



HEALTH™
INSURANCE
INNOVATIONS

Unified Health One Limited Medical

Group Accident & Sickness Hospital Indemnity Insurance Underwritten by
Unified Life Insurance Company

Membership Benefits: National Congress of Employers Association (NCE)
Billing, and Customer Service provided by: Health Insurance Innovations

Unified Limited Medical NCELIM0415

Plan Overview — A100 and A200

Benefits are based on an annual period from effective date. There is a 30 day waiting period for all sickness benefits, except in Texas.		Benefit Description (Per Insured)	A100	A200
Doctor's Office Visit Primary Care or Specialist The carrier will pay the benefit shown if you incur charges for and require a doctor's office visit due to injuries received in a Covered Accident or due to a Covered Sickness.		Per Day Maximum (Primary and Specialty Care Visits Combined)	\$50 3 Days	\$50 5 Days
Emergency Room The carrier will pay the Emergency Room Benefit, shown on the Certificate Schedule, for any day a Covered Person incurs charges for and requires medical care from an emergency room. The visit must occur on a day that the coverage is in force.		Per Day Maximum	\$50 1 Day	\$50 1 Day
Hospital Confinement The carrier will pay the benefit shown on the Certificate Schedule if you incur charges for and are confined in a hospital due to a Covered Accident or Covered Sickness.		Per Day Maximum	\$100 30 Days	\$200 30 Days
Surgery Benefit and Anesthesia (Inpatient and Outpatient) The carrier will pay the benefit shown on the Certificate Schedule for any day in which Surgery is performed on an inpatient/ outpatient basis. If two surgical procedures are performed on the same day, the carrier will pay for the surgical procedure which has the highest dollar value.		Maximum Days per Coverage Period Anesthesia is a Percentage of the Surgery Fee Schedule paid to Surgeon	N/A N/A	N/A N/A
Diagnostic X-ray & Laboratory Tests Benefits (including interpretation) The carrier will pay the benefit shown on the Certificate Schedule if a Covered Person incurs charges for Outpatient diagnostic x-ray, and/or laboratory testing caused by a Covered Accident or Covered Sickness. <i>*If a Covered Person has more than one Basic Pathology, Basic Radiology or Advance Study on the same day, We will pay the benefit that has the highest dollar value</i>		Per Day Maximum Benefits for all Diagnostic X-Ray and Laboratory Benefits	N/A N/A	N/A N/A
Accidental Death Benefit The carrier will pay the Accidental Death benefit as listed in the Certificate Schedule. Covered Spouse - 50% of Named Insured Benefit Child(ren) - 25% of Named Insured Benefit Accidental Death Loss Period Loss within 90 days from the date of the Accident		Accidental Death Principal Sum for Named Insured	\$10,000	\$10,000
Critical Illness Benefit The Carrier will pay for the First Ever Occurrence, while coverage under the Policy is in force, of one of the following covered conditions or procedures, as defined in the Certificate: <ul style="list-style-type: none"> • Heart Attack • Invasive Cancer • Cancer In Situ • Stroke • Major Organ Transplant • End-Stage Renal Failure 		Maximum Benefit	N/A	N/A

*This is a limited benefit medical insurance policy underwritten by Unified Life Insurance Company that pays benefits based on the schedule in the certificate and is separate from the NCE Membership. This insurance does not meet the requirements of the PPACA. Limitations and exclusions apply.

