

Health Choice Silver Plan Overview

Understanding the details and benefits of the Health Choice Silver

The Health Choice Silver Plan

- Affordable health solutions for individuals and families through NCE
- **Essential healthcare benefits** for various situations
- Impactful personal health management and support tools
- Supplemental options for high-deductible plans
- Accessibility to essential services

Key Features and Benefits

Target Audience

Individuals and families seeking affordable healthcare solutions
 Offerings

- Variety of benefits tailored to meet different healthcare needs
 Key Benefits (varies by plan)
- Flexibility and choice for members
- Customizable options to fit specific needs

Membership Benefits through NCE

Enhanced value through National Congress of Employers



Cost Management Tools

GapAfford Plus (GAP)

Prescription Discounts System

Dental Access Support

How GapAfford Plus Works

- 1. Enroll through NCE
- 2. Access pre-negotiated rates
- 3. Save on prescriptions and dental services
- 4. Receive membership handbook (GAP)
- 5. Utilize additional benefits

Preventive Care and Wellness

- Wellness Programs Services
- Advocacy Services Programs
- 24/7 Health Information Line provides support

Telehealth Services

- Virtual Visits with healthcare professionals
- 24/7 Access to medical consultations
- Remote Consultations available from anywhere
- Convenient Access to care without travel

Advocacy and Support Services

- Comprehensive healthcare advocacy
- Claims Management assistance
- Provider Networks options
- Support Tools support

Plan 100A

Hospital Confinement

■ \$100 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$50 per day, max 3 visits

Specialty Care: \$50 per day, max 3 visits

Accident & Critical Coverage

Accidental Death: \$10,000

NCE Health Choice Silver

Benefit Decription	<u> </u>	100A	100	200	200+	300	500	750	1000	1000+
Handle Confirment Brandle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
D	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Consists Cons Destroy Office Will Desset	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
5 B B C.	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
David Dath day of David Law David M	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Communication Character	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Assestancia Descrit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Market 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandallia dilla Octobrica Decella	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
0	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Constructed Academy Forest Description	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A definition of the control of the c	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-		-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

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Plan 100 (1/2)

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Additional Benefits

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■ Basic Pathology & Radiology: \$50 per day, max 1 day

Advance Studies: \$50 per day, max 1 day

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Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
0	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Constructed Academy Forest Description	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A definition of the control of the c	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-		-	-	5
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Anesthesia: 20%, max 3 days

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Accident ER Benefit: \$250 per day, max 1 visit

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Primary Care Doctors Office visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Specialty Care Doctors' Office Visit Benefit	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
specialty care boctors. Office visit Beriefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Enter gency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50		\$50	\$50	\$75	\$200
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	3	3
Community Charles	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
N	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandall Incide Control of Broadle	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
6	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Designation of the Control of the Contro	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-		-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

Limited Medical Benefit Policyv1 2 · NCE Health Choice Silver

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Additional Benefits

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Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Barda Bathada and Bardada and Baradata	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50		\$50	\$50	\$75	\$200
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Community Charles	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Annah ada Danasik	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Involved Admiration Broadit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
nospitar intensive care onic benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hospital Admission Benefit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Auditional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

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Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
F	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Dania Dathalam P. Dadialam Danafitt	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	3	3
C Ch	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandall Incide Control of Bounding	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Institut Administra	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Handballatonia Con Hait Boodit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A department of the Administration Beautiful	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
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	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
La La La contra La Caracteria de Caracteria	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Market Harris and American Comments	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Supplemental Accident Inpatient Admission Benefit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Enlergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital intensive care of it belief it	Max Day	-	-	-	-	-	-	-	-	15
Additional Hospital Admission Benefit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

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Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
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Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
David Dalla da da David da da David da	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
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C	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandal Harlin Orderskinsk Danseik	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
6	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Onlt Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Departit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*}Benefits are based on an annual period per insured from effective date.

