employment status changes? Can I take my coverage with me?

A. Yes. This coverage is portable, meaning you can take it with you if your employment status changes. Your coverage will only end if you stop paying your premium or if your current employer chooses to terminate the Group Supplemental Hospital insurance policy.

Q. Is the claims process simple?

A. Yes. Once all required information is received, claims are generally processed within 10 business days. Only one claim form is needed per admission or hospital stay and every claim is reviewed by a claims professional.

HAVE OTHER QUESTIONS?

Please call MetLife directly at 1 800 GET-MET8 (1-800-438-6388) and talk with a benefits consultant.

1 Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

2 Covered services and treatments must be the result of an accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

3 Coverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth on the enrollment form and in the Certificate. Some states require the insured to have medical coverage. Additional restrictions apply to dependents serving in the armed forces or living overseas.

4 Eligibility for portability through the Continuation of Insurance with Premium Payment provision may be subject to certain eligibility requirements and limitations. For more information, contact your MetLife representative.

METLIFE’S HOSPITAL INDEMNITY INSURANCE IS A LIMITED BENEFIT GROUP INSURANCE POLICY. The policy is not intended to be a substitute for medical coverage and certain states may require the insured to have medical coverage to enroll for the coverage. The policy or its provisions may vary or be unavailable in some states. There is a preexisting condition limitation for hospital sickness benefits, if applicable. There are benefit reductions that begin at age 65. Like most group accident and health insurance policies, policies offered by MetLife may contain certain exclusions, limitations and terms for keeping them in force. For complete details of coverage and availability, please refer to the group policy form GPNP12-AX or GPNP13-JHI or contact MetLife. Benefits are underwritten by Metropolitan Life Insurance Company, New York, New York. In certain states, availability of MetLife’s Group Hospital Indemnity Insurance are pending regulatory approval.