



everest[®]

Everest Reinsurance Company

Offered Through: NCE

Carrier: Everest

Insurance Type: Group Fixed Indemnity Insurance

Provider Options: Multiplan PPO Network

MEDICAL EXPENSES CAN ADD UP QUICK. IS YOUR CLIENT PROTECTED?



Accidents and illnesses can happen when they least expect it. Their focus should be on their health—not their wallet. But even after their medical insurance pays its portion, they could be facing unplanned bills for deductibles, copays, and coinsurance. Everest provides fixed payments that can help them manage these costs by providing a cash benefit for covered expenses. They can use the money however they wish, so they can focus on their recovery, not their bills.

How does Group Indemnity Insurance Work?

Group Indemnity Insurance can supplement existing coverage and provide cash to help cover medical and living expenses. Below is an example of how benefits might be paid under Plan 1000+.*



Indemnity Insurance

Provides fixed payments to help manage expenses arising from a medical cost.

A 35-year-old woman gets into an accident and must go to the Emergency Room. She spends 2 days in the Hospital and upon release, a follow up appointment with her doctor.

Hospital admission benefit	\$1,000
ER admission benefit	\$100
Hospital confinement benefit	\$2000
Physician office benefit	\$75
TOTAL	\$3,175

*Payouts are estimates and not guaranteed. The examples shown may vary from the plan offering. Your individual experience may also vary. Benefits paid are determined based on individual situations. Terms, conditions, and exclusions apply. See full policy for details.

How might they use these benefits?

Payments can be used for major medical copays and deductibles, or even things like transportation, child care, housekeeping help, or whatever else you may need.

How they use the money is up to them!

Why Everest Group Indemnity Insurance ?

- ✓ Multiplan PPO Network
- ✓ Benefits are paid directly to you to spend as you see fit
- ✓ Fast payment with simplified claims process

Some states may have minimum coverage requirements. See policy documents for a complete description of benefits, exclusions, limitations, and conditions of coverage. Features and availability vary by location, and are subject to change.

EVEREST PRODUCTS ARE LIMITED BENEFIT POLICIES—READ YOUR POLICY CAREFULLY. THESE POLICIES ARE NOT MAJOR MEDICAL INSURANCE AND ARE NOT INTENDED TO BE A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.



Group Fixed Indemnity Plan Details



everest™	Plan 100	Plan 200	Plan 200+	Plan 300
Benefit Eligibility				
Pre-existing Condition Limitation	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions
Underwriting Level	Guaranteed Issue	Guaranteed Issue	Guaranteed Issue	Guaranteed Issue
Confinement Benefits	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year
Hospital Confinement	\$100	\$200	\$200	\$300
ICU Confinement	\$100	\$200	\$200	\$300
Hospital Benefits	Emergency Room 2 per certificate year	Emergency Room 2 per certificate year	Emergency Room 2 per certificate year	Emergency Room 2 per certificate year
Hospital Admission	N/A	N/A	N/A	N/A
Emergency Room	\$50	\$50	\$50	\$50
Procedure Benefits	N/A	N/A	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)
Surgery	N/A	N/A	Combined Inpatient & Outpatient \$250 per day	Combined Inpatient & Outpatient \$250 per day
Anesthesia	N/A	N/A	25%	25%
Outpatient Benefits	Physicians's Office-3 per certificate year	X-Rays & Labs-4 covered days per certificate year/Advanced Diagnostic-covered days per certificate year/Physicians's Office- 3 per certificate year	X-Rays & Labs-4 covered days per certificate year/Advanced Diagnostic-covered days per certificate year/Physicians's Office- 3 per certificate year	Physicians's Office-3 per certificate year
Lab	N/A	\$50	\$50	N/A
X-Rays	N/A	\$50	\$50	N/A
Advanced Diagnostic	N/A	\$50	\$50	N/A
Physician's Office	\$50	\$50	\$50	\$50

This coverage contains a Pre-Existing Condition Exclusion. Pre-Existing Condition means a condition for which a Covered Person received medical treatment, diagnosis, care or advice, including diagnostic tests or medications, during the months prior to the Covered Person's effective date of coverage. There is no cancel age. There is not chiropractic or acupuncture coverage.

Benefits are per person.

Policy terms, conditions, exclusions and limitations may vary by state. This product may not be available in all states. See Certificate for details.

