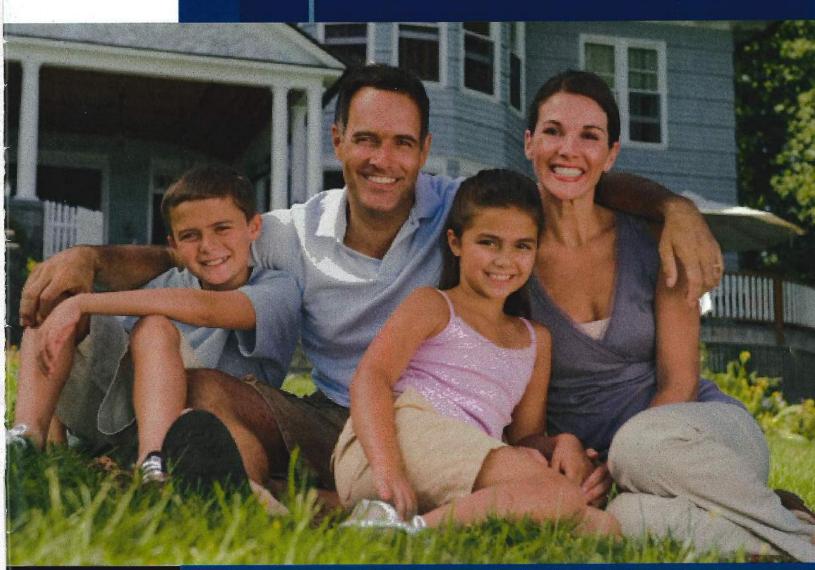
The Affordable Choice

Solutions for Today for the Problems of Tomorrow



This is a Hospital Confinement and other Fixed Indemnity Insurance Policy



The Right Plan for Changing Times

For today's medical uncertainties, people want a product to give them the Peace-of-Mind needed to plan for tomorrow.

- Affordability Choose from two plan options; find the one that fits your budget.
- Accessibility Only a few medical questions on the application.
- Flexibility Keep your own doctors; choose from individual or family coverage, and access network discounts.

Affordable Choice

This plan pays a daily benefit amount for services.

- Inpatient Benefits
- Hospital Admission Benefit
- Surgery Benefits
- · Doctor's Office visit
- Outpatient Medical Benefits
- Emergency or Urgent Care
- \$2,000,000 Lifetime Benefit Maximum



Affordable Choice Plan Benefits

Surgical and Hospitalization Benefits

	Classic		
Inpatient Hospital	• \$2,000 per Inpatient Day.*		
Confinement	• \$100,000 calendar year limit.		
Ambulatory Surgical Benefit	If outpatient surgery is performed in an Ambulatory Surgical Center or Outpatient Hospital facility, the benefits payable include the surgical and anesthesia benefits in addition to per day inpatient confinement.		
Hospital Admission Benefits	\$1,000 for the first Inpatient Day per calendar year.		
Emergency Room or	• \$125 per day		
Urgent Care	Limit of 1 daily benefit per calendar year		
Surgery Benefit	Daily surgical benefits for both inpatient and outpatient surgery. Maximum benefit of \$50,000 per calendar year.**		
Assistant Surgeon	Pays a daily amount per surgery.**		
Anesthesiologist	Pays a daily amount per surgery.**		
Doctor's Office Visit	• \$50 per day.		
Doctor's Office visit	Three days per calendar year.		
Outpatient Medical Benefits	 Laboratory Services \$100 per day for surgical pathology \$250 per day for MRI scan \$250 per day per PET scan \$100 per day for Mammogram \$2,000 per calendar year limit for all outpatient events 		
Prescription Drugs Benefit (not available in AZ and OH)	• \$25 • \$750 Calendar Year Maximum		
Ground and Air Ambulance	 \$1,000 per day for air transportation \$100 per day for ground transportation. Limit of 2 daily benefits per calendar year for all ambulance transportation. 		
Lifetime Maximum	• \$2 million		

^{*} See outline of coverage for exact benefit and limits.

The plans shown on both pages are limited benefit fixed-indemnity plans and benefits are per Covered Person. This is not a major medical insurance plan. Fixed-indemnity benefits are provided for hospital confinement and specified medical and surgical events. These benefits are paid in daily amounts for covered events without regard to the costs of services rendered. This plan does not provide expense reimbursement for charges based on your health care provider's statement.

^{**} See Surgical Schedule for benefit amounts.