Plan Overview — A500 and A750

Benefits are based on an annual period from effective date. There is a 30 day waiting period for all sickness benefits, except in Texas.		Benefit Description (Per Insured)	A500	A750
Doctor's Office Visit Primary Care or Specialist The carrier will pay the benefit shown if you incur charges for and require a doctor's office visit due to injuries received in a Covered Accident or due to a Covered Sickness.		Per Day Maximum	\$50 5 Days	\$50 5 Days
Emergency Room The carrier will pay the Emergency Room Benefit, shown on the Certificate Schedule, for any day a Covered Person incurs charges for and requires medical care from an emergency room. The visit must occur on a day that the coverage is in force.		Per Day Maximum	\$50 1 Day	\$75 1 Day
Hospital Confinement The carrier will pay the benefit shown on the Certificate Schedule if you incur charges for and are confined in a hospital due to a Covered Accident or Covered Sickness.		Per Day Per Coverage Year	\$500 30 Days	\$750 30 Days
Surgery Benefit and Anesthesia (Inpatient and Outpatient) The carrier will pay the benefit shown for any day in which Surgery is performed on an inpatient or outpatient basis. If two surgical procedures are performed on the same day, the carrier will pay for the surgical procedure which has the highest dollar value.		Percentage of Surgical Fee Schedule Maximum Surgeries per Coverage Year Anesthesia Percentage of fee schedule paid to Surgeon	70% 3 20%	80% 3 20%
Diagnostic, X-Ray and Laboratory Tests The carrier will pay the benefit shown if you incur charges for Outpatient diagnostic, x-ray, and/or laboratory testing caused by an accident or illness. *If a Covered Person has more than one Basic Pathology, Basic Radiology or Advance Study on the same day, We will pay the benefit that has the highest dollar value.		Per Day Maximum Days	\$50 2 Days	\$50 2 Days
ICU/CCU The carrier will only pay benefits if the Hospital Confinement Benefit is also payable. Benefit will be payable in addition to the Hospital Confinement Benefit.		Per Day Maximum	N/A N/A	N/A N/A

*This is a limited benefit medical insurance policy underwritten by Unified Life Insurance Company that pays benefits based on the schedule in the certificate and is separate from the NCE Membership. This insurance does not meet the requirements of the PPACA. Limitations and exclusions apply.

Plan Overview — A500 and A750

Benefits are based on an annual period from effective date. There is a 30 day waiting period for all sickness benefits, except in Texas.		Benefit Description (Per Insured)	A500	A750
Inpatient Mental Health Carrier will pay the Mental Health Inpatient Benefit, shown on the Certificate Schedule, for each day of confinement if a Covered Person is confined to a Hospital or licensed institution to provide treatment for Mental Illness.		Per Day Days Per Coverage Year	\$250 60 Days	\$375 60 Days
Outpatient Mental Health For Outpatient Benefit, the carrier will pay the Mental Health Outpatient Benefit, shown on the Certificate Schedule, for Covered Persons receiving treatment as a result of Mental Illness.		Per Day Per Coverage Year	\$50 20 Days	\$50 20 Days
Critical Illness Benefit The Carrier will pay for the First Ever Occurrence, while coverage under the Policy is in force, of one of the following covered conditions or procedures, as defined in the Certificate: <ul style="list-style-type: none"> • Heart Attack • Invasive Cancer • Cancer In Situ • Stroke • Major Organ Transplant • End-Stage Renal Failure 		Maximum Benefit	\$1,000	\$1,000
Accidental Death Benefit The carrier will pay the Accidental Death benefit as listed in the Certificate Schedule. Covered Spouse – 50% of Named Insured Benefit Child(ren) – 25% of Named Insured Benefit Accidental Death Loss Period Loss within 90 days from the date of the Accident		Accidental Death Principal Sum for Named Insured	\$10,000	\$10,000
Supplemental Accident Benefit: Carrier will pay the Supplemental Accident Benefit, shown on the Certificate Schedule, if any Covered Person incurs charges for Appropriate Treatment of an injury sustained in a Covered Accident received within 180 days of the Covered Accident. Carrier will pay this Supplemental Accident Benefit in addition to any benefits payable under the Certificate.				
Supplemental Accident Benefit—Emergency Room Carrier will pay the Emergency Room benefit for any day a Covered Person incurs charges for and requires medical care from an emergency room due to injuries received in a Covered Accident or due to a Covered Sickness. Carrier will not pay the Emergency Room benefit amount if the Covered Person is Confined in a Hospital as a result of the injuries received in the Covered Accident or due to the Covered Sickness that caused the visit to the Emergency Room.		ER Visit, Per Day Per Coverage Year	\$250 1 Day	\$250 1 Day
Supplemental Accident Benefit—Inpatient Admission Carrier will pay the Inpatient Admission benefit for each day a Covered Person incurs room and board charges for admission to a hospital as the result of a covered accident.		Inpatient Admission, Per Accident Per Coverage Year	\$500 1	\$500 2

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NCE Association Membership Benefits

Waiting Periods

There are no waiting periods or pre-existing condition limitations on the following membership benefits!