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury

Plan 300 (1/2)

Hospital Confinement

\$300 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$50 per day, max 5 visits

Specialty Care: \$50 per day, max 5 visits

Additional Benefits

■ Emergency Room: \$50 per day, max 1 visit

■ Basic Pathology & Radiology: \$50 per day, max 2 days

Advance Studies: \$50 per day, max 2 days

NCE Health Choice Silver

Benefit Decription	<u> </u>	100A	100	200	200+	300	500	750	1000	1000+
	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Barda Bathada and Bardada and Baradata	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50		\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Community Charles	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Annah ada Danasik	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Involved Admiration Broadit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Depublic	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury

Plan 300 (2/2)

Surgical Benefits

Surgery: 50%, max 3 daysAnesthesia: 20%, max 3 days

Mental Health

Inpatient: \$150 per day, max 60 daysOutpatient: \$50 per day, max 20 visits

Accident & Critical Coverage

Accident Inpatient Admission: \$500 per day, max 1 day

Accident ER Benefit: \$250 per day, max 1 visit

Accidental Death: \$10,000

Critical Illness: \$1,000

NCE Health Choice Silver

Benefit Decription	` ۱	100A	100	200	200+	300	500	750	1000	1000+
Handled Configuration Broadle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
5	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
David Dalla da da David da da David da	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
C	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandal Harlin Orderskinsk Danseik	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
6	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Onlt Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Departit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

2 · NCE Health Choice Silver

Limited Medical Benefit Policyv1

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury.

Plan 500 (1/2)

Hospital Confinement

\$500 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$50 per day, max 5 visits

Specialty Care: \$50 per day, max 5 visits

Additional Benefits

■ Emergency Room: \$75 per day, max 1 visit

■ Basic Pathology & Radiology: \$50 per day, max 2 days

Advance Studies: \$50 per day, max 2 days

NCE Health Choice Silver

Benefit Decription	<u> </u>	100A	100	200	200+	300	500	750	1000	1000+
	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Barda Bathada and Bardada and Baradata	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50		\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Community Charles	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Annah ada Danasik	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Involved Admiration Broadit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Depublic	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury

Plan 500 (2/2)

Surgical Benefits

Surgery: 70%, max 3 days Anesthesia: 20%, max 3 days

Mental Health

■ Inpatient: \$250 per day, max 60 days Outpatient: \$50 per day, max 20 visits

Accident & Critical Coverage

Accident Inpatient Admission: \$500 per day, max 1 day

Accident ER Benefit: \$250 per day, max 1 visit

Accidental Death: \$10,000

Critical Illness: \$1,000

NCE Health Choice Silver

Benefit Decription	1	100A	100	200	200+	300	500	750	1000	1000+
Handle Confirment Brandle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
F	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Dania Dathalam P. Dadialam Danafitt	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	3	3
C Ch	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anestnesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandall Incide Control of Bounding	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Institut Administra	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Handballatonia Con Hait Boodit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A department of the Administration Beautiful	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*}Benefits are based on an annual period per insured from effective date.

*There is a 30 day waiting period immediately following the Coverage Effective Date: does not apply to an injury

Plan 750 (1/2)

Hospital Confinement

■ \$750 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$50 per day, max 5 visits

Specialty Care: \$50 per day, max 5 visits

Additional Benefits

■ Emergency Room: \$75 per day, max 1 visit

Basic Pathology & Radiology: \$50 per day, max 2 days

Advance Studies: \$50 per day, max 2 days

NCE Health Choice Silver

Benefit Decription	` ۱	100A	100	200	200+	300	500	750	1000	1000+
Handled Configuration Broadle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B :	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
5	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
David Dalla da da David da da David da	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit*	Max Day	-	1	1	3	-	2	2	3	3
	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit*	Max Day	-	1	1	3	-	2	2	3	3
C	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	2	-	\$150	\$250	\$375	\$500	\$500
Mental Health Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandal Harlin Orderskinsk Danseik	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
6	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Onlt Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Departit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury

Plan 750 (2/2)

Surgical Benefits

Surgery: 80%, max 3 daysAnesthesia: 20%, max 3 days

Mental Health

Inpatient: \$375 per day, max 60 daysOutpatient: \$50 per day, max 20 visits

Accident & Critical Coverage

Accident Inpatient Admission: \$500 per day, max 2 days

Accident ER Benefit: \$250 per day, max 1 visit

Accidental Death: \$10,000

Critical Illness: \$1,000

NCE Health Choice Silver

Benefit Decription	י ר	100A	100	200	200+	300	500	750	1000	1000+
Hospital Confinement Benefit	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinencial Benefit	Max Day	30	30	30	30	30	30	30	30	30
Primary Care Doctors Office Visit Benefit	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 \$75 3 \$20% 3 \$500 60 \$50 20 \$500 1 	\$100
Primary Care Doctors Office visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Specialty Care Doctors' Office Visit Benefit	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
specialty care boctors. Office visit beliefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	0 30 30 30 30 30 30 30 30 375 \$500 60 60 500 20 00 \$500 1 30 500 50 50 50 50 50 50 50 50 50 50 50 5	\$100
basic Fathology & Radiology Belletit	Max Day	-	1	1	3	-	2	\$750 30 \$50 \$50 5 \$50 5 \$50 5 \$50 5 \$75 1 \$50 2 \$50 2 \$80% 3 20% 3 20% 3 20% 20 \$500 20 \$500 2 \$2550 1	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	100 100	\$200
Advance Studies Benefit	Max Day	-	1	1	3	-	2	2	3	3
Surgery Benefit	Per Day	-	-	-	50%	50%	70%	80%		
Sur ger y Berlerit	Max Day	-	-	-	3	3	3	80% 100% 3 3 20% 20% 3 3	3	
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 \$75 3 \$75 3 \$20% 3 \$500 60 \$50 \$20 \$50 \$20 \$100 \$100 \$100 \$100 \$100 \$100 \$100	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Supplemental Accident Inpatient Admission Benefit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$1000 \$0 \$75 \$75 \$75 \$100 1 \$75 \$3 \$75 \$3 \$75 \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$20% \$3 \$3 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4	\$250
Supplemental Accident Enlergency Room Beliefit	Max Day	-	-	-	-	1	1	1		1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Onlt Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hospital Admission Benefit	Per Admission	-	-	-	-	-	-		-	\$1000
Additional Hospital Admission Belletit	Max Day	-	-	-	-	- 2 2 3 - 500 \$50 \$50 \$75 - 2 2 3 506 70% 80% 100% 3 3 3 3 3 20% 20% 20% 20% 20% 3 3 3 3 3 \$150 \$250 \$375 \$500 60 60 60 60 60 \$50 \$50 \$50 \$50 \$50 20 20 20 20 \$500 \$500 \$500 \$500 1 1 2 3 \$250 \$250 \$250 \$250 1 1 1 1 1	-	5		
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*} Benefits are based on an annual period per insured from effective date.

^{*}There is a 30 day waiting period immediately following the Coverage Effective Date; does not apply to an injury

Plan 1000 (1/2)

Hospital Confinement

■ \$1000 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$75 per day, max 5 visits

Specialty Care: \$75 per day, max 5 visits

Additional Benefits

Emergency Room: \$100 per day, max 1 visit

Basic Pathology & Radiology: \$75 per day, max 3 days

Advance Studies: \$75 per day, max 3 days

NCE Health Choice Silver

Benefit Decription	<u> </u>	100A	100	200	200+	300	500	750	1000	1000+
Handle Confirment Brandle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
F	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	3	3
C Ch	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandall Incide Control of Broadle	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Institut Administra	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A department of the Administration Beautiful	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	1-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*}Benefits are based on an annual period per insured from effective date.
*There is a 30 day waiting period immediately following the Coverage Effective Date: does not apply to an injury

