



# NCE Health Choice Silver

Limited Benefit Health Insurance Plans  
Limited Benefit Insurance underwritten by: American Financial Security Life Insurance Co.



# NCE Health Choice Silver

Benefit Description		100A	100	200	200+	300	500	750	1000	1000+
Hospital Confinement Benefit	Per Day	\$100	\$100	\$200	\$200	\$300	\$500	\$750	\$1000	\$1000
	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
	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
	Max Day	3	3	5	5	5	5	5	5	5
Emergency Room Benefit	Per Day	-	\$50	\$50	\$50	\$50	\$50	\$75	\$100	\$200
	Max Day	-	1	1	2	1	1	1	1	1
Basic Pathology & Radiology Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$100
	Max Day	-	1	1	3	-	2	2	3	3
Advance Studies Benefit*	Per Day	-	-	\$50	\$50	-	\$50	\$50	\$75	\$200
	Max Day	-	1	1	3	-	2	2	3	3
Surgery Benefit	Per Day	-	-	-	50%	50%	70%	80%	100%	100%
	Max Day	-	-	-	3	3	3	3	3	3
Anesthesia Benefit	Per Day	-	-	-	20%	20%	20%	20%	20%	25%
	Max Day	-	-	-	3	3	3	3	3	3
Mental Health Inpatient Benefit	Per Day	-	-	-	-	\$150	\$250	\$375	\$500	\$500
	Max Day	-	-	-	-	60	60	60	60	60
Mental Health Outpatient Benefit	Per Day	-	-	-	-	\$50	\$50	\$50	\$50	\$50
	Max Day	-	-	-	-	20	20	20	20	20
Supplemental Accident Inpatient Admission Benefit	Per Day	-	-	-	-	\$500	\$500	\$500	\$500	\$500
	Max Day	-	-	-	-	1	1	2	3	3
Supplemental Accident Emergency Room Benefit	Per Day	-	-	-	-	\$250	\$250	\$250	\$250	\$250
	Max Day	-	-	-	-	1	1	1	1	1
Hospital Intensive Care Unit Benefit	Per Day	-	-	-	-	-	-	-	-	\$1000
	Max Day	-	-	-	-	-	-	-	-	15
Additional Hospital Admission Benefit	Per Admission	-	-	-	-	-	-	-	-	\$1000
	Max Day	-	-	-	-	-	-	-	-	5
Accidental Death Benefit	Maximum Benefit	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Critical Illness		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.



## What is NCE?

NCE is the National Congress of Employers, a national association that represents America's small and medium sized businesses via networking, advocacy, and information sharing. The NCE seeks to provide it's members with reliable services, resources, and benefits regardless of one's circumstances or means.

The NCE is committed to providing members with valuable benefits and superior customer service. Membership and insurance enrollment opportunities are offered to individuals and families.

## Membership Packet and ID Cards

Once a successful payment has been processed with an application, members will instantly receive a Purchase Confirmation E-mail from NCE Member Services. The e-mail includes the NCE Membership Handbook, a sample certificate of insurance and additional information. Registration and login instructions for your individualized Member Services Portal will be received in a secondary e-mail. Pending Carrier approval of your application, your fulfillment packet will be placed in the mail by the carrier which will include the hard copy of the handbook and personalized Certificate of Insurance within 7-10 business days from enrollment.

## Monthly Membership

The rates reflect the monthly premium for health benefits as well as the NCE association membership. Rates do not include an association one-time, non-refundable enrollment fee, which is processed at the time of enrollment. Effective dates vary based on enrollment date. The initial premium draft, inclusive of the non-refundable, one-time enrollment fee, is processed the day of enrollment. Future drafts occur once a month, approximately every 30 days. Please make sure you have sufficient funds before you enroll. Credit cards and bank automatic draft is available.

## What is Limited Medical Coverage?

A Limited Benefit Medical plan is not a comprehensive major medical plan, nor is it intended to replace a major medical plan. The plan is intended to provide you, and your covered dependents, with basic insurance coverage that is capped at specific amounts for specific services.

### Great When:

- Major Medical is not an option
- Major Medical is too costly
- Looking to supplement a higher deductible Major Medical plan

### Who is Eligible?

- Adults, 65 and older
- Dependent Children, age 1-25

# NCE Health Choice Silver

## GapAfford Plus - NCE Membership Benefits

### GapAfford Plus

The GapAfford Plus Program is a great way for individuals and families to save money on out-of-pocket medical expenses. Your savings start from the first dollar, with no limits. Our cost savings program gives members access to pre-negotiated, lowered rates.

There are no:

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

### Prescription Discount Benefits

Use our discount Rx card and save an average of 15% on brand-name and 55% on generic medications at participating pharmacies.

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.
- Cards can be used for all family members. 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. Simply present your member ID card to the pharmacist, along with your prescription to receive the discounts.

