



HEALTH™
INSURANCE
INNOVATIONS



Principle Advantage

Description of Coverage



The Med-Sense Guaranteed Association (MSGGA), is a not-for profit organization that provides memberships to individuals. Members enjoy access to a variety of health, travel, consumer discounts and business services.

You can count on MSGGA to continuously and aggressively seek out new discounts to add further value to memberships in the association. Services and discounts you will enjoy as a member may include a collection of the following:

ID Resolution Identity Theft Service

The ID resolution, a leader in providing management services, offers victims or suspected victims unlimited access to an assigned fraud specialist who will facilitate the resolution of virtually any identity-related problem.

GymAmerica.com

As a member, you and your family receive special pricing at GymAmerica.com.

Discount Hearing Service

Your source for discounts on quality hearing aids and accessories.

Gateway Medicaid

In an emergency, getting vital health information to medical personnel quickly could be critical.

Vitamin Discount

HealthFitLabs is an on-line/mail order company that sells only the highest-quality natural vitamins, nutritional supplements, and bath and personal care products.

LensCrafters Vision Club

At LensCrafters, one hour service is just the beginning! Your member ID Card brings you and your eligible family members special rates on all materials and services available at LensCrafters.

24-Hour Emergency Roadside Assistance

Association Members can gain peace of mind on the road by registering for Emergency Roadside Assistance.

Travel Assistance Plan

As a member, you receive services through the Travel Assistance Program when traveling more than one hundred (100) miles from your permanent residence.

Hop The Shops

Through a special arrangement with eGroup Manager, you have preferred customer access to HopTheShops.com, a premium on-line shopping mall.

Savers Club® Book

Everyday savings are right at your fingertips! With your membership, you can get a free copy of our popular Savers Club® Book, containing thousands of discounts.

Car Rental Discounts

Take advantage of affordable auto rental from Avis®, Budget®, and Dollar® Rent a Car.

1800Flowers.com

Your Association membership lets you save 15%* when you order flowers and/or gifts from 1800Flowers.com, one of America's top providers of floral and specialty gifts. *Note: *Prices & Discounts are exclusive of applicable service and shipping charges and taxes. Items may vary and are subject to availability, delivery rules and times. Offers available online and by phone. Offers cannot be combined, are not available on all products and are subject to restrictions, limitations and blackout periods. Prices and charges are subject to change without notice. Void where prohibited.*

Carperks Buying Network

This program allows association members to benefit from a National Corporate Pricing Program. The Carperks dealer network has agreed to sell automobiles for a price better than their best Internet price, resulting in a price hundreds of dollars lower than the sales price of the retail sales department.

Hewlett-Packard Computer and Digital Equipment

As a member, you receive discounts on HP notebooks, laptops, servers, printers, digital cameras, handhelds, point-of-sale (scanners, cash registers, etc.) and more.

Customized Web Services - NAC Web Services

NAC Web Services provides the advantage of Website development and maintenance. NAC Web Services boasts an experienced staff of programmers and graphic designers ready to work for you. All of the latest programming capabilities—including HTML, ASP.NET, Flash, XML, and database connectivity—are available to you as an association member.

UPS Express Delivery Services

Improved program - featuring lower rates! Member discounts on UPS delivery services include 14-28% off Next Day Air®/Next Day Air® Saver Letter/Package and Worldwide ExpressSM.

Sprint-Wireless/Cellular and Mobile Broadband

Members receive access to an average savings of 25%-35% compared to Sprint Competitors with a 19% program discount on most rate plans. Other programs are available as well such as Mobile Broadband discounts, savings are exclusive to new Sprint subscribers only.

Office Depot Office Supplies and Furniture

Sign up for the Office Depot program and qualify for discounts off the list price on over 16,000 items. Members report they save an average of 30% when compared to their previous office supplies provider. Buy online from the discounted member website, by phone or fax, or in the retail stores. There is FREE SHIPPING for members.

Principle Advantage

Principle Advantage Limited Benefit Health Insurance
Underwritten by: Companion Life Insurance Company

Available to members of the **Med-Sense
Guaranteed Association (MSGA)***
and is ideal for those who:

**Have health insurance with high deductibles
or out-of-pocket expenses**

Want to supplement coverage you may have

The Principle Advantage plan is available in all states except: AK, AR, CA, CT, HI, ID, MA, MD, ME, MI, MN, MT, NC, NH, NJ, NV, NY, OR, SD, UT, and WA. State options and benefits may vary.



