



Understanding Limited Medical Indemnity Plans

Snapshot

- Guaranteed acceptance if eligibility is met and available in state
- Eligibility – NFM members ages 18-64, living in the U.S.
- Next day coverage on accidents; 30-day wait for sickness; 12 month wait on pre-existing conditions for hospital, ICU/CCU, surgery, and anesthesia benefits.
- Individual, one+child, one+spouse, and family coverage

Great When:

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

Each Plan Offers

- Office visit benefits
- Wellness visit benefits
- Hospital benefits
- Surgery benefits
- Anesthesia benefits
- Diagnostic tests, x-rays, and laboratory
- Emergency room
- Accident expense benefits
- AD&D
- Discount drug card included
- Beech Street PPO Network
- Next-day coverage for accidents
- 30-day wait for sickness
- 12-month wait for pre-existing conditions for hospital, ICU/CCU, surgery, and anesthesia benefits

What is Limited Medical Indemnity Insurance?

- Offers benefits for specified procedures up to a certain limit or cap. Thereafter, the insured is responsible.
- Offers first-dollar coverage; there are no deductibles or co-payments.
- Benefits are paid directly to the doctor/provider at the insured's option.
- ***Guaranteed Acceptance*** is based on NFM member eligibility and state availability; there are no medical questions or underwriting.
- Although not designed to replace existing coverage, if applicable, it can be used as a supplement with a high deductible comprehensive plan.

Limited Medical Indemnity vs. Individual Major Medical

Limited Medical Indemnity	Individual Major Medical
Good Front-End Coverage <ul style="list-style-type: none">> 100 percent first dollar coverage for most benefits> Provides medical coverage for basic health issues> May visit any doctor; utilizing the network provides additional pre-negotiated discounts and savings.	Comprehensive Coverage; High Limits <ul style="list-style-type: none">> Typically \$1 million or more of maximum coverage> Great for major illness and accidents
How Benefits Are Paid <ul style="list-style-type: none">> No deductibles to meet> No co-insurance> Benefits are effective next day for accident, at 30 days for sickness, and after 12 months for pre-existing conditions for hospital, ICU, surgery, and anesthesia benefits	How Benefits Are Paid <ul style="list-style-type: none">> Deductibles> Co-insurance> Co-pay
No Underwriting <ul style="list-style-type: none">> A guaranteed issue program - no eligible member will be turned down> No medical questions or exams required	Extensive Underwriting to Qualify <ul style="list-style-type: none">> Underwriting time can take up to 60 days> Pre-existing conditions limitation applies to all benefits
Rates <ul style="list-style-type: none">> Plans are not-age rated; rates are the same for everyone based on state> Rates are based on group demographics> Allow individuals in many situations access to coverage	Rates <ul style="list-style-type: none">> Rates are determined by age, sex, location, and other demographic characteristics> Typically costly even for healthy individuals

What does pre-existing conditions mean?

- A pre-existing condition is a medical condition, injury, or sickness, not excluded by name or specific description, for which medical advice, consultation, care, or treatment was recommended by, or received from, a doctor within the 12-months prior to the effective date of coverage.
- A pre-existing condition limitation also applies if symptoms existed within the 12-months prior of the effective date of coverage that would cause a reasonable person to seek consultation, care, or treatment from a doctor.
- "Consultation" means evaluation, diagnosis, or medical advice given without the necessity of a personal examination or visit. May vary by state.
- The pre-existing condition limitation applies only to surgery, anesthesia, hospital, and ICU/CCU benefits.

Provider Network

- Powerful PPO network of doctors and hospitals with pre-negotiated discounts for savings in addition to the insurance benefits of plan, but you are free to visit any doctor or hospital you want.
- **Beech Street**
 - Largest PPO network in the U.S.
 - 560,000+ practitioners
 - 5,000+ hospitals
 - 85,000+ ancillary network providers
 - Even if all eligible benefits are exceeded, the network may still provide discounts

Most Common Exclusions:

- Coverage is not provided to members age 65 and over; coverage will terminate at the end of the monthly billing cycle prior to turning age 65.
- Routine health checkups or immunizations for covered person ages 6 and older except as specifically provided; allergy testing.
- Spinal manipulations and manual manipulative treatment or therapy or physiotherapy.
- Normal pregnancy or childbirth, except for complications of pregnancy.
- Treatment or removal of warts, moles, boils, skin blemishes or birthmarks, bunions, acne, corns, calluses, the cutting and trimming of toenails, care for flat feet, fallen arches or chronic foot strain.
- Treatment of mental or nervous disorders, or alcohol or substance abuse, unless specifically provided for under this plan.
- Prescription medicines; a discount prescription card is provided.
- Changes to coverage can only be made only if the change is the result of a qualifying life event (marriage, divorce, the death of your spouse, or the birth or adoption of a child).
- If coverage is cancelled, persons may not re-enroll until 6 months after their termination date.

