

Supplemental Medical Expense (Gap) Insurance



Only 39% of U.S. adults say they could cover the cost of a **\$1,000 emergency room visit** using savings.¹

Our Supplemental Medical Expense (Gap) insurance reimburses eligible out-of-pocket medical expenses incurred under the group health benefit plan, such as deductibles, copayments, and coinsurance.

The need

Employees may need help paying eligible out-of-pocket expenses not reimbursed by group health plans. Gap can be the cost saving solution for the employee when paired with a fully-insured or self-funded group major medical plan.

The solution

Gap insurance reimburses eligible out-of-pocket medical expenses like deductibles, copayments, and coinsurance. (Gap insurance is not meant to replace health insurance. It is only available if an employer has a group health benefit plan in place.)

No Health Savings Account (HSA)? No problem.

This coverage can be a beneficial supplement for high deductible health insurance plans without HSAs.

¹Bankrate, *Financial Security Index*, 2021

Underwritten by Globe Life And Accident Insurance Company

How Gap Insurance Works – ER + Hospital visit		
Gap Benefits		Inpatient: \$3,500 Outpatient: \$1,500
Group Health Plan Charges	Hospital Emergency Room	\$8,100 \$750
Patient Responsibility (after Group Health Plan has paid)	Deductible	\$2,000
	Coinsurance	\$1,900
	ER Copayment	\$250
	Total Patient Responsibility	\$4,150
Gap Plan Benefits	Without Gap	With Gap
Gap Reimbursement	\$0	
Inpatient (Hospital)		\$3,500
Outpatient (ER)		\$250
Net Out-of-Pocket Cost (paid by insured)	\$4,150	\$400

Gap insurance features include:

- Guaranteed issue
- No medical questions
- Optional dependent coverage
- Simplified administration and use

	Select OP	Expanded OP	Combined IP/OP
Inpatient Services	Inpatient Hospital Benefit \$500-\$15,000 per year	Inpatient Hospital Benefit \$500-\$15,000 per year	Inpatient Hospital & Outpatient Benefit \$500-\$15,000 per year
Outpatient Services	Outpatient Select Rider \$250-\$15,000 ¹	Outpatient Benefit \$250-\$15,000 ¹	
Outpatient Benefit Options	Outpatient coverage is limited to services selected in the rider; policyholder can choose benefits for coverage. <ul style="list-style-type: none"> • Emergency Care² • Diagnostic Lab • Diagnostic Radiology • Durable Medical Equipment • Immunotherapy • Outpatient Cancer Treatment • Outpatient Dialysis • Outpatient Mental Health • Outpatient Surgery • Outpatient Therapy • Telehealth • Ambulance Transportation 	Separate Benefit Year Maximums apply to Outpatient and Inpatient services. Covers all outpatient services under the Group Health Benefit Plan unless specifically excluded. ³	A single Benefit Year Maximum applies to Inpatient and Outpatient services. Covers all outpatient services under the Group Health Benefit Plan unless specifically excluded. ³
Combined or Separate Inpatient/Outpatient Benefit Year Maximum	Separate	Separate	Combined
Deductible Limitation	Optional	Optional	Optional
Coinsurance Limitation	Optional	Optional	Optional
Family Benefit Maximum	2-10x the insured Maximum amount	2-10x the insured Maximum amount	2-10x the insured Maximum amount
Ambulance Benefit	Optional	Optional	Optional
Indemnity Rider:	Optional	Optional	Optional
Outpatient Physician Indemnity Benefit	Policyholder can choose benefits for coverage.	Policyholder can choose benefits for coverage.	Policyholder can choose benefits for coverage.
Chiropractic Care Indemnity Benefit			
Outpatient Mental Health Therapy Indemnity Benefit			
Prescription Drug Indemnity Benefit			

¹Outpatient Benefit Year Maximum quoted can represent from 5-100% of the quoted Inpatient Benefit Year Maximum

²Emergency Care under Gap with the Outpatient Select Rider can also include Urgent Care Treatment

³The outpatient portions of these plans exclude preventive care, physician exams and prescription drugs. Some of these items can be added via the optional Indemnity Rider.

This is a solicitation for insurance. Insurance is underwritten by Globe Life And Accident Insurance Company 3700 S Stonebridge Dr, McKinney, TX 75070. This is a limited benefit policy. Coverage is not available in all states. Policy, Certificate and Rider forms: GBSM, GBSMC, GBSMIR, GBSMOSR. Benefits may vary by state. Premium will vary based on the plan chosen. A waiting period for late entrants may apply. Policies are renewable at the option of Globe Life Group Benefits. Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations. Globe Life Group Benefits uses the services of third party administrators.



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