PRE-CERTIFICATION

Pre-Certification for U.S. Hospital Confinements

Pre-Certification is a program in which We review all inpatient Hospital treatment in the U.S..

Under this program, all U.S. inpatient Hospital Confinements must be certified by Us. Procedures for requesting certification are outlined below. *If You or Your Insured Dependents fail to follow these procedures, benefits payable for Covered Medical Services for charges incurred in connection with the Hospital Confinement will be reduced to 50% of what would otherwise be payable.* Expenses for charges incurred that are not payable because of this penalty are not covered and will not count toward the Out-of-Pocket Maximums.

Non-Emergency Hospitalization

All non-emergency inpatient Hospital admissions in the U.S. must be certified in advance by Us. You or Your Insured Dependents or Your attending Physician must call Us for certification at least five calendar days before a non-emergency U.S. inpatient Hospital admission. If We determine that the admission or service is Medically Necessary, You or Your Insured Dependents will be notified that the Hospital admission has been certified. If the admission or service is not certified, You or Your Insured Dependents will be advised of this determination. If You or Your Insured Dependents do not receive notification prior to the scheduled admission or service date, You or Your Insured Dependents should contact Us to determine the recommendation that We have taken with respect to that Hospital admission.

Emergency Hospitalization

In an emergency Hospital admission, a request to certify must be made within 48 hours or on the next business day following Your admission or Your Insured Dependents' admission. "Emergency admission" means an inpatient Hospital admission for an Injury or Emergency Sickness.

Important Note

Obtaining a Pre-Certification does not guarantee that the expense will be reimbursed should the expense not be covered for any other reason set forth in this Group Policy. We reserve the right to review each claim for its eligibility, and non-eligible expenses shall be denied.

If You or Your Insured Dependents proceed with a U.S. inpatient Hospital which has been determined as not Medically Necessary, and if a post claim review confirms this determination; no benefits are payable for any charges incurred in connection with that confinement or service.