Exclusive Features

Guaranteed Issue for members & their spouses ages 18 through 64, and dependent children through age 26 (all pre-existing condition limitations will apply)

Daily In-Hospital Indemnity - Choice of \$250, \$500, \$750, \$1,000, or \$2,000 per day (Plan 1, 2, 3, and 4 offer a maximum of 31 days per calendar year, all other plans offer a maximum of 30 days per calendar year)

Surgery, Anesthesia, Diagnostic Lab & X-Ray, Preventative Care, Emergency Room Sickness, and Ambulance Benefits

Accident or sickness Outpatient Doctor Office Visits benefit - \$50 or \$80 per day, up to 5 days payable per insured, per calendar year

Doctors Office Preventative Care Benefit - \$75 or \$80 for one day per insured, per calendar year

Freedom to choose any doctor or hospital

*MultiPlan PPO Network is provided through Med-Sense Guaranteed Association and not provided by or affiliated with Companion Life Insurance Company. Individuals considering membership in the Med-Sense Guaranteed Association for plans that include the Limited Benefit Health Insurance plan should check with their state Pre-existing Condition Insurance Plan before enrolling to determine the potential impact of this membership on their eligibility.

This is a brief summary of Limited Benefit Health Insurance underwritten by Companion Life Insurance Company, Columbia, SC. Provided by form number LBHP 3250 DE. Not available in all jurisdictions. Pre-existing conditions are not covered for the first 12 months and benefits are subject to the policy limitations and exclusions. Refer to the policy, certificate and riders for complete details. The plans do not provide the minimum essential health benefits required by federal law nor will the benefits satisfy the individual mandate as defined by the Affordable Care Act (ACA).

PA01252016

Inpatient Benefits

Benefits Per Covered Person **Plan 1** **Plan 2** **Plan 3** **Plan 4** **Plan 5** **Plan 6** **Plan 7** **Plan 8** **Plan 9**

Pre-Existing Conditions

There is a 12-month waiting period before coverage of Pre-Existing Conditions is available for Daily In-Hospital Indemnity Benefits, Surgical Indemnity Benefits and Anesthesia Indemnity Benefits.

	12 Month	12 Month	12 Month	12 Month	12 Month	12 Month	12 Month	12 Month	12 Month
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There is a 30-day waiting period before coverage of Pre-Existing Conditions is available for all other benefits.

	30 Days	30 Days	30 Days	30 Days	30 Days	30 Days	30 Days	30 Days	30 Days
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Daily In-Hospital Indemnity Benefit

Benefit Payable per Day of Confinement	\$500	\$500	\$750	\$1,000	\$500	\$1,000	\$2,000	\$250	\$500
Maximum Number of Days Payable per Calendar Year	31	31	31	31	30	30	30	30	30

Initial Hospital Admission Benefit

Benefit Payable per Day of Initial Confinement	N/A	N/A	N/A	N/A	\$500	N/A	N/A	N/A	N/A
Maximum Number of Days Payable per Calendar Year					1				

In-Patient Surgical Indemnity Benefit

Benefit Payable per Day of In-Patient Surgery	N/A	N/A	\$500	\$750	N/A	N/A	N/A	N/A	N/A
Per Covered Person per Calendar Year									
Maximum Number of Days of In-Patient			1	1					
Surgery per Covered Person per Calendar Year									

Anesthesia Indemnity Benefit (Inpatient or Outpatient)

Benefit Payable per Day of Anesthesia per	N/A	N/A	\$50	\$75	N/A	N/A	N/A	N/A	N/A
Covered Person per Calendar Year									
Maximum Number of Days of Anesthesia per			1	1					
Covered Person per Calendar Year									

Outpatient Benefits

Benefits Per Covered Person **Plan 1** **Plan 2** **Plan 3** **Plan 4** **Plan 5** **Plan 6** **Plan 7** **Plan 8** **Plan 9**

Outpatient Physician Office Visit Indemnity Benefit

Benefit Payable per Day for Outpatient	\$80	\$50	\$80	\$80				\$50	\$50
Physician Office Visit					N/A	N/A	N/A		
Maximum Visits per Calendar Year	5	5	5	5				3	3

Preventative Care Indemnity Benefit

Benefit Payable per Day	\$80	\$75	\$80	\$80				\$50	
Maximum Number of Days Payable per Covered Person per Calendar Year	1	1	1	1	N/A	N/A	N/A	1	N/A

Outpatient Diagnostic X-Ray and Laboratory Indemnity Benefit

Benefit Payable per Day of Testing		\$50	\$50	\$50				\$50	
Maximum number of Testing Days per Covered Person per Calendar Year	N/A	5	5	5	N/A	N/A	N/A	1	N/A