Group Fixed Indemnity Plan Details



everest™	Plan 500	Plan 750	Plan 1000	Plan 1000+
Benefit Eligibility				
Pre-existing Condition Limitation	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions	12-12 Pre-Existing Conditions
Underwriting Level	Guaranteed Issue	Guaranteed Issue	Guaranteed Issue	Guaranteed Issue
Confinement Benefits	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year	30 Days Per Confinement/ 90 Days Per Certificate Year
Hospital Confinement	\$500	\$750	\$1000	\$1000
ICU Confinement	\$500	\$750	\$1000	\$1000
Hospital Benefits	Emergency Room 2 per certificate year	Emergency Room 2 per certificate year	Emergency Room 2 per certificate year	Hospital Admission-5 per certificate year/Emergency Room- 2 per certificate year
Hospital Admission	N/A	N/A	N/A	\$1,000
Emergency Room	\$50	\$75	\$100	\$100
Procedure Benefits	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)	Surgery-3 maximum days per certificate year (maximum days are shared between inpatient and outpatient)
Surgery	Combined Inpatient & Outpatient, \$350 per day	Combined Inpatient & Outpatient, \$400 per day	Combined Inpatient & Outpatient, \$500 per day	Combined Inpatient & Outpatient, \$500 per day
Anesthesia	25%	25%	25%	25%
Outpatient Benefits	X-Rays & Labs-8 covered days per certificate year/Advanced Diagnostic-6 covered days per certificate year/Physicians's Office-5 per certificate year	X-Rays & Labs-8 covered days per certificate year/Advanced Diagnostic-6 covered days per certificate year/Physicians's Office-5 per certificate year	X-Rays & Labs-12 covered days per certificate year/Advanced Diagnostic-6 covered days per certificate year/Physicians's Office-5 per certificate year	X-Rays & Labs-12 covered days per certificate year/Advanced Diagnostic-6 covered days per certificate year/Physicians's Office-5 per certificate year
Lab	\$50	\$50	\$75	\$100
X-Rays	\$50	\$50	\$75	\$100
Advanced Diagnostic	\$50	\$50	\$75	\$100
Physician's Office	\$50	\$50	\$75	\$75

This coverage contains a Pre-Existing Condition Exclusion. Pre-Existing Condition means a condition for which a Covered Person received medical treatment, diagnosis, care or advice, including diagnostic tests or medications, during the months prior to the Covered Person's effective date of coverage. There is no cancel age. There is not chiropractic or acupuncture coverage.

Benefits are per person.

Policy terms, conditions, exclusions and limitations may vary by state. This product may not be available in all states. See Certificate for details..

Everest FAQ's

What is Group Fixed Indemnity Insurance?

A group fixed indemnity insurance policy is a supplemental health plan that pays a set amount of money for specific covered medical expenses. It's also known as indemnity insurance, fixed benefit insurance, or fee for service insurance.

Where can I find participating providers?

You may find a list of participating providers at: www.ncegapaffordplus.com or you may call: 877-271-6559. Members will be able to apply plan discounts to all participating providers of each participating network.

What is Advanced Diagnostics?

Advanced Diagnostic Test means Angiogram, Arteriogram, Bone Marrow Test, Colonoscopy, Computer Tomography (CT) Scan, Electroencephalogram (EEG), Magnetic Resonance Imaging (MRI), Myelogram, Positron Emission Tomography (PET) Scan and Thallium Stress Test.

What does Calendar year mean?

Calendar Year means January 1st through December 31st of any year.

What does Certificate Year mean?

Certificate Year means the Plan Year shown in the Certificate Schedule.

Do they have a free look period?

Within 10 days after the Certificate Holder receives the Certificate, or notice electronically that the Certificate is available, it may be returned in person or by regular mail to the Company, its agency office or the agent who sold it to the Certificate Holder for any reason.

What is meant by Confinement?

Confined or Confinement means being admitted to a Hospital to receive Inpatient services for which the Covered Person is charged at least one day's room and board by the Hospital. Confinement consists of consecutive days of Confinement following the date the Covered Person is admitted as an Inpatient in a Hospital. This benefit pays out per day.

What is considered Diagnostic Care?

This means a medical service or procedure utilizing biomechanical, neurological, neurodiagnostic, radiological, vascular or any means, other than bioanalysis, intended to assist in establishing a medical, dental, Physical Therapy, chiropractic or psychological diagnosis, for the purposes of recommending or developing a course of Treatment for the tested patient to be implemented by the treating practitioner or by the consultant. Any test or investigation modality which is Medically Necessary to positively diagnose a covered Medical Condition, including but not limited to laboratory tests, X-rays, fine needle aspiration for cytology or histopathology, or excisional biopsy for histopathology

What is the MultiPlan PPO Network?

The MultiPlan Network is a nationwide complementary PPO network. Your health plan is utilizing the MultiPlan Network to give you access to an additional choice of providers that have agreed to offer a discount for services.



PLAN EXCLUSIONS AND LIMITATIONS

Expenses for any services, supplies, and Treatment as described below will not be considered Covered Benefits or Covered Services or a Covered Loss and no benefits will be payable for such expenses, unless expressed otherwise.

Breast Surgery – Capsular contraction, augmentation or reduction mammoplasty, except for all stages and revisions of reconstruction of the breast following a Medically Necessary mastectomy occurring while covered under this Certificate for Treatment of Cancer, including reconstruction of the other breast to produce a symmetrical appearance and Treatment of lymphedemas.