- Medical PPO Discount through MultiPlan
- Pharmacy Discount Card
- Vision Care
- Dental Care
- Hearing
- Alternative Care
- Infertility Treatment

Alternative Medicine

Average savings 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

Members receive customized care and, if needed, purchase brand-name hearing aids at substantial savings. Save 20% to 50% off Manufacturers 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.

Laboratory Savings Program

The Laboratory Savings Program offers services for 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.

Medical Bill Negotiations

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

Medical Supplies and Equipment

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

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 members with access to a comprehensive library of health information that is available to them over the phone or online.

24/7 Nurse Help Line

Members 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. The GapAfford Plus program does not meet the requirements of the PPACA. Your customers must pay for services at the time they are rendered. If they use a participating dentist, they will receive a discount. Neither GapAfford Plus, Aetna, NBBI or 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.

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. Roughly 41 million Americans go without healthcare every day; families of the self-employed, or those working for small businesses, make up sixty percent of that total. The NCE seeks to provide its members with reliable services, resources, and benefits regardless of one's circumstances or means.

How does someone Join?

All enrollment applications must be submitted by an Insurance Agent licensed and appointed in the customer's resident state. Contact Health Insurance Innovations at 1-877-376-5831 ext 401 for more information.

Subject to change, this program is available in AL, AZ, AR, DE, FL, GA, HI, IL, IA, KS, KY, LA, MA, MI, MS, MT, NE, NV, ND, OK, PA, SC, TN, TX, VA, WV, WI, WY.

Membership Packet and ID Cards

Once a successful payment has been processed with an application, members will instantly receive a Purchase Confirmation Email from Health Insurance Innovations. The email includes a unique user ID and password, as well as a link to the customer portal where the customer is able to access their NCE Membership handbook, Certificate of Insurance, and temporary insurance ID cards. A welcome letter and ID cards will be sent by mail within 7-10 business days of enrollment.

Monthly Membership

Effective dates are available any day of the month, and your customer's insurance can be effective as early 12:01 a.m. the day following the transmission date of their application. Customers may also choose a later effective date, but not to exceed 31 days from the date of transmission. We accept automatic monthly payments by Visa, MasterCard, or Bank Draft.

Policy issued to National Congress of Employers Association, underwritten by Unified Life Insurance Company. Billings processed by Health Insurance Innovations (HII).



Your customers also get the ScripPal Rx benefit for FREE



ScripPal

There are no fees or charges to enroll, and it never expires.

It's Smart

Save an average of 46%*. You can use this card for the whole family, including pets.

It's Easy

Save at more than 60,000 pharmacies nationwide, including Walmart, Target, Walgreens and more.



Customer Care and Pharmacy Locator

1-866-788-6846

PharmLocator.com

Pharmacist Help Desk

1-800-404-1031

Administered by Medical Security Card Company, LLC of Tucson, AZ.

Provided by



DISCOUNT ONLY. NOT INSURANCE.

Discounts are available exclusively through participating pharmacies and providers. The range of the discounts will vary depending on the type of provider and services rendered. This program does not make payments directly to providers.

**The benefits described on this page are not insurance and are not affiliated with Unified Life Insurance Company.

Members are required to pay for all health care services. You may cancel your registration at any time or file a complaint by contacting Customer Care at 1-866-788-6846. All prescription drugs are eligible for discount.

*Based on 2013 national program savings data on brand name and generic medications.

Definitions

General Definitions

Additional definitions may be contained in other Certificate benefit provisions or any endorsement or rider.

Accident

Accident means an unintended or unforeseen bodily injury sustained by a Covered Person, wholly independent of disease, bodily infirmity, illness, infection, or any other abnormal physical condition.

Confined or Confinement

Confined or Confinement means the assignment to a bed as a resident inpatient in a Hospital on the advice of a Physician or Confinement in an Observation Unit within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician.

Coverage Year

Coverage Year means a consecutive 12-month period or any part of such period, as shown on the Certificate Schedule.