Emergency Room Indemnity Benefit

Benefit Payable per Day	\$150	\$100	\$250	\$300					
Maximum Number of Days Payable per Covered Person per Calendar Year	2	5	5	5	N/A	N/A	N/A	N/A	N/A

Ambulance Service Indemnity Benefit

Benefit Payable per Day	\$150		\$250	\$300					
Maximum Number of Days Payable per Covered Person per Calendar Year	2	N/A	5	5	N/A	N/A	N/A	N/A	N/A

Outpatient Surgical Indemnity Benefit

Benefit Payable per Day of Outpatient Surgery			\$200	\$250					
Per Covered Person per Calendar Year									
Maximum Number of Days of Outpatient Surgery per Covered Person per Calendar Year	N/A	N/A	2	2	N/A	N/A	N/A	N/A	N/A

Outpatient Minor Surgical Indemnity Benefit

Benefit Payable per Day of Outpatient Minor			\$200	\$250					
Surgery Per Covered Person per Calendar Year									
Maximum Number of Days of Outpatient Surgery per Covered Person per Calendar Year	N/A	N/A	2	2	N/A	N/A	N/A	N/A	N/A

Exclusions

With respect to all of the benefits provided under this Policy, no benefits will be payable as the result of:

- (a) suicide or any attempt thereat, while sane;
- (b) any intentionally self-inflicted injury or Sickness;
- (c) rest care or rehabilitative care and treatment;
- (d) cosmetic surgery or care or treatment solely for cosmetic purposes, or complications therefrom. This exclusion does not apply to cosmetic surgery resulting from a covered Accident if initial treatment of the Covered Person is begun within 12 months of the date of the Accident;
- (e) immunization shots and routine examinations such as: health exams; periodic check-ups; pre-marital exams; and routine physicals;
- (f) routine newborn care, including routine nursery charges;
- (g) voluntary abortion, except with respect to the Insured or covered Dependent spouse:
 - (1) where such person's life would be endangered if the fetus were carried to term; or
 - (2) where medical complications have arisen from an abortion;
- (h) normal pregnancy, except for Complications of Pregnancy;
- (i) the treatment of:
 - (1) mental illness;
 - (2) functional or organic nervous disorder, regardless of cause;
 - (3) alcohol abuse;
 - (4) drug use, unless such drugs were taken on the advice of a Physician and taken as prescribed for more than 10 days in any Benefit Year, with respect to payment of the Daily In-Hospital Indemnity Benefit;
- (j) participation in a riot, civil commotion, civil disobedience, or unlawful assembly. This does not include a loss which occurs while acting in a lawful manner within the scope of authority;
- (k) committing, attempting to commit, or taking part in a felony or assault, or engaging in an illegal occupation;
- (l) participation in a contest of speed in power driven vehicles, parachuting, parasailing, bungee-jumping, or hang gliding;
- (m) air travel, except:
 - (1) as a fare-paying passenger on a commercial airline on a regularly scheduled route; or
 - (2) as a passenger for transportation only and not as a pilot or crew member;
- (n) any Accident occurring as a result of the Covered Person being intoxicated (where the blood alcohol content meets the legal presumption of intoxication under the law of the state where the Accident took place);
- (o) sex changes;
- (p) experimental treatments or surgery;
- (q) the reversal of tubal ligation and vasectomies;
- (r) artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications, or Physician's services, unless required by law;
- (s) treatment of exogenous obesity or weight control;
- (t) an act of war, whether declared or undeclared, or while performing police duty as a member of any military or naval organization. This exclusion includes Accident sustained or Sickness contracted while in the service of any military, naval or air force of any country engaged in war. The Company will refund the pro rata unearned premium for any such period the Covered Person is not covered;
- (u) accident or sickness arising out of and in the course of any occupation for compensation, wage or profit. Expenses which are payable under Occupational Disease Law or similar law, whether or not application for such benefits have been made;
- (v) Pre-Existing Conditions, except as described in the Schedule;
- (w) air or ground ambulance service;
- (x) for loss incurred, care of treatment received, or hospital confinement occurring outside of the United States or its possessions except in the case of an emergency; or
- (y) Dentistry or oral surgery except:
 - (1) Excision of impacted third molars; or
 - (2) Closed or open reduction of fractures or dislocation of the jaw.