Certain services or treatment - No benefits are payable if provided by persons who do not normally charge for their services, unless there is a legal obligation to pay.

Cosmetic Surgery - No benefits are payable, except for reconstructive surgery when such service is incidental to or follows surgery resulting from trauma, infection or other disease of the involved part and reconstructive surgery because of Congenital Condition of a covered Dependent Child which has resulted in a functional defect.

Dental care and treatment - No benefits are payable, except for dental care or treatment due to accidental injury to Sound Natural Teeth within 12 months of a Covered Accident and except for dental care or treatment necessary due to congenital disease or anomaly. Sound Natural Teeth means teeth that are free of active or chronic clinical decay, have at least 50% bone support and are functional in the arch.

Elective treatment or surgery - No benefits are payable.

Experimental or Investigational treatment - No benefits are payable.

Extreme Sports - No benefits are payable for any Accident caused by or resulting from, directly or indirectly, a Covered Person's participation in a sport featuring speed, height, danger, a high level of physical exertion, highly specialized gear, or spectacular stunts, including but not limited to: scuba diving; skydiving; hang-gliding, parachuting, para-gliding or parascending; bungee jumping; mountaineering or rock climbing normally requiring the use of guides or ropes; caving; flight in an aircraft other than a regularly scheduled flight by an airline; entering, flying or exiting any aircraft while acting or training as a pilot or crew member; participation in a rodeo; operating or riding in or on any motorized or non-motorized vehicle engaged in acrobatic tricks/ stunts, off-road activities or racing; parkour; or free running.

Family Member - No benefits are payable for Treatment, services or supplies which are received from a Family Member.

Foreign Travel - No benefits are payable for Treatment, services or supplies received or purchased outside the United States unless the charges are incurred while traveling on business or for pleasure, for a period not to exceed 30 days, and the charges are incurred for an Emergency, provided the treatment, services or supplies used in connection with the Emergency are approved for use in the United States.



Gender – No benefits are payable for Treatment, services, and supplies related to the following conditions, regardless of underlying causes: sex transformation; gender dysphoric disorder; gender reassignment; treatment of sexual function, dysfunction or inadequacy; Treatment to enhance, restore or improve sexual energy, performance or desire.

Hazardous Activity Occupation - No benefits are payable for Treatment or services required due to Injury received while engaging in any hazardous occupation or other activity for which compensation is received in any form, including sponsorship, salary or prize money, such as, but not limited to: Participating, instructing, demonstrating, guiding or accompanying others in skiing, horse riding, rodeo activities, professional or semi-professional contact sports and adult sporting competition at a national or international level.

Illegal Acts – No benefits are payable for loss caused by or resulting from, directly or indirectly, the Covered Person's commission or attempted commission of a criminal act or being engaged in an illegal occupation.

Incarceration - No benefits are payable for loss caused by or resulting from, directly or indirectly any occurrence while the Covered Person is incarcerated.

Intoxication Exclusion - No benefits are payable for loss caused by or resulting from, directly or indirectly, the Covered Person being intoxicated. The Insured Person is conclusively deemed to be intoxicated if the level in his blood exceeds the amount at which a person is presumed, under the law of the state in which loss occurred, to be under the influence of alcohol if operating a motor vehicle, regardless of whether he or she is in fact operating a motor vehicle. An autopsy report from a licensed medical examiner, law enforcement officer's report, toxicology test results or similar items will be considered proof of the Covered Person's intoxication.

Not Medically Necessary - No benefits are payable.

Mental Illness/Substance Abuse - No benefits are payable for Mental Illness or Substance Abuse, whether organic or non-organic, chemical or non-chemical, biological or non-biological in origin and irrespective of cause, basis or inducement, including, but not limited to, Prescription Drugs, except as provided under the Mental Health Facility Confinement Benefit, Substance Abuse Facility Confinement Benefit, Mental Health Outpatient Benefit, or Substance Abuse Outpatient Benefit provisions if listed in PART VI – BENEFIT PROVISIONS.

Narcotic Exclusion - No benefits are payable for loss caused by or resulting from, directly or indirectly, the Covered Person being under the influence of any narcotic or other controlled substance at the time of the loss. This exclusion does not apply if any narcotic or other controlled substance is taken and used as prescribed by a Physician.

Overdose – No benefits are payable for a Medical Condition resulting from abuse or overdose of any illegal or controlled substance, except when administered in accordance with the advice of the Covered Person's Physician.

Pregnancy - No benefits are payable for Treatment, services, and supplies related to: maternity; Pregnancy; childbirth; voluntary or elective abortion, except with respect to where a Covered Person's life would be endangered if the fetus were carried to term, except as provided under the Newborn Indemnity Benefit if listed in PART VI – BENEFIT PROVISIONS. Complications of Pregnancy are covered as any other Sickness.