Covered Accident

A *Covered Accident* is an Accident which:

- occurs after the Certificate Effective Date shown on the Certificate Schedule;
- occurs while this Certificate is in force; and
- is not excluded by name or specific description in this Certificate.

Covered Person(s)

You and Your Dependents who are insured under the Group Policy.

Covered Sickness

A *Covered Sickness* means a Sickness which:

- occurs after the Certificate Effective Date shown on the Certificate Schedule;
- occurs while this Certificate is in force; and
- is not excluded by name or specific description in this Certificate.

Doctor or Physician

A *Doctor or Physician* means a legally qualified practitioner of the healing arts acting within the scope of his or her license and is not an Immediate Family Member.

For purposes of this definition, Immediate Family Member means a Covered Person's Spouse, son, daughter, mother, father, sister, or brother.

Definitions (Continued)

Hospital

A *Hospital* means a short-term, acute general hospital that is:

- primarily engaged in providing, by or under continuous supervision of physicians, to inpatients diagnostic and therapeutic services for diagnosis, treatment and care of injured or sick persons;
- has organized departments of medicine and major surgery;
- has a requirement that every patient must be under the care of a physician or dentist;
- provides 24 hour nursing care by or under the supervision of RNs;
- has in effect a hospital review plan applicable to all patients which meets at least the standards set forth in Section 1861(k) of the United States Public Law 89-97 (42 USCA 1395x[k]);
- duly licensed by the agency responsible for licensing such hospitals; and
- not, other than incidentally, a place of rest, a place primarily for the treatment of tuberculosis, a place for the aged, a place for drug addicts, alcoholics, a place primarily for treatment of mental disorders or chemical dependency or a place for convalescent, custodial, educational or rehabilitative care.

Medically Necessary

Medically Necessary means a service or supply that is necessary and appropriate for the diagnosis or treatment of an injury or Sickness based on generally accepted current medical practice.

A service or supply will not be considered Medically Necessary if:

- it is provided only as a convenience to the Covered Person or provider;
- it is not appropriate treatment for the Covered Person's diagnosis or symptoms;
- it exceeds in scope, duration or intensity that level of care which is needed to provide safe, adequate and appropriate diagnosis or treatment; or
- it is experimental/investigational treatment.

The fact that a Physician may prescribe, authorize, or direct a service does not, of itself, make it Medically Necessary or covered by the Policy.

Named Insured

A *Named Insured* is a person who is a member of an eligible class and holds a certificate of coverage.

Observation Unit

An *Observation Unit* is a specified area within a Hospital, apart from the emergency room, where a patient can be monitored following outpatient surgery or treatment in the emergency room by a Physician; and which:

- is under the direct supervision of a Physician or registered nurse; and
- is staffed by nurses assigned specifically to that unit; and
- provides care seven days per week, 24 hours per day.

Definitions (Continued)

Pre-existing Condition

Pre-existing condition means a condition (whether physical or mental), regardless of the cause of the condition, for which medical advice, diagnosis, care or treatment was recommended or received from a physician within a 12 month period preceding the effective date of coverage of the Covered Person.

Sickness

Sickness means an illness, infection, disease or any other abnormal physical condition not caused by an Accident.

Sickness Benefit Waiting Period

Sickness Benefit Waiting Period means the period of time during which benefits for Sickness are not paid. The Sickness Benefit Waiting Period is shown on the Certificate Schedule.

Emergency Room

Emergency Room means a portion of a Hospital where emergency diagnosis and treatment of a Sickness or Accident is provided.

Experimental/Investigational

A drug, device or medical care or treatment will be considered *experimental/investigational* if:

- The drug or device cannot be lawfully marketed without approval of the U.S. Food and Drug Administration and approval for marketing has not been given at the time the drug or device is furnished;
- The informed consent document utilized with the drug, device, medical care or treatment states or indicates that the drug, device, medical care or treatment is part of a clinical trial, experimental phase or investigational phase or if such a consent document is required by law;
- The drug, device, medical care or treatment or the patient informed consent document utilized with the drug, device or medical care or treatment was reviewed and approved by the treating facility's Institutional Review Board or other body serving a similar function, or if federal or state law requires such review and approval; or
- Reliable evidence shows that the drug, device or medical care or treatment is the subject of ongoing Phase I or Phase II clinical trials, is the research, experimental study or investigational arm of ongoing Phase III clinical trials, or is otherwise under study to determine the maximum tolerated dose, its toxicity, its safety, its efficacy or its efficacy as compared with a standard means of treatment or diagnosis.

