



Learn more about Assurant Health AccessSM [Plan type]

Here is an explanation of how your plan works, the features and benefits you receive, and how you can save on health care expenses.

How your plan works

With this plan, you won't have to pay a deductible. You pay a monthly premium, and we help cover eligible services by paying fixed cash amounts to you or your doctor.

The fixed amount we pay depends on the type of medical service and whom you choose as a provider. With this plan, you have access to First Health Network. You'll save money by going to in-network providers because we've pre-negotiated a lower cost for services with them.

After we pay fixed amounts to you or your providers, there may still be a remaining balance due, which you'll be responsible for paying. These are called out-of-pocket costs, and your plan includes help minimizing them, at no extra cost.



YOU'LL SAVE MONEY BY USING NETWORK PROVIDERS

This plan is part of the First Health Network. Its doctors have agreed to charge our policyholders a lower cost for services.

To find a network doctor, call 888.367.3102 or visit assuranthealth.com/FHN.

How your plan saves you money

Example: without your plan, a trip to the hospital for a broken arm would cost you \$2684.* This includes charges for:

- ER
- Cast application
- Follow-up visits (4)
- Follow-up x-rays (5)

With your plan, you pay a fraction of these total charges:



*Amounts based on Assurant Health claims data and Health Payment Advocates negotiation data. Results may vary.

What your plan covers

Here's what you can expect us to pay toward health services. For additional information, contact us at [Phone #] or visit us online at members.assuranthealth.com.

| BASIC CARE | |
|--|--|
| | <i>Plan pays</i> |
| Office visits | <ul style="list-style-type: none">• [\$75] per office visit• [4] visits per calendar year |
| Prescription drugs | <ul style="list-style-type: none">• Discounts on prescription drugs• [[\$10] per generic prescription]• [[\$35] per brand prescription]• [[\$750] per calendar year for all prescriptions] |
| Allergy shots and vaccinations | <ul style="list-style-type: none">• [\$10] per immunization and [\$10] per allergy shot• [\$100] per calendar year for all allergy shots and immunizations |
| HOSPITAL STAYS AND SURGERIES | |
| Inpatient hospital stays | <ul style="list-style-type: none">• [\$3,000] per day for sickness• [\$6,000] per day for injury• [\$1] million per calendar year for all inpatient hospital stays |
| Inpatient and outpatient surgery | <ul style="list-style-type: none">• Benefit amounts paid are at least 150% of 2010 Medicare Physician Fee Schedule rates. See the <i>Surgical Benefit Schedule</i> for details.¹ |
| General anesthesia | <ul style="list-style-type: none">• [\$200] for each procedure requiring anesthesia• Up to [3] procedures each calendar year |
| Ambulances and emergency medical helicopters | <ul style="list-style-type: none">• [\$100] for ambulances and [\$1,500] for emergency medical helicopters• Up to [2] trips total per calendar year |
| Emergency room/ Urgent care | <ul style="list-style-type: none">• [\$400] per ER visit and [\$100] per urgent care visit• [1] ER visit and [1] urgent care visit per calendar year |
| OTHER BENEFITS | |
| Outpatient medical events | <ul style="list-style-type: none">• Laboratory services: [\$100] per surgical pathology test and [\$15] per laboratory service, excluding surgical pathology• Radiology services: [\$130] per mammogram, [\$300] per CT scan, [\$450] per MRI scan, [\$250] per PET scan and [\$50] per other radiology service, including x-ray and ultrasound• Physical medicine services: [\$25] per occupational, physical and speech therapy visit• [\$25] per other outpatient event not listed• [\$3,000] per calendar year for all outpatient procedures |
| Lifetime maximum | <ul style="list-style-type: none">• [\$3 million] |

¹ The surgical services benefit is determined by the CPT code for the procedure. Unlike Medicare, you may be responsible for the difference between the physician charge and the plan benefit payment. For help maximizing your plan's benefits, call Patient Care or Assurant Health. Call HPA for help negotiating discounts and payment plans on amounts you may owe.

All benefits are subject to your contract's terms and limitations.

How to receive coverage benefits

When you go to a doctor or medical facility, you'll need to choose how you'd like us to pay benefits.

You can have Assurant Health pay your network providers directly after they submit your claim

This is called assigning benefits. With this option, you can save money because network providers offer an average discount of 30-40%.

To assign benefits at the time of treatment, be sure to ask your provider for the forms needed to "assign benefits."
Your provider will bill us directly.