Service in the Armed Forces - No benefits are payable for loss caused by or resulting from, directly or indirectly, the Covered Person participating in military action while in active military service with the armed forces of any country or international organization, including non-military units supporting such forces.



Manipulations of the Musculoskeletal System or Acupuncture – No benefits are payable for care in connection with the detection and correction by manual or mechanical means of structural imbalance, distortion or subluxation in the human body for purposes of removing nerve interference and the effects thereof, where such interference is the result of or related to distortion, misalignment or subluxation of the vertebral column. No benefits are payable for Meridian therapy or acupuncture.

Sports – No benefits are payable for loss resulting from participation in intercollegiate sports, interscholastic sports, organized competitive sports (i.e., travel teams or club sports) or professional athletics. This does not include dependent children participating in local recreational community sports activities.

Suicide or Intentional Injury – No benefits are payable for loss caused or aggravated by suicide, attempted suicide or a self-inflicted Medical Condition, even if the Covered Person did not intend to cause the harm which resulted from the action which led to the self-inflicted Medical Condition.

Unlicensed Driver - No benefits are payable for an Accident if the Covered Person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, unless: (a) the Covered Person holds a valid learner's permit and (b) the Covered Person is receiving instruction from a driver's education instructor.

War - No benefits are payable for War or Act of War, Riot, Insurrection, Service in Armed Forces. War or act of war (whether declared or undeclared); participation in a riot or insurrection; service in the Armed Forces or units auxiliary thereto. Loss resulting from acts of terrorism committed by individuals or groups will not be excluded from coverage unless the Covered Person who suffered the loss committed the act of terrorism.

Weight - No benefits are payable for any Treatment, services, supplies, diagnosis, drugs, medications or regimen, whether medical or surgical, for purposes of controlling the Covered Person's weight or related to obesity or morbid obesity, whether or not weight reduction is Medically Necessary or appropriate or regardless of potential benefits for co-morbid conditions; weight reduction or weight control surgery, treatment or programs; any type of gastric bypass surgery; suction lipectomy; physical fitness programs, exercise equipment or exercise therapy, including health club membership visits or services; nutritional counseling.

Workers Compensation - No benefits are payable for a Medical Condition arising out of, or is the result of, any work for wage or profit; a work-related condition that is eligible for benefits under worker's compensation, employers' liability, occupational disease law or act, or similar laws even when the Covered Person does not file a claim for benefits.

Pre-existing Condition Limitation - No benefits are payable for a Pre-Existing Condition for a continuous period of months, as outlined in PART II - SCHEDULE OF BENEFITS, following the effective date of a Covered Person's coverage under the Certificate. This exclusion does not apply to a newborn child or newborn adopted child who is added to coverage in accordance with PART II – ELIGIBILITY AND EFFECTIVE DATE OF INSURANCE.

Waiting Period - A Covered Person must complete a Waiting Period before becoming eligible for certain benefits. A Waiting Period is the consecutive period of days from the Covered Person's Effective Date in which a Covered Person must be covered under this Certificate before benefits are payable. If a Covered Person is diagnosed with an applicable Medical Condition prior to completing a Waiting Period, no benefits are payable. This provision does not apply to any Newborn Child or Adopted Children added to this Certificate as noted in PART IV – EFFECTIVE DATE OF INSURANCE. Any applicable Waiting Period will be shown in PART II – SCHEDULE OF BENEFITS.





Discount Benefit Program Member Handbook

**In addition to your Limited Medical Benefits,
NCE Membership contains valuable discount benefits.**

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WELCOME!

YOUR PARTNERS FOR HEALTH CARE SAVINGS

NCE's GapAfford Plus program is a great way for individuals and families to save money on out-of-pocket medical expenses, whether or not they have health insurance.

Your savings start from the first dollar, with no limits. Our cost savings program gives employees/members access to the same pre-negotiated lowered rates similar to what insurance companies receive.

The GapAfford Program is ideal for people:

- With High Deductible health insurance plans
- With no health insurance
- Who are under-insured
- Who cannot get health insurance due to pre-existing conditions
- Whose plans don't cover, or cap benefits on, certain procedures
- Who are in their eligibility waiting period
- Who are on COBRA

Everyone is approved! No medical exam required!

Commonly Asked Questions

Who is included under a household program?

All members of the household are included, regardless of age, including students away at college.

Is this an insurance plan?

No. The program is a reduced fee-for-service program. It is not insurance.



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

There are no

- Deductibles
- Pre-existing condition limitations*
- Medical exams
- Claim forms
- Limitation on usage
- Age restrictions

* Except for work already in progress

I have insurance; can I still enroll in the program?

Yes. You may enroll in the program as long as the provider will accept both. You should consult your participating provider prior to beginning the treatment in order to verify that they can coordinate the two and provide you with additional savings.