Reliable evidence means only: published reports and articles in authoritative medical and scientific literature; written protocol or protocols by the treating facility studying substantially the same drug, device or medical care or treatment; or the written informed consent used by the treating facility or other facility studying substantially the same drug, device, medical care or treatment. Benefits will be considered in accordance with the drug or device at the time it is given or when medical care is received.

Limitations & Exclusions

Membership Eligibility Information

The Limited Benefit Health Insurance Plan is provided to eligible members of National Congress of Employers (NCE) Association who are under age 65 and not Medicare eligible.

Spouses and dependent children up to age 26 if a full time student.

Coverage cannot be issued to a child only (under age 18)

Waiting Period For Sickness

Loss caused by or relating to Sickness will not be covered for this first 30 days after the Certificate Effective Date of each Covered Person.

Limitations and Exclusions

We will not pay benefits for treatment, services or supplies which:

- Are not Medically Necessary;
- Are not prescribed by a Doctor as necessary to treat Sickness or injury;
- Are experimental/investigational in nature, except as required by law;
- Are received without charge or legal obligation to pay; or
- Is provided by an immediate family member.
- Additional Limitations and Exclusions:
- Except as specifically provided for in this Policy or any attached Riders, We will not pay benefits for Sickness or injuries that are caused by:
- Dental Procedures – Dental care or treatment except for such care or treatment due to accidental injury to sound natural teeth within 12 months of the accident and except for dental care or treatment necessary due to congenital disease or anomaly.
- Elective Procedures and Cosmetic Surgery – Cosmetic surgery, except that cosmetic surgery shall not include 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 disease or anomaly of a covered dependent child which has resulted in a functional defect.
- Felony or Illegal Occupation Commission of or attempt to commit a felony or to which a contributing cause was the insured's being engaged in an illegal occupation.
- Manipulations of the Musculoskeletal System –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 or of or in the vertebral column.
- Policy maximum limits are based on coverage year.

- Suicide or Injuries Which Any Covered Person Intentionally Does to Himself- suicide, attempted suicide or intentionally self-inflicted injury.
- War or Act of War. War or act of war (whether declared or undeclared; participation in a felony, riot or insurrection; service in the Armed Forces or units auxiliary thereto. Losses as a result of 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.
- Work-related Injury or Sickness. Work-related Injury or Sickness, whether or not benefits are payable under any state or federal Workers' Compensation, employer's liability or occupational disease law or similar law.
- Pregnancy

Pre-existing Condition Limitation:

There is no coverage for a pre-existing condition for a continuous period of 12 months following the effective date of coverage under this Policy.

This limitation does not apply to:

- genetic information in the absence of a diagnosis of the condition related to such information; and
- a newborn child who is enrolled in the plan within 31 days after birth; nor to a child who is adopted or placed for adoption before attaining 18 years of age; and as of the last day of the 31-day period beginning on the date of birth, adoption or placement for adoption, is covered under creditable coverage.

Always refer to the Certificate for full definitions, eligible benefits and limitations and exclusions. You will receive the Certificate in your fulfillment package. This program is not major medical coverage or a substitute for Major Medical coverage. It does not satisfy the requirement for minimum essential coverage under ACA. What you are buying is a Limited Medical Benefit Plan under which the Plan pays the fixed dollar amount for only those covered benefits listed in the Certificate Schedule. The plan limitations are disclosed in the certificate of coverage provided in the fulfillment kit. The Limited benefit plan has a pre-existing condition limitation. Plans are not available in all states. Check the state availability on the website. Certain provisions of the plan vary by state. There is a 30 day free look period.

Underwritten by:



UNITED LIFE INSURANCE COMPANY

Billing, Fulfillment, and Customer Service