Plan 1000 (2/2)

Surgical Benefits

■ Surgery: 100%, max 3 days Anesthesia: 20%, max 3 days

Mental Health

■ Inpatient: \$500 per day, max 60 days Outpatient: \$50 per day, max 20 visits

Accident & Critical Coverage

Accident Inpatient Admission: \$500 per day, max 3 days

Accident ER Benefit: \$250 per day, max 1 visit

Hospital ICU Benefit: \$1000 per day, max 15 days

Accidental Death: \$10,000

Critical Illness: \$1,000

NCE Health Choice Silver

Benefit Decription	<u> </u>	100A	100	200	200+	300	500	750	1000	1000+
Handle Confirment Brandle	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
B	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Constitution Constitution (Constitution Constitution Cons	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
F	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Pathology & Radiology Benefit	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	3	3
C Ch	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Surgery Benefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benefit	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Realth Inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mandall Incide Control of Bounding	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Complemental Assistant Institut Administra	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident Inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1	1	1
	Per Day	-	-	-	-	-	-	-	-	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
A department of the Administration Beautiful	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	1-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*}Benefits are based on an annual period per insured from effective date.
*There is a 30 day waiting period immediately following the Coverage Effective Date: does not apply to an injury

Plan 1000+ (1/2)

Hospital Confinement

\$1000 per day, max 30 days

Primary Care & Specialty Care

Primary Care: \$100 per day, max 5 visits Specialty Care: \$100 per day, max 5 visits

Additional Benefits

- Emergency Room: \$200 per day, max 1 visit
- Basic Pathology & Radiology: \$100 per day, max 3 days
- Advance Studies: \$200 per day, max 3 days

NCE Health Choice Silver

Benefit Decription	n	100A	100	200	200+	300	500	750	1000	1000+
	Per Dav	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office Visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	30 30 \$50 \$75	\$100	
Specialty Care Doctors' Office Visit Benefit	Max Day	3	3	5	5	5	5	5	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 100% 3 \$500 60 \$50 20% 3 \$500 60 \$50 20 \$500 1 1 1 1 1 1 1 1 1 1 1 1 1	5
F	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	\$750 \$100 30 30 \$50 \$75 5 5 \$50 \$75 5 5 \$75 \$10 1 1 \$50 \$75 2 3 80% 1009 3 3 20% 20% 3 3 20% 20% 20% 2 3 2 3 80% 1009 3 3 2 3 2 3 2 3 3 3 3 3 3 3 3 3	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
basic ratifology & Radiology benefit	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
Advance Studies Benefit	Max Day	-	1	1	3	-	2	2	3	3
Surgery Benefit	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Sui ger y Beriefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Allestriesia Delletit	Max Day	-	-	-	3	3	3	\$50 \$75 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$	3	
Mental Health Inpatient Benefit	Per Day	-	-	2	-	\$150	\$250	\$375	\$1000 \$0 \$75 \$75 \$75 \$100 1 \$75 3 \$75 3 100% \$3 \$20% \$3 \$500 60 \$50 20 \$500 1 1 1 1 1 1 1 1 1 1 1 1 1	\$500
Wertainedan in padent Benent	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	00 \$75 \$100 1 1 10 \$50 \$75 2 2 3 00 \$50 \$75 2 3 5 00 \$50 \$75 2 3 3 00 \$50 \$75 2 3 3 00 \$50 \$75 2 3 3 00 \$50 \$00 00 \$50 \$50 00 \$50 \$50	\$50	
wertarneaur outpatient benefit	Max Day	-	-	-	-	20	20	20	20	20
Supplemental Accident Inpatient Admission Benefit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident inpatient Admission Benefit	Max Day	-	-	-	-	1	1	\$750 \$1000 30 30 \$50 \$75 5 5 \$50 \$75 \$50 \$75 \$50 \$75 \$1000 1 1 \$50 \$75 2 3 \$50 \$75 2 3 \$50 \$25 2 3 \$50 \$25 2 3 \$50 \$25 2 3 \$50 \$1000 60 60 \$50 \$50 20 20 20 20 20 \$500 \$500 2 3 \$500 \$250 2 1 1 1	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
Supplemental Accident Enter gency room Benefit	Max Day	-	-	-	-	1	1	3 3 20% 20% 20% 3 3 3 \$375 \$500 60 60 \$50 \$50 20 20 \$500 \$500 2 5 550 \$250 1 1	1	
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 100% 3 \$500 60 \$50 \$50 \$500 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75	\$1000
Thospital interiore dure of the Bellette	Max Day	-	-	-		-	-		-	15
Additional Hospital Admission Benefit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Belletit	Max Day	-	-	-	-	-	1-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