This is not insurance. This program does not meet the requirements of the PPACA. You must pay for services at the time they are rendered. If you use a participating dentist, you will receive a discount. Neither GapAfford Plus, Aetna, NBBI or the DMPO will pay for any services received. You may contact the Discount Medical Plan Organization at AccessOne Consumer Health, Inc. 84 Villa Rd. Greenville SC 29615 www.accessonedmpo.com. This program is not available in Alaska, Montana, Rhode Island, Utah, Vermont and Washington.

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DENTAL



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Utilizing The Aetna Dental Access® Network

As a member of the GapAfford Plus program, you and your family have access to a national network of over 262,000 available dental practice locations through one of the largest dental discount networks in America, the Aetna Dental Access® Network. Participating dental locations provide savings that range from 15-50% per visit, on average, on dental services including cleanings, x-rays, fillings, root canals, crowns, bridges and orthodontia.

Advantages of this discount program:

- No waiting periods and no age restrictions
- No pre-existing condition exclusions ¹
- No benefit maximum
- No paperwork hassles or claim forms to file
- Cosmetic dentistry included
- Orthodontia always included
- Can be use in addition to dental insurance or enhance existing dental insurance
- Vision discounts included

¹Except work already in progress

Sample dental care savings

Procedure	Select regional average cost by Aetna® ²	Average cost with Dentachoice	Your total savings
Periodic Oral Exam	\$73	\$35	\$38
Comprehensive Oral Exam	\$113	\$49	\$64
X-Ray, Intraoral - Complete Series Including Bitewing	\$168	\$87	\$81
Cleaning (Prophylaxis) - Adult	\$127	\$68	\$59
Cleaning (Prophylaxis) - Child	\$93	\$51	\$42
Filling - 1 Surface Resin (White) Filling, Front (Anterior) Tooth	\$204	\$102	\$102
Crown - Porcelain Fused to High Noble Metal (i.e. gold)	\$1,312	\$829	\$483
Root Canal Molar, Excluding Final Restoration	\$1,226	\$859	\$367
Extraction of Erupted Tooth or Exposed Root - Includes Local Anesthesia and Suturing If Needed	\$229	\$101	\$128
Comprehensive Orthodontic Treatment Child	\$5,952	\$3,484	\$2,468

Disclaimer: Prices can change without notice. ²Actual costs and savings may vary by provider, service and geographic location. We use the average of negotiated fees from participating providers to determine the average costs, as shown on the chart. The select regional average cost represents the average fees for the procedures listed above in Los Angeles, Orlando, Chicago and New York City, as displayed in the cost of care tool as of June 2020.

The Dentachoice Dental and Vision Program provides access to the Aetna Dental Access® network, which is administered by Aetna Life Insurance Company (ALIC). ALIC does not offer or administer the Dentachoice Dental and Vision Program, and is not an affiliate, agent or principal of Dentachoice Dental and Vision Program. Dental providers are independent contractors and not employees or agents of ALIC. ALIC does not provide dental care and is not responsible for outcomes.

This program is not available in Alaska, Montana, Rhode Island, Utah, Vermont and Washington.

VISION

The OUTLOOK Vision network has contracted with over 12,000 eye care locations nationwide. The OUTLOOK Vision provider panel includes ophthalmologists, optometrists, independent optical centers and national chain locations.

The vision program provides:

- Savings of 10% to 50% on most prescription eyeglasses, frames, and lenses, through a national network of over 12,000 independent and chain vision optical centers.
- Savings on contact lenses (excluding disposables) at participating retail locations.
- 10% to 30% discounts on medical eye exams and surgical procedures, such as PRK and LASIK (where available and approved).



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Sample vision care savings

Location	Item	Retail ⁵	Member price ⁵	Savings - %
Exact Eye Care Kearney, NE	Frame Single Vision w/ Polycarbonate	\$129.00	\$90.30	\$38.70 – 30%
		\$297.00	\$207.90	\$89.10 – 30%
LensCrafters Mesa, AZ	Frame Single Vision w/ Photo Flexint	\$149.95	\$104.96	\$44.99 – 30%
		\$225.00	\$157.58	\$67.50 – 30%
JC Penney Michigan	Frame Single Vision w/ Polycarbonate & AR Contact Lenses	\$229.95	\$149.47	\$79.98 – 35%
		\$208.00	\$100.00	\$108.00 – 52%
		\$90.00	\$72.00	\$18.00 – 20%
Pearle Vision National City, CA	Frame Single Vision w/ Scratch Coat	\$59.95	\$30.00	\$29.95 – 50%
		\$109.00	\$55.00	\$54.00 – 50%
EyeMaster Henderson, NV	Frame Single Vision w/ Polycarbonate	\$99.95	\$69.96	\$29.99 – 30%
		\$149.98	\$104.99	\$44.99 – 30%

Disclaimer: Prices can change without notice. ⁵Actual costs and savings vary by provider and geographic area.