In addition to the Exclusions and Limitations for all coverages, the following are not covered under the Out-Patient Physician Office Visit Indemnity Benefit and the Outpatient Diagnostic X-Ray and Laboratory Indemnity Benefit:

- (a) visits made, examinations given, or x-rays or laboratory tests performed as an in-patient while Confined to a Hospital;
- (b) routine eye examinations or fitting of glasses;
- (c) fitting of hearing aids;
- (d) dental examinations or dental care other than expenses resulting from accidental injury; and
- (e) benefits which are provided under any other part of the Policy.

Pre-Existing Conditions Limitation

Benefits are not provided for any loss caused by, or resulting from, a Pre-existing Condition, as described in the Schedule; There is a 12-month waiting period before coverage of Pre-Existing Conditions is available for Daily Inpatient Hospital Benefits, Surgical Indemnity Benefits & Anesthesia Indemnity Benefits. There is a 30-day waiting period before coverage of Pre-Existing Conditions is available for all other benefits.

PRE-EXISTING CONDITION means a disease, accident, sickness or physical condition for which a Covered Person: had treatment; incurred expense; took medication; or received a diagnosis or advice from a Physician, during the 12-month period immediately before the Effective Date of coverage. The term Pre-Existing Condition will also include conditions which are related to such disease, Accident, Sickness or physical condition.

Who is eligible to apply for membership?

Principle Advantage provides both Membership benefits and Insurance benefits and is available to individuals from age 18 through age 64 with coverage terminating the day you turn 65.

The Principle Advantage series is available in all states except: AK, AR, CA, CT, HI, ID, MA, MD, ME, MI, MN, MT, NC, NH, NJ, NV, NY, OR, SD, UT, and WA. State options and benefits may vary.

Are there any waiting periods for insurance benefits?

There are no waiting periods for accidental injuries or sickness, but there is a 30 day waiting period before coverage for Pre-Existing Conditions is available for Physician's Office Visits, Preventative Care Benefits, Diagnostics/Labs/X-rays, Emergency Room, and Ambulance Benefits. There is also a 12-month waiting period before coverage for Pre-Existing Conditions is available for Daily Inpatient Hospital Benefits, Surgical Indemnity Benefits & Anesthesia Indemnity Benefits.

Are there any waiting periods for non-insurance Association benefits?

There are no waiting periods. You can begin saving once your payment is accepted and approved.

When does my coverage begin?

If you submit your application today, you can select your plan to be effective as early as 12:01 a.m. the next day. All coverage is subject to approval of your application and receipt of your first payment. Please refer to the plan limitations and exclusions for complete details.

Note: Coverage may not be effective on the 29th, 30th or 31st of any month.

Do I have to use a Multiplan provider?

Members under this plan may choose to be treated within or outside of the Multiplan Network. MultiPlan has almost 800,000 healthcare providers under contract, an estimated 57 million consumers accessing the network products, and 40 million claims processed through the networks each year, giving them more of the experience and resources healthcare payers and providers need to face today's unprecedented cost and competitive pressures. As part of your Membership plan, an arrangement has been negotiated between the Association and Multiplan to treat individuals within the Multiplan Network for a reduced fee over the customary fees of non-Network Providers.

Reimbursement rates will vary according to the source of care as described in your Plan Benefits. In order to use the services of a participating provider, you must present the Identification Card that is provided to you upon purchase of your plan and payment of the membership retail cost. To determine which providers are in the Multiplan Network, call 888-342-7427, or go online to www.multiplan.com.

How do I access/receive my fulfillment package and policy documents?

After you complete your purchase and your payment is approved, your fulfillment package, ID card, Insurance Certificate and any other plan documents are available to you online under your Customer Login. A copy of your membership booklet and ID cards will arrive by mail within 7-10 business days after payment is received and approved. If you cannot download and print these important documents, call HII Customer Service at 1-877-376-5831 to have them mailed to you at no additional cost.

Disclaimer: This is limited benefit health insurance coverage. It is not major medical coverage and it is not intended to replace other major medical coverage. This brochure is a brief description of the Med Sense Guaranteed Association discount and lifestyle benefits. The exact provisions are contained in the Fulfillment Materials that will be issued to the Med Sense Guaranteed Association members upon enrollment. These are not insurance benefits. These are association discount and lifestyle benefits. These plans do not satisfy the requirement to enroll in health insurance under the Affordable Care Act.

Limited Benefit Health Insurance
Underwritten By:



Companion Life Insurance Company, an admitted insurer rated "A+" (Superior) by A.M. Best Company, rating as of February 12, 2015. A.M. Best ratings range from D to A++. Companion Life Insurance Company has sole financial responsibility for its products.

The A.M. Best rating represents an independent opinion from the leading provider of insurer ratings of a company's financial strength and ability to meet its obligations to policyholders.

