



# Aspen STM Insurance



**Carrier and Underwriter**

**Association**

**Billing and Customer Service**





## Product Summary

<b>Deductible Options</b>	\$1,000, \$2,500, \$5,000, \$7,500, \$10,000
<b>Coinsurance Options</b>	70%, 80%, or 100%
<b>Out of Pocket Maximum Amount</b>	\$2,000, \$5,000, or \$10,000
<b>Length of Coverage</b>	Available for up to 36 months of coverage depending upon state regulations
<b>Network</b>	PHCS Network <ul style="list-style-type: none"><li>▪ <b>PHCS network</b> giving members access to in-network negotiated rate</li><li>▪ Facility charge: Plan pays up to 150% of Medicare allowable charges</li></ul>
<b>Maximum benefit</b>	\$100,000, \$250,000, \$750,000, \$1,000,000, \$1,500,000
<b>Coverage Effective Date</b>	Next day coverage; later effective date available, but not to exceed 60 days from date of transmission
<b>Eligibility</b>	18-64 applicant and spouse, dependent unmarried children under 26. Child-only coverage is available for ages 2-17.
<b>Waiting Period</b>	5 days for sickness 30 days for cancer 6 months for various covered surgeries

### Who is this plan good for?

- Between jobs or have been laid off
- Waiting for employer benefits
- Part-time or temporary employee
- Recently graduated
- Without adequate health insurance

### Pre-Existing Conditions Allowance Benefit:

Pre-Existing Conditions Allowance Benefit means, any eligible expenses related to Pre-Existing Conditions will be paid up to and no more than 50% of the Plan's Deductible, per Coverage Period. Deductibles and Coinsurance Payments of any eligible plan benefits are applicable to this benefit. However, payment of this benefit does not in any way affect or waive any of the Exclusions or Limitations. Once the plan has paid the amount of up to 50% of the Plan's Deductible the consumer is responsible for all claims related to the pre-existing conditions.

### How will consecutive policy terms work?

When a customer applies for consecutive policy terms in one enrollment, they will be issued their initial term of coverage, and subsequent terms will be pending.

Customers will not have to reapply for additional terms. The waiting period on all subsequent terms will be waived. When subsequent terms of coverage are set to begin, the customer will receive an email stating their plan has continued into the next term. The email will provide them with their new monthly rate (if applicable), and they will have the opportunity to opt out at this time.

### How does the Waiver of Pre-existing Conditions Rider work?

Waiver of Pre-Existing Conditions Rider option will allow charges resulting from a condition for which a covered person received medical treatment, diagnosis, care or advice, including diagnostic tests or medications, within the initial policy. This includes symptoms that manifested while the person was covered under the initial policy. The Waiver of Pre-Existing Conditions Rider does not become effective until the end of the Covered Person's first initial policy, no later than the day after the termination date of the initial policy.

### Disclaimer:

THIS COVERAGE IS NOT REQUIRED TO COMPLY WITH CERTAIN FEDERAL MARKET REQUIREMENTS FOR HEALTH INSURANCE, PRINCIPALLY THOSE CONTAINED IN THE AFFORDABLE CARE ACT. BE SURE TO HAVE THE CONSUMER CHECK THE CERTIFICATE CAREFULLY TO MAKE SURE THEY ARE AWARE OF ANY EXCLUSIONS OR LIMITATIONS REGARDING COVERAGE OF PRE-EXISTING CONDITIONS OR HEALTH BENEFITS (SUCH AS HOSPITALIZATION, EMERGENCY SERVICES, MATERNITY CARE, PREVENTIVE CARE, PRESCRIPTION DRUGS, AND MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES). THE INSURED'S COVERAGE MIGHT ALSO HAVE LIFETIME AND/OR ANNUAL DOLLAR LIMITS ON HEALTH BENEFITS. IF THIS COVERAGE EXPIRES OR THE INSURED LOSES ELIGIBILITY FOR THIS COVERAGE, THEY MIGHT HAVE TO WAIT UNTIL AN OPEN ENROLLMENT PERIOD TO GET OTHER HEALTH INSURANCE COVERAGE. THIS PRODUCT IS UNDERWRITTEN BY ASPEN AMERICAN INSURANCE COMPANY.