Some participating vision care providers

Pearle Vision
Sears Optical
J.C. Penney Optical
Target Optical
Lenscrafters
Sterling Optical
Vista Optical
Eyeglasses.com

TLC Laser Vision Centers
Visionworks
Bard Optical
Budget Opticals of America
Cohen's Fashion Optical
Clear Vision Laser Centers
Doctors Valuvision
Duling Optical

Empire Vision
Eye DRX
Eyes First Vision Center
EyeMasters
H. Rubin
Hour Eyes
Ideal Optical Shopko
Nationwide Vision Center

Site for Sore Eyes
Stein's Optical
Texas State Optical
Thomas Opticians
Uhlemann Optical
Vision World

In addition to these chains, there are thousands of vision centers that participate in our program.

PHARMACY



Save an average of 55% on generic drugs and 15% on brand-name drugs at over 80% of pharmacies in the country.

- All FDA approved drugs are discounted with the card. Even lifestyle drugs can be obtained at greatly reduced rates.
- The pharmacy network is national in scope.
- There is no limit on the number of prescriptions filled.
- No forms to fill out. You do not have to activate the card.
- The card can be used over and over.
- Includes pet medications.

Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Highlights

- Card is pre-activated and never expires. Use the card immediately.
- Covers entire household, with no exclusions.
- Personal information is never collected from the card user.

Simply present your member ID card to the pharmacist, along with your prescription to receive the discounts.

Over 80% of all pharmacies in the US and its territories accept the free discount prescription card.

RX MAIL-ORDER



Save up to 80% on prescription medications.
Receive insulin medication savings of 45% or better.

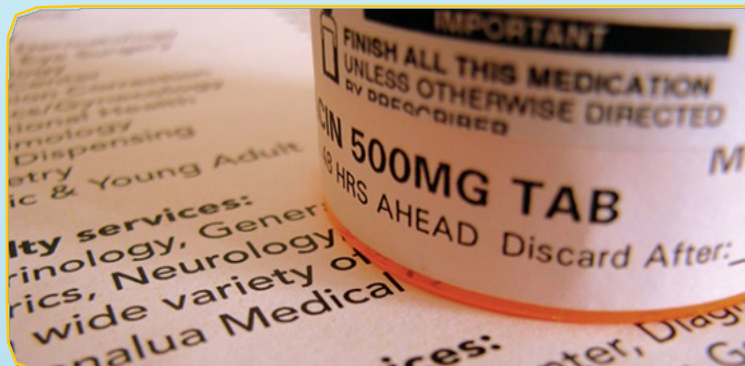
Ordering mail-order prescription medications is convenient, easy, and secure.

How It Works

Step 1. Price your medication at:
www.medaffordglobal.com/4064

Step 2. Order online or call **855-633-7977** to place your order or refill. Please provide your **Rx Group: NCE4064** when calling. A valid prescription from your doctor is required to complete your order.

Step 3. Your medications ship directly to you. You will receive an email confirmation of your order.



Ordering your prescription medications is convenient, easy, and secure.

Order online or call **855-633-7977** to place your order.

Commonly ordered brand-name medications

Average price* based on 90-day supply, unless otherwise noted.

Abilify 10mg	\$160	Lyrica 50mg 60 tabs	\$170
Advair Diskus 50/250mcg 180 doses	\$144	Premarin 0.625mg	\$88
Cymbalta 20mg	\$149	Spiriva 18MCG	\$250
Eliquis 5mg 180 tabs	\$236	Symbicort 160/6MCG 360 doses	\$145
Januvia 100mg	\$170	Wellbutrin XL 150mg	\$130
Jardiance 25mg	\$260	Xarelto 20mg	\$210

Commonly ordered generic medications

Average price* based on 90-day supply. These prices do not include \$4.95 shipping or cost of insurance for shipment.

Amlodipine 10mg	\$20	Montelukast 10mg	\$27
Lisinopril 20mg	\$22	Omeprazole 20mg	\$25
Metformin ER 500mg	\$23	Pravastatin 20mg	\$33

* Medication pricing subject to change based on fluctuation of drug costs through International Pharmacies

MedAfford Global Inc. is administered by National Benefit Builders, Inc.

CBD PRODUCTS



Discover the benefits of adding CBD to your daily health routine

All natural ingredients and the purest and richest form of Cannabidiol. A safe, effective alternative to prescription painkillers for you, your family and your pets.

What is CBD?

CBD stands for cannabidiol, a compound found naturally in hemp plants. More interesting than that is how CBD may support a sense of peace and balance in human beings. Don't worry, it's non-intoxicating, so you can add CBD to your everyday routine without an altered state of mind. CBD Afford chooses vendors whose CBD products offer consumers a way to to a healthier, happier future through natural, plant-based relief. We know CBD is a big topic, and that all the information out there can get overwhelming. That's why we want to serve as a resource for you as you learn more about how to support your own health.