Association Benefits
provided by:



Billing, Fulfillment, and
Customer Service provided by:



Health Insurance Innovations includes the following services and discounts with the Principle Advantage Limited Benefit Health Insurance Plan:



MultiPlanPPO Network Providers*

Persons insured under this plan may choose to be treated within, or out of, the MultiPlan PPO Network. MultiPlan consists of hospitals, physicians, and other health care providers who have contracted to provide specific medical care at negotiated prices. MultiPlan has almost 800,000 healthcare providers under contract,

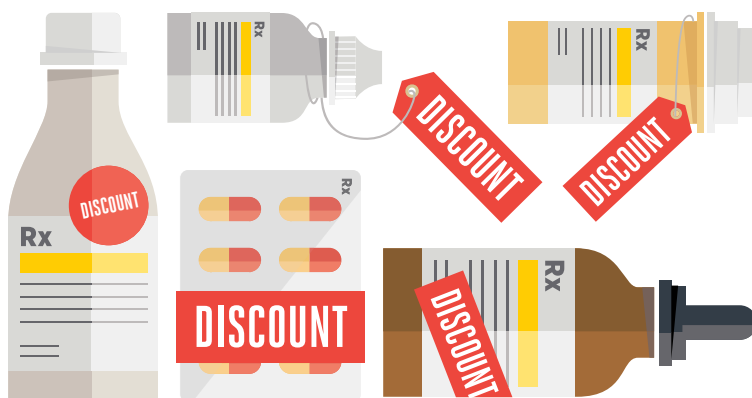
an estimated 57 million consumers accessing the network products, and 40 million claims processed through the networks each year, giving them more of the experience and resources healthcare payers and providers need to face today's unprecedented cost and competitive pressures.



ScripPal Rx*

Medications cost too much. And if you or a family member have asthma, diabetes, heart disease or another illness, costs can quickly skyrocket and make it hard to make ends meet. We believe that peace of mind shouldn't cost an arm and a leg. Save an average of 46%, with potential savings of up to 75%** . This card can be used for your entire family, including pets. Save at more than 60,000 pharmacies nationwide, including Walmart, Target, Walgreens and more. Discounts are at the register. Because this is not insurance, there are no forms to fill and there is no wondering or waiting for reimbursements.

***Based on 2013 national program savings data.*



So many reasons to use Teladoc®!

Teladoc gives you 24/7/365 access to a doctor through the convenience of phone or video consults. It's an affordable option for quality medical care.



Talk to a doctor anytime,
anywhere you happen to
be



Receive quality
care via phone or
online video



Prompt treatment,
average call back in
16 min



A network of doctors
that can treat children
of any age



Secure, personal and
portable electronic
health record (EHR)



No limit on
consults, so
take your time

WHEN CAN I USE TELADOC?

- When you need care now
- If your doctor is unavailable
- If you're considering the ER or urgent care center for a non-emergency issue
- On vacation, on a business trip, or away from home
- For short-term prescription refills

GET THE CARE YOU NEED

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Bronchitis
- Skin problems
- Respiratory infection
- Sinus problems
- And more!

SHARE WITH YOUR PCP

With your consent, Teladoc is happy to provide information about your Teladoc consult to your primary care physician.

Talk to a doctor anytime for Free

 Teladoc.com

 Facebook.com/Teladoc

 **1-800-Teladoc**

 Teladoc.com/mobile

Simple. Comprehensive. Complete. Enjoyable.

Providing personalized service, **Kare360**'s team of expert Patient Advisors work with members to assist in navigating the confusing and expensive world of healthcare. With a suite of dedicated services, **Kare360** will help you take the hassle out of health care saving you valuable time and money.

Physician Search

Helping members find quality family doctors, specialists and surgeons.

Appointment Scheduling

Advisors schedule visits with doctors, labs and more.

Medical Bill Mediation

Unparalleled results in negotiating savings on medical charges.

Eldercare Solutions

Finding solutions for seniors in all areas including living arrangements, transportation, RX delivery, supplemental insurance and more.

Alternative Treatments

Locating care for Chiropractic, Acupuncture, Massage Therapy and more.

Insurance Policy Assistance

Clarification on benefits, help resolving issues.

Surgery Cost Saver

A specialized R.N. will provide a cost, quality and availability comparison of health care facilities in your area for your particular needed procedure. This can be used in consultation with your doctor, enabling you to make an informed decision.

Kare360 is pleased to also provide on-staff chaplains, available by phone to listen and offer counsel in those times when you need it most.

We take the **hassle** out
of healthcare.