^{*}Benefits are based on an annual period per insured from effective date.

*There is a 30 day waiting period immediately following the Coverage Effective Date: does not apply to an injury

Plan 1000+ (2/2)

Surgical Benefits

Surgery: 100%, max 3 days Anesthesia: 25%, max 3 days

Mental Health

■ Inpatient: \$500 per day, max 60 days Outpatient: \$50 per day, max 20 visits

Accident & Critical Coverage

Accident Inpatient Admission: \$500 per day, max 3 days

Accident ER Benefit: \$250 per day, max 1 visit

Hospital ICU Benefit: \$1000 per day, max 15 days

 Additional Hospital Admission: \$1000 per admission, max 5 admissions

Accidental Death: \$10,000

Critical Illness: \$1,000

NCE Health Choice Silver

Benefit Decription	۱ `	100A	100	200	200+	300	500	750	1000	1000+
Hospital Confinement Benefit	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Hospital Confinement Benefit	Max Day	30	30	30	30	30	30	30	30	30
Primary Care Doctors Office Visit Benefit	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Primary Care Doctors Office visit Benefit	Max Day	3	3	5	5	5	5	5	5	5
Specialty Care Doctors' Office Visit Benefit	Per Day	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
specialty care boctors. Office visit Beliefit	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
Emergency Room Benefit	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
Basic Patriology & Radiology Beriefit	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	100 100	\$200	
Advance Studies Benefit:	Max Day	-	1	1	3	-	2	2	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 100% 3 \$50 60 \$50 20 \$50 20 \$50 20 \$50 20 \$50 20 \$50 20 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5	3
Surgery Benefit	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
Sur ger y Beriefit	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
Anesthesia Benerit	Max Day	-	-	-	3	3	3	3	30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 100% 3 \$500 60 \$50 20 \$50 20 1 1 	3
Mental Health Inpatient Benefit	Per Day	-	-		-	\$150	\$250	\$375	\$500	\$500
Merital nearth inpatient Benefit	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	\$50	\$50
Mental Health Outpatient Benefit	Max Day	-	-	-	-	20	20	20	20	20
Supplemental Accident Inpatient Admission Benefit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
Supplemental Accident inpatient Admission Benefit	Max Day	-	-	-	-	1	1	2	3	3
Constructed Analytics Foreign December 1	Per Day	-	-	-	-	\$250	\$250	\$250	30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 100% 3 \$500 60 \$50 20 \$500 3 \$250 1	\$250
Supplemental Accident Emergency Room Benefit	Max Day	-	-	-	-	1	1	1		1
Handballetonika Com Hait Boorfit	Per Day	-	-	-	-	-	-	-	\$1000 30 \$75 5 \$75 5 \$100 1 \$75 3 \$75 3 \$100% 3 \$20% 3 \$500 60 \$50 \$50 \$50 \$50 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75 \$75	\$1000
Hospital Intensive Care Unit Benefit	Max Day	-	-	-	-	-	-	-	-	15
Additional Hamital Administra Densit	Per Admission	-	-	-	-	-	-	-	-	\$1000
Additional Hospital Admission Benefit	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness	Benefit	n/a	n/a	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

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Limited Medical Benefit Policyv1

^{*}Benefits are based on an annual period per insured from effective date.