Why we're different:

- Compliance with Farm Bill Act 2018
- Highest quality pharmacist formulated full-spectrum CBD products
- Purity and potency of ingredients
- Multi-stage third -party lab potency of ingredients
- QR codes linked to lab results on every package

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Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

DIABETIC SUPPLIES



UP TO
85% OFF
RETAIL PRICES!

Receive discounts on diabetes supplies at 20-85% off retail prices. Receive brand name glucose test strips, glucose monitors, lancets and devices as well as blood pressure monitors, urinalysis test strips, and much more.

Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Physical Therapy & Rehabilitation



Save an average of 20% at over 1,200 offices with 4,000 rehabilitation and physical therapy providers in 23 states.

Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Hearing Savings Program



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Receive free hearing consultations and exclusive discounts on the latest hearing aid technology.

- Free annual hearing consultations at over 3000 hearing professional locations
- Exclusive discounts on all hearing aid technologies and styles
- Free deluxe warranty program
- Up to a 3-year supply of batteries (40 cells per hearing aid purchased per year)

MEDICAL BILL NEGOTIATIONS

This program is not provided by
AccessOne DMPO.

Members may save on medical bills which fall outside of your allowed plan of benefits. Patient advocates work on your behalf to reduce the cost of your medical bill. Full payment to the provider or facility is required at the time of accepted negotiation. A minimum bill of \$5000 required to begin negotiation.



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Medical Supplies & Equipment

Save from 20% to 50% off your medical supply needs. Items include a broad selection of ambulatory aids and bathroom safety items such as wheelchairs, scooters, hospital beds, and much more.



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Laboratory Savings Program

This program is not provided by
AccessOne DMPO.



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate
providers, go to: www.ncegapaffordplus.com

The Laboratory Savings Program offers services offer an efficient, affordable, and confidential solution to medical laboratory testing. Members are able to browse a wide array of medical laboratory tests, become informed on both the tests and diseases, and have the ability to purchase the medical lab test directly on the website.

Not available in NY, NJ or RI.

Nutrition



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate
providers, go to: www.ncegapaffordplus.com

SDO Nutrition helps you achieve personal health goals, maintain a healthy lifestyle, and manage chronic health conditions through food and diet education.

SDO Nutrition provides individuals and groups with services and support for:

- Weight Loss
- Dietary Restrictions
- Geriatric Health
- Diabetes & High Blood Pressure Management
- Chronic Health Conditions Management

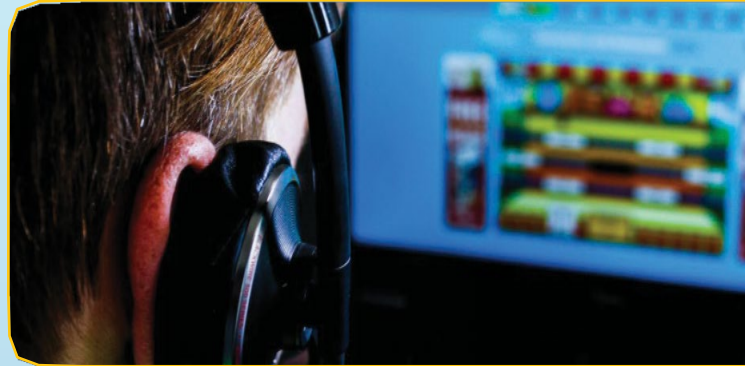
Nutrition for Athletic & Fitness Training

SPEECH THERAPY

This program is not provided
by AccessOne DMPO.

Speech therapy utilizes video conferencing technology to provide live, one-on-one, highly individualized and interactive speech therapy services worldwide. This innovative telepractice model of therapy provides an exciting alternative to the traditional service model.

All you need is a computer, high-speed internet access, a web camera and a quiet room. During pre-scheduled sessions, therapists engage and interact with clients using appropriate therapeutic activities and exercises. Materials and follow-up resources are also available so that patients can practice the skills they learn between sessions.



Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

This program is not provided
by AccessOne DMPO.

24/7 Nurse Help Line

Have 24/7 access to a registered nurse (RN) to answer questions on family health issues. Services in over 100 languages are included with medical information assistance.