### 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 132,000 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 pre-existing condition exclusions
- No benefit maximum
- Cosmetic dentistry included
- Orthodontia always included
- Can be used in addition to dental insurance or to enhance existing dental insurance

### The OUTLOOK Vision Network

We have contracted with over 10,000 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 10,000 independent and chain vision optical centers.
- 10% to 30% discounts on medical eye exams and surgical procedures, such as PRK and LASIK (where available and approved).

### Pet Rx

About 50% of the medications prescribed by your vet are actually the same medications prescribed to people, only in different dosages. You can fill these prescriptions at your neighborhood pharmacy. We have even made arrangements with a US FDA-approved specialty, mail-order pharmacy to fill those special medications and compounds not available at your local pharmacy.

### Alternative Medicine

Save an average of 25% at over 8,000 trained, qualified, and fully credentialed providers nationwide including acupuncture, massage and other integrated wellness therapies.

### Chiropractic Care

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

### Hearing Savings Program

Receive customized care and, if needed, purchase brand name hearing aids at substantial savings. Save 20% to 50% off Manufacturer's Suggested Retail Pricing.

### Imaging Savings Program

Our network providers can save members an average of 60% off of the usual cost for advanced radiology testing, such as Magnetic Resonance Imaging (MRI) and Computerized Tomography (CT) scans.

### Medical Bill Negotiations

Members can save on their existing medical bills. Patient advocates work on your behalf to protect your interests and save you money. No minimum bill requirement.

### Medical Supplies and 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.

### Laboratory Savings Program

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. MyMedLab's online solution is centralized around the PHR (Personal Health Record) system and allows the member to see specific test results and monitor their overall health. Not available in NY, NJ or RI.

### Physical Therapy

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

### Vitamins and Supplements

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

### 24/7 Health Information Line

The Health Information Line provides you with access to a comprehensive library of health information that is available to you over the phone or online.

### 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.

\* The benefits described on this page, GapAfford Plus, are not insurance and are not affiliated with American Financial Security Life Insurance Co.. The GapAfford Plus 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, NBBJ, nor the DMPO will pay for any services received. The GapAfford Plus program is not available in Alaska, Connecticut, Delaware, Montana, Rhode Island, Utah, Vermont and Washington.

# Policy Limitations & Exclusions

**We will not provide a Benefit for any of the items listed in this section regardless of Medical Necessity or recommendation of a health care provider.**

- Treatment, services and supplies, unless for the Medically Necessary care and treatment of medically diagnosed congenital defects and birth abnormalities, which are not related to a specific diagnosis, acute symptoms or course of treatment; medical care or surgery which is not Medically Necessary; and any maintenance type therapy not reasonably expected to improve the patient's condition;
- Pre-employment or pre-marital examinations; or routine physical examinations;
- Treatment, services and supplies for an Injury caused by an accident that arises out of or in the course of employment or for which the Covered Person is entitled to benefits under any Worker's Compensation Law, Occupational Disease Law or similar legislation;
- Non-prescription drugs, vitamins, minerals and nutritional supplements;
- Experimental substances and/or drugs not approved by the Food and Drug Administration, or for investigative drugs or substances labeled "Caution – Limited by Federal Law to investigational use";
- Treatment, services and supplies for Experimental or Investigational procedures, drugs or treatment methods;
- Treatment, services and supplies for any Experimental or Investigational organ transplant procedure;
- Treatment, services and supplies for which the Covered Person is not legally required to pay;
- Telephone consultations, failure to keep scheduled appointments, completion of claim forms, or providing medical information necessary to determine coverage;
- Treatment, services and supplies provided by a Close Relative (i.e. spouse, child or parent);
- Enrollment in including, but not limited to, a health, athletic or similar club or weight loss, non-smoking, exercise or similar programs;
- Recreational or educational therapy, or non-medical self-care or self-help training, nutritional counseling, marriage, family or goal oriented counseling;
- Treatment, services and supplies provided outside the scope of the license for the institution or practitioner rendering services; (Education, training, custodial care or bed and board while confined to an institution which is primarily a school or other institution for training, a place of rest or a place for the aged, a personal residence;
- Cosmetic Surgery;
- Eye examinations, eyeglasses, or contact lenses to correct refractive errors and related services including surgery performed to eliminate the need for eyeglasses, for refractive errors such as radial keratotomy or keratoplasty and hearing exams, hearing aids, or the fitting of hearing aids;
- Illness or Injury that results from war or an act of war, riot or in the commission or attempted commission of an assault or felony. This includes an act of international armed conflict. It also includes a conflict in which the armed force of any international authority is involved;
- To the extent that payment under the Policy is prohibited by any law of the jurisdiction in which the Covered Person resides;
- Travel or transportation by anyone other than professional ground or Air Ambulance;



## 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 Emergency 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