



Wellfleet Workplace Hospital Indemnity Insurance FAQs

Can I enroll in this insurance without having a medical exam?

Yes, this coverage is “guaranteed issue”, meaning there are no medical questions you need to answer or exams to complete.

What does Hospital Indemnity Insurance cover?

This coverage pays you benefits for hospitalizations associated with covered accidents or sicknesses. Carrying this insurance helps protect you and your family from the financial challenges that can come from a hospitalization. See your benefit summary for more information.

What is the difference between health insurance and Hospital Indemnity coverage?

Health insurance covers certain medical expenses and pays your provider directly, but may leave you responsible for some costs. The amount paid depends on your coverage, the type of care and whether you’ve hit your out-of-pocket maximum.

Hospital Indemnity Insurance is supplemental coverage that complements your health insurance and can help cover your out-of-pocket expenses. The benefit amount you receive is based on the type of hospitalization, is paid directly to you and can be used however you like.

Let’s say you go the hospital with pneumonia. Your health insurance will pay the treating providers for some or all of your medical expenses. Your Hospital Indemnity Insurance will pay you directly for the covered hospitalization benefits. Depending on your coverage, this could include an ambulance ride, admittance to the emergency room, x-rays and/or a daily hospitalization benefit. The Hospital Indemnity benefits paid could then be used any way you like.

Who receives the benefits?

Benefits are paid directly to you based on the covered hospitalization and associated benefits.

How can I use the benefit payment?

Benefit proceeds can be used however you want – from out-of-pocket medical expenses, to your rent or car payment. It’s totally up to you.

How do I file a claim?

Claims can be submitted telephonically, or by email, US mail or fax. The claim form and steps for each submission option are outlined on the “Claims” tab of this website.

How do I get paid?

Once your completed claims form and the necessary information has been received, processed and approved, you will be paid a total cash benefit based on the amount listed for each covered benefit and/or treatment. See the benefits schedule section of your benefit summary or certificate for more details around the covered hospitalizations and associated benefits.

Where can I find my certificate?

Once you are enrolled in coverage and your policy is in effect, you can find your certificate on the "Certificate" tab of this website or by contacting your plan administrator.

How long does it take to process a claim?

Hospital Indemnity claims are typically processed within 5 business days.

If your policy has a Health Screening Benefit and you submit your claim telephonically, payment for that benefit is usually processed within 1 business day. Claims submitted via email, US mail or fax have a standard turnaround time of 2 business days, upon receipt.

Who provides my coverage?

Your Hospital Indemnity Insurance is provided by Wellfleet, a Berkshire Hathaway company. At Wellfleet, we are focused on providing customer-centric insurance solutions that protect people against risk throughout every stage of life – from birth to college, the workplace and beyond.

If my employment or membership status changes, can I take my coverage with me?

If you leave your employer or association, you may be able to take your coverage with you. See your certificate for details around your ability to "port" your coverage.

Does this coverage have exclusions?

Yes, exclusions vary by Hospital Indemnity policy but typically include the list below. This is not a complete disclosure of plan qualifications and limitations. Benefits and riders may vary by state and may not be available in all states. In addition to any benefit-specific exclusion, benefits will not be paid for any loss which, directly or indirectly, in whole or in part, is caused by or results from any of the following, unless coverage is specifically provided for by name in the insurance certificate:

- Intentionally self-inflicted injury, suicide, or any attempt or threat while sane or insane;
- Participating in war or any act of war, whether declared or undeclared;
- Commission or attempt to commit a felony;
- Commission of or active participation in a riot, insurrection or terrorist activity;
- Engaging in an illegal activity or occupation;
- Flight in, boarding, or alighting from an aircraft or any craft designed to fly above the earth's surface, including any travel beyond the earth's atmosphere, except as a fare-paying passenger on a regularly scheduled commercial or charter airline;
- Travel in or on any on-road and off-road motorized vehicle, except a golf cart that does not require licensing as a motor vehicle;
- Practicing for or participating in any semi-professional or professional competitive athletic contest, including officiating or coaching, for which the covered person receives any compensation or remuneration;
- Travel or activity outside the contiguous United States, Alaska, Hawaii and the territories and possessions of the United States, Canada or Mexico;

- Voluntary intoxication (as defined by the law of the jurisdiction in which such intoxication occurred) due to ingestion or inhalation of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a physician and taken in accordance with the prescribed dosage;
- Operating any type of vehicle while intoxicated (as defined by the law of the jurisdiction in which such intoxication occurred) by alcohol or any drug, narcotic or other intoxicant including any prescribed drug for which the covered person has been provided a written warning against operating a vehicle while taking it;
- Experimental or investigational procedures;
- Care that is not recommended and approved by a physician;
- Treatment provided to a covered person either by themselves or by a medical professional that is an immediate family member, or has a business or financial affiliation with the covered person or an immediate family member; and
- Treatment that was scheduled prior to the coverage effective date, except when initially eligible for coverage.