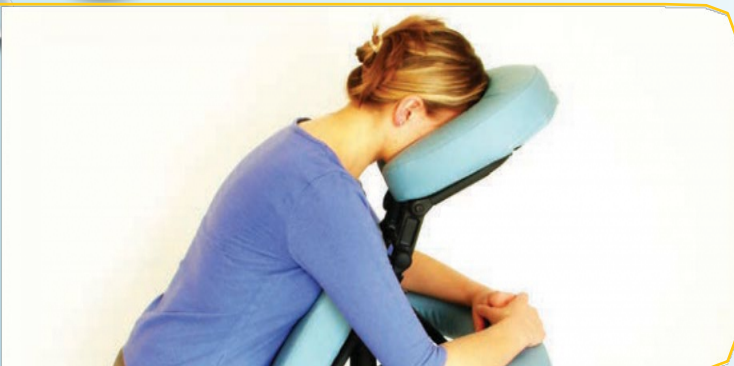


Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

CHIROPRACTIC SAVINGS PROGRAM



This program offers a free initial consultation, up to 50% savings on diagnostic services and x-rays (if necessary), and unlimited treatments at up to 30% savings from a national network of over 12,000 chiropractors.

Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

Vitamins & Supplements

This program is not provided by AccessOne DMPO.



Members can save up to 75% off retail pricing on a huge selection of natural products including vitamins, supplements, and more.

Customer Service: 877-271-6559

Billing: 732-876-9733

To access your program and to locate providers, go to: www.ncegapaffordplus.com

HEALTH DISCOUNT PROGRAM

MEMBER AGREEMENT

As a member of GapAfford Plus you are a participant in a Discount Medical Plan Organization provided by AccessOne Consumer Health, Inc. Below are the terms and conditions of your participation. This agreement is between you and AccessOne.

The effective date of your enrollment is shown on the Member ID and shall continue from month to month until AccessOne is notified of your cancellation. La. R.S. 22:1260.7.D(1)(d) - The mode of payment of any processing fees and periodic charges and procedure for changing the mode of payment. La. R.S. 22:1260(7)(D)(1)(k) - Procedures for filing complaints under the discount medical plan organization's complaint system and information that, if the member remains dissatisfied after completing the organization's complaint system, the plan member may contact his state insurance department.

DISCLOSURES:

- The plan is not insurance;
- The plan provides discounts at certain healthcare providers for medical services;
- The plan does not make payments directly to the providers of medical services;
- The plan member is obligated to pay for all healthcare services but will receive a discount from healthcare providers who have contracted with the discount plan organization;
- The name and address of the licensed discount medical plan organization: AccessOne Consumer Health, Inc., 84 Villa Road, Greenville, SC 29615; 800-896-1962; www.accessonedmpo.com.

You may find a list of participating providers at: www.ncegapaffordplus.com or you may call: 877-271-6559. You will be able to apply plan discounts to all participating providers of each participating network.

You will receive discounts at participating chiropractors, medical equipment & supplies, & rehabilitation services ranging from 5% to 40%, prepaid Labs discounts of 5% to 70%, hearing services discounts of 5% to 20% and participating pharmacies provide discounts of 5% to 40%.

The discounts on participating dentists range from 15-50% per visit off standard billed charge. The vision services (including lenses and frames) are available at participating providers at discounts of 5% to 50%.

The Member Agreement (GAPMPA-P/0211), Member Guide (GAPGUIDE-P/0612x) and Member ID Card (GAPID-P/0211) represent the entire Agreement between you and GapAfford and AccessOne Consumer Health, Inc.

You will be billed at the time services are provided by the participating provider who will apply the applicable discounts to that bill. In no instance can GapAfford or AccessOne make payments directly to a provider on your behalf.

Your participation in the plan will continue from month to month upon payment of your monthly dues and shall cease upon (i) your failure to make the monthly payment; or (ii) notification in writing (USPS, email or facsimile) of your desire to cancel.

You may cancel your membership in the discount medical plan organization within thirty (30) days after the effective date of your participation or receipt of your ID card, whichever is later, and receive a full refund less a minimal processing fee if applicable. After the first thirty (30) days, you may cancel participation at any time and if you have pre-paid any membership fees, the prepayment will be refunded on a pro-rata basis for the unused months. Notification must be received at least five (5) business days in advance of the next billing cycle for you not to be charged for that billing cycle.

Participation in the program may be terminated if you fail to make a payment when due.

This plan includes you and your dependent children at no charge. You are not required to list your dependents to participate in the plan. You may add children by calling AccessOne at 800-896-1962

If you have a complaint regarding the plan you may go to: www.accessonedmpo.com or call 800-896-1962. You may also write to AccessOne Consumer Health, Inc. 84 Villa Rd. Greenville, SC 29615. The complaint will be addressed and you will receive a response within 15 days.

THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. This is not a Medicare prescription drug plan.

This Agreement and its Benefit Descriptions represent the entire agreement between you, GapAfford and AccessOne Consumer Health, Inc. and supersedes all other prior representations, statements, or written agreements between you and GapAfford or AccessOne. Neither GapAfford nor AccessOne Consumer Health, Inc. has liability for providing or guaranteeing service or any liability for the quality of services rendered.

Note: Keep a copy of the Member Agreement for your records.

THIS PROGRAM IS NOT INSURANCE.
IT IS A DISCOUNT PROGRAM.