*There is a 30 day waiting period immediately following the Coverage Effective Date: does not apply to an injury

Hospital Confinement	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
Primary Care Visit	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Specialty Care Visit	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Emergency Room	-	\$50	\$50	\$50	\$50	\$75	\$75	\$100	\$200
Basic Path & Rad	-	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$100
Advance Studies	-	\$50	\$50	\$50	\$50	\$50	\$50	\$75	\$200
Surgery	-	50%	50%	50%	50%	70%	80%	100%	100%
Anesthesia	-	20%	20%	20%	20%	20%	20%	20%	25%
Mental Health IP	-	-	-	-	\$150	\$250	\$375	\$500	\$500
Mental Health OP	-	-	-	-	\$50	\$50	\$50	\$50	\$50
Accident IP Admit	-	\$500	\$500	\$500	\$500	\$500	\$500	\$500	\$500
Accident ER	-	\$250	\$250	\$250	\$250	\$250	\$250	\$250	\$250
Hospital ICU	-	-	-	-	-	-	-	\$1000	\$1000
Add'l Hospital Admit	-	-	-		-	-	-	-	\$1000

Definitions and Limitations

Exclusions

- Pre-existing conditions
- Non-prescription drugs
- Cosmetic surgery

Limitations

- Specific maximum days for benefits
- Waiting periods

Coverage Restrictions

- Services before effective date
- Inpatient admissions on weekends

Non-Covered Services

- Pregnancy-related services
- Custodial care
- Dental services

NCE Health Choice Silver

Policy Limitations & Exclusions (continued)

- Treatment, services or supplies received prior to the Covered Person's Effective Date, or after their termination date of coverage under the Policy;
- Inpatient Hospital admission occurring on a Friday or Saturday in conjunction with a surgical procedure scheduled to be performed during the following week. A Sunday admission will be eligible only for the procedure scheduled to be performed early Monday morning. (This limitation will not apply to necessary medical admissions requiring immediate attention or to Emeroency surgical admissions.
- · Pregnancy and related services
- · Custodial Care;
- · Dental services;
- · Voluntary sterilization or reversal thereof:
- · Transsexual surgery and related surgery
- · Routine foot care:
- Amniocentesis, ultrasound or any other procedures requested solely for sex determination of the fetus, unless Medically Necessary to determine the existence of a sex linked genetic disorder;
- Infertility and impregnation procedures, such as but not limited to, artificial insemination, in-vitro fertilization, embryo and fetal implantation and G.I.F.T. (gamete intrafallopian transfer);
- Intentional self-inflicted Illness or Injury while sane; except that this exclusion will not apply to any self inflicted Illness or Injury that is the result of a medical condition;

- An Illness or Injury incurred (a) during the commission or attempted commission of a crime or felony or while engaged in an illegal act; or (b) while imprisoned;
- Physical therapy, Speech therapy and Occupational therapy;
- · Mental and Nervous Disorders;
- Substance Use Disorders;
- · Venipuncture;
- Prescription drugs;
- Hospice Care;
- · Home Health Care;
- Treatment, services, supplies for obesity, extreme obesity, morbid obesity or weight reduction, including, but not limited to, wiring of the teeth and all forms of surgery including, but not limited to, bariatric surgery, intestinal bypass surgery and complications resulting from any such surgery; and
- Treatment, services and supplies for an Illness prior to the expiration of the Waiting Period

NCE Health Choice Silver • 6

Key Takeaways and Reminders

- Flexibility benefits
- Cost vs. Coverage included
- Next Steps benefits
- Enrollment Assistance required

Thank You!

Continue to be great!



This is a brief description of coverage and is subject to the terms, conditions, limitations, and exclusions of the policy. Please see the policy and certificate for complete details. Coverage may not be available in all states.