We will process your claim and send you an Explanation of Benefits (EOB). This will explain what your plan covered and what your provider may bill you.



We will pay your provider a fixed amount to help cover the charges listed on the EOB. If you owe additional amounts, you will have to pay those.

OR

You can receive cash benefits from Assurant Health after you or your provider submit a claim

With this option, your provider may ask you to pay up front at the time of your treatment, and you will need to submit all claims to us.

Your provider will send you a bill for any charges that aren't submitted to us directly. Use the address on the back of your medical insurance ID card to submit any bills to us.



We will process your claim and send you an EOB. This will explain what your plan covered.



We will pay you a fixed amount of cash benefits to help cover the charges listed on the EOB. You will be responsible for paying your provider if you did not pay at the time of treatment. If you owe additional amounts, you will have to pay those.

[Tired of paperwork? Sign up to go paperless for online access to your Explanation of Benefits (EOB) documents at members.assurant.com.]

How you can save additional money

To help reduce out-of-pocket costs, your plan provides you with benefits that can help you save money.

Use your plan for preventive care

By scheduling regular medical checkups, you may help prevent serious illness and costly treatment. Your plan provides fixed benefits to help you pay for a variety of preventive services, including:

- Annual exams
- Well-child care
- Mammograms
- Immunizations
- Pap tests

And don't forget to take advantage of network discounts by using First Health Network doctors!

Find specific costs *before* going to the doctor

Assurant Price Check displays *guaranteed** prices for common medical services, so you know costs before you schedule an appointment. This convenient website provides estimates specific to your location, helping you find local doctors and treatments within your budget. You can also use the site to find network providers and compare prices.

Get help understanding your benefits

Patient Care is a network of advocates that works to:

- Compare cost and quality information for doctors and hospitals
- Act as a go-between with doctors, hospitals and nurses
- Answer questions about health care issues

Get help negotiating medical bills

Both Patient Care and Health Payment Advocates can help you negotiate outstanding medical bills if you have a balance after your plan pays benefits. Here's a guide for whom to contact if your bills total:



Save 30-40% on prescription drugs

Show your plan ID card at more than 65,000 independent and chain pharmacies participating with CVS Caremark to receive 30 to 40% off retail prices.

Save up to 60% on lab work

Visit a participating Quest Diagnostics lab or request that your doctor send your lab work to a participating lab to save up to 60%.



HERE'S A LIST OF HELPFUL RESOURCES

Assurant Price Check
assurantpricecheck.com

Patient Care
800.305.0377
patientcare4u.com

Health Payment Advocates
877.277.0080
healthpaymentadvocates.com

CVS Caremark
800.551.5681
caremark.com

Quest Diagnostics
800.750.1253
labcardselect.com

[24/7 nurse hotline
800.982.2401
[HAA url]]

Save on basic treatment at retail health clinics

Use retail health clinics for affordable treatment of routine conditions like strep throat and ear infections. Assurant Health Access policyholders pay a reduced rate of just \$65 per visit — including lab work — at Take Care ClinicSM, located in select Walgreens[®] pharmacies.

[Get advice from the Health Advocates Alliance Nurse Line

Your Health Advocates Alliance membership includes access to a 24-hour Nurse Line, where registered nurses are on call to answer your questions and offer guidance on health, illnesses and medications.

With Health Advocates Alliance, you also receive scholarship opportunities and discounts on health-related items such as eyewear, vitamins and nutritional supplements, and an online interactive exercise and diet program.

In AL, AK, AZ, AR, DE, FL, IL, IN, IA, MD, MI, MS, MO, NE, OH, OK, PA, SC, TN, VA, WI and WY, membership in Health Advocates Alliance is required to have the opportunity to apply for an Assurant Health plan. Fees paid for membership in Health Advocates Alliance are used for benefits, marketing, distribution and administrative expenses. Assurant Health also may realize some benefit from these fees.]

***Assurant Price Check guarantee**

You will be reimbursed by Assurant Health for costs exceeding the quoted price range, provided you receive services for the procedure code shown, from the doctor listed, and for which your First Health Network discounts apply. Price guarantee is good for services received up to 30 days after the date Assurant Price Check provides pricing.

Assurant Price Check is not insurance. It is a price estimate of what you would be charged after your network discount is applied. Assurant Price Check is not a guarantee of Assurant Health Access plan benefits. The program is subject to change. *If you live in Georgia, Assurant Price Check will provide you with accurate cost information, but the price guarantee is not available.*