Affordable Choice Plan Benefits Surgical and Hospitalization Benefits

- 46-30	Elite		
Inpatient Hospital Confinement	 \$3,000 per Inpatient Day.* \$200,000 calendar year limit. 		
Ambulatory Surgical Benefit	If outpatient surgery is performed in an Ambulatory Surgical Center or Outpatient Hospital facility, the benefits payable include the surgical and anesthesia benefits in addition to per day inpatient confinement.		
Hospital Admission Benefits	• \$2,000 for the first Inpatient Day per calendar year.		
Emergency Room or Urgent Care	\$250 per day Limit of 1 daily benefit per calendar year		
Surgery Benefit	 Daily surgical benefits for both inpatient and outpatient surgery. Maximum benefit of \$50,000 per calendar year.** 		
Assistant Surgeon	Pays a daily amount per surgery.**		
Anesthesiologist	Pays a daily amount per surgery.**		
Doctor's Office Visit	\$75 per day.Four days per calendar year.		
Outpatient Medical Benefits	 Preventative Services \$300 colonoscopy \$100 per Pap \$100 per PSA \$50 per day for surgical pathology \$50 per day for other laboratory tests \$2,000 per calendar year limit for all outpatient events Radiology services \$500 per day for MRI scan \$250 per day per PET scan \$150 per day for Mammogram 		
Prescription Drugs Benefit (not available in AZ and OH)	• \$25 • \$750 Calendar Year Maximum		
Ground and Air Ambulance	 \$1,000 per day for air transportation \$100 per day for ground transportation. Limit of 2 daily benefits per calendar year for all ambulance transportation. 		
Lifetime Maximum	• \$2 million		

^{*} See outline of coverage for exact benefit and limits.

^{**} See Surgical Schedule for benefit amounts.

Affordable Choice Monthly Premiums

HH		Classic	Elite
	Individual • •	\$87.00	\$110.00
s 18 - 29	Individual and Spouse (in NV and OR, Spouse/Domestic Partner)	\$174.00	\$220.00
	Individual and Child(ren)	\$191.00	\$238.00
Ages	Individual and Family	\$285.00	\$372.00
	Child Only	\$69.00	\$87.00
	Individual	\$104.00	\$132.00
39	Individual and Spouse (in NV and OR, Spouse/Domestic Partner)	\$208.00	\$264.00
s 30 -	Individual and Child(ren)	\$209.00	\$259.00
Ages	Individual and Family	\$319.00	\$414.00
	Child Only	\$69.00	\$87.00
	Individual	\$127.00	\$162.00
49	Individual and Spouse (in NV and OR, Spouse/Domestic Partner)	\$254.00	\$324.00
	Individual and Child(ren)	\$233.00	\$286.00
Ages 40	Individual and Family	\$365.00	\$470.00
-	Child Only	\$69.00	\$87.00
- 1 =	Individual	\$164.00	\$207.00
64	Individual and Spouse (in NV and OR, Spouse/Domestic Partner)	\$328.00	\$414.00
Ages 50 - 64	Individual and Child(ren)	\$269.00	\$329.00
Age	Individual and Family	\$430.00	\$556.00
	Child Only	\$69.00	\$87.00

Affordable Choice Fixed-Benefit Plans

Affordable Choice plans pay a set of daily benefits for covered services, regardless of what your provider charges.

Example 1 Hospital Stay - Elite

Description of TransactionAmount:*Total Charges - 7 days\$41,660.41Total Adjustments/Network Discounts18,747.18 -Current Balance\$22,913.23

Affordable Choice Pays

Description of TransactionAmount:*Admission Benefit2,000.00Hospital Days at \$3,00021,000.00Total Paid\$23,000.00

Example 2 Routine preventive care exam with labs Affordable Choice Classic

Service received:	Cost:	Plan pays:
Preventive care/office visit	\$95	\$50
Laboratory test	90	25
Total bill	\$185	
MultiPlan network discounts*	55	
Classic pays	75	
Your balance	\$55	

Example 3 Broken radius in arm - Elite

Service received:	Cost:	Plan pays:
Emergency room/physician charge	\$1,444	\$250
Follow-up office visits (4)	465	300
Follow-up x-rays (5)	475	375
Total bill	\$2,384	
MultiPlan network discounts*	596	THE STREET
Elite pays	925	
Your balance	\$863	

^{*} Amounts based upon Affordable Choice claims data. Results may vary. These types of discounts in the healthcare industry have been around since 1952. These are contractually negotiated discounts between Multiplan and the hospitals and doctors. Discounts can vary among providers. Hospital discounts can be as much as 40 to 50% and doctors vary between 25 and 35%.

^{*}Amounts based on Affordable Choice claims data. Results may vary.