Limitations and Exclusions

Benefits will not be paid for charges or loss caused by, or resulting from, any of the following:

Suicide or any intentionally self-inflicted Injury; (May vary by state)

Any drug, narcotic, gas or fumes, or chemical substance voluntarily taken, administered, absorbed or inhaled unless prescribed by, and taken according to the directions of, a Doctor (accidental ingestion of a poisonous substance is not excluded.);

Commission, or attempt to commit, a felony;

Participation in a riot or insurrection;

Driving under the influence of a controlled substance, unless administered on the advice of a Doctor;

Driving while Intoxicated. "Intoxicated" will have the meaning determined by the laws in the jurisdiction of the geographical area where the loss occurs.

Declared or undeclared war or act of war;

Nuclear reaction or the release of nuclear energy. However, this exclusion will not apply if the loss is sustained within 180-days of the initial incident and:

The loss was caused by fire, heat, explosion or other physical trauma which was a result of the release of nuclear energy; and

The Covered Person was within a 25-mile radius of the site of the release either:

At the time of the release; or

Within 24-hours of the start of the release; or

Occurs while he is in the issue state of this Certificate;

Routine health checkups or immunizations for Covered Person aged 6 and older except as specifically provided; allergy testing;

Surgery to correct vision or hearing; eyeglasses, contact lenses and hearing aids, braces, appliances, or examinations or prescriptions therefore;

Dental care, x-rays, or treatment other than Injury to natural teeth and gums resulting from an accidental Injury and rendered within 6-months of the Injury;

Spinal manipulations and manual manipulative treatment or therapy or physiotherapy;

Weight loss or modification and complications arising therefrom, including surgery and any other form of treatment for the purpose of weight loss or modification;

Rest cures or custodial care, or treatment of sleep disorders;

Treatment, services or supplies received outside of the U.S. except for acute Sickness or Injury sustained during the first 30-days of travel outside the U.S.;

Normal pregnancy or childbirth, except for Complications of Pregnancy;

Any drug, treatment, or procedure that either promotes or prevents conception or childbirth regardless of what the drug, treatment, or procedure was originally prescribed or intended for;

Treatment of temporomandibular joint (TMJ) disorders involving the installation of crowns, pontics, bridges or abutments, or the installation, maintenance or removal of orthodontic or occlusal appliances or equilibration therapy;

Cosmetic surgery. This Exclusion does not apply to reconstructive surgery:

On an injured part of the body following trauma, infection or other disease of the involved part;

Of a congenital disease or anomaly of a covered dependent newborn or adopted infant; or

On a non-diseased breast to restore and achieve symmetry between two breasts following a covered Mastectomy;

The repair or replacement of existing artificial limbs, orthopedic braces, or orthotic devices; dentures, partial dentures, braces or fixed or removable bridges;

Treatment or removal of warts, moles, boils, skin blemishes or birthmarks, bunions, acne, corns, calluses, the cutting and trimming of toenails, care for flat feet, fallen arches or chronic foot strain;

Treatment of Mental or Nervous Disorders, or alcohol or substance abuse, unless specifically provided for under this Certificate;

Prescription medicines;

Any Injury that is caused by flight or travel in, or upon:

An aircraft or other, craft designed for navigation above or beyond the earth's atmosphere except as a fare-paying passenger;

An ultra light, hang-gliding, parachuting or bungi-cord jumping;

A snowmobile;

Any two or three wheeled motor vehicle;

Any off-road motorized vehicle not requiring licensing as a motor vehicle;

Any watercraft or other craft designed for water use above or beneath the water, except as a fare-paying passenger;

Any accidental Injury where the Covered Person is the operator of a motor vehicle and does not possess a current and valid motor vehicle operator's license;

Services, treatment or loss:

Rendered in any Veterans Administration or Federal Hospital, except if there is a legal obligation to pay;

Payable by any automobile insurance policy without regard to fault. (Does not apply in any state where prohibited);

Which a Covered Person would not have to pay if he did not have insurance;

Provided by a Doctor, Nurse or any other person who is employed or retained by a Covered Person or who is a member of a Covered Person's Immediate Family;

Covered by state or federal worker's compensation, employers liability, occupational disease law, or similar laws;

Injury or Sickness sustained while on active duty in the armed forces of any country. Upon receipt of proof of service, we will refund, any unearned premium paid on a pro rata basis;

Hemorrhoids, tonsils, adenoids, middle ear disorders, any disease or disorder of the reproductive organs unless the loss is incurred at least 6-months after the Covered Person becomes insured under this Certificate;

Elective treatment or surgery and treatment, procedures, products or services that are experimental or investigative. "Experimental or Investigative" means a drug, device or medical treatment or procedure that:

Cannot lawfully be marketed without approval of the United States Food and Drug Administration and approval for marketing has not been given at the time of being furnished;

Has Reliable Evidence indicating it is the subject of ongoing clinical trials or is under study to determine its maximum tolerated dose, toxicity, safety, efficacy, or its efficacy as compared with the standard means of treatments or diagnosis; or

Has Reliable Evidence indicating that the consensus of opinion among experts is that further studies or clinical trials are necessary to determine its maximum tolerated dose, toxicity, efficacy, or its efficacy as compared with the standard means of treatment or diagnosis.

"Reliable Evidence" means (i) published reports and articles in authoritative medical and scientific literature; (ii) the written protocol(s) of the treating facility or the protocols of another facility studying substantially the same drug, device, medical treatment or procedure; or (iii) the written informed consent used by the treating facility or by another facility studying substantially the same drug, device, or medical treatment or procedure.