

HealthDepot

Essential Protection

Accident & Sickness Limited Benefit, Accident Medical Expense and Accidental Death & Dismemberment

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HealthDepot

At Health Depot, we are committed to providing premier customer service and maintaining relationships of trust with all of the people we serve—including our members, carriers and business partners.

We provide access to affordable health and consumer benefits to the people who need these products most– entrepreneurs, self-employed professionals and contractors. We are also dedicated to empowering our members with valuable resources, information and support to guide them in making their personal and professional lives easier and more fulfilling.

Health Depot offers only the most valuable solutions from trusted names in the consumer products and benefits industry. We work closely with our business partners and vendors to ensure that these products meet our extremely high quality standards.

Vision & Values

Create a community of people who collectively help one another socially by interacting and exchanging ideas with one another, financially by leveraging the power of the group to acquire benefits and services, and physically by providing support, information and benefits related to individual health.

Well-being, Diversity, Discovery, Caring, & Integrity

- We believe in making our members more comfortable, healthy, and happy.
- We recognize that every member is different; each one shaped by unique life experiences with different needs for well-being.
- We promote education and learning new ideas for our members.
- We understand, empathize with, are compassionate toward, and meet the needs and requests of our members.
- We do what is right, are accountable for, and take pride in our actions in everything we do for our members.





Health Care Services & Discounts

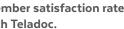
Talk to a doctor by phone, web or mobile app anytime, anywhere.

Benefit Summary

Founded in 2002, Teladoc is a national network of physicians who use electronic health records, telephone consultations and online video consultations to diagnose, recommend treatment and write short-term, non-DEAcontrolled prescriptions, when appropriate. Teladoc doctors are board-certified in internal medicine, pediatrics and family medicine. Consultations are available 24/7/365 with no fees and no time limit, allowing members to access quality care from wherever they are as opposed to more traditional and expensive settings like the doctor's office, urgent care or emergency room.

From your home, office, hotel room, or vacation campsite, simply make a phone call, and in most cases, speak to a doctor in less than 30 minutes, with an average call back time of less than 10 minutes. When you call Teladoc, you will always speak to a doctor who lives and works in the United States and is licensed to practice medicine in your state. Teladoc is also the only telemedicine provider able to treat children from 0-17¹. It's health care that fits in the palm of your hand.







92% of Teladoc members resolved their medical issue with Teladoc.

Call Teladoc:

- · When your physician is not available
- For non-emergent medical care
- · After normal hours of operation
- When on vacation or a business trip
- For second opinions

Teladoc Treats Non-Emergency Medical Issues such as:

- Bronchitis
- Allergies
- Poison Ivy
- Pink eye
- Cold and Flu symptoms Urinary tract infection
 - Respiratory infection
 - Sinus problems
 - Ear infection
 - and more!

Teladoc is simply a more convenient way for you to resolve many of your medical issues.

¹Consults for children under the age of 18 must be accompanied by a parent, guardian, or approved consenter.

Telemedicine is Not Available in Arkansas and Washington. Doctors will provide consults, but will not prescribe medicine in SC and IA.

© 2016 Teladoc, Inc. All rights reserved. Teladoc and the Teladoc logo are registered trademarks of Teladoc, Inc. and may not be used without written permission. Teladoc does not replace the primary care physician. Teladoc does not guarantee that a prescription will be written. Teladoc operates subject to state regulation and may not be available in certain states. Teladoc does not prescribe DEA controlled substances, nontherapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. Teladoc physicians reserve the right to deny care for potential misuse of services. Teladoc phone consultations are available 24 hours, 7 days a week while video consultations are available during the hours of 7am to 9pm, 7 days a week.

VERY IMPORTANT: IN LIFE THREATENING EMERGENCIES, CALL 911 or go directly to the nearest hospital emergency room for treatment. If 911 is not available in your area, call the local police/fire department or go directly to the nearest hospital or emergency room.



The ScriptSave Prescription Savings Card provides you access to discounted prescription drug prices. All household members can use the same card – including pets, if the pet medication is a common drug that is also used by people. There are no limits on how many times members and their family can use the card. Locate participating pharmacies and look up drug pricing at www.hdarx.com.

Features

- · Save between 15% to 75%, with average savings of 44% (based on 2014 national program savings data)
- · Accepted at over 62,000 participating pharmacies nationwide, including major chains and independent pharmacies
- · Can be used for all prescription drugs, both brand-name drugs and generics
- · Members will always receive the lowest price available on your prescription purchase

Savings

- FAMILIES WITH LIMITED OR NO PRESCRIPTION COVERAGE can reduce out of pocket costs
- INDIVIDUALS WITH PRESCRIPTION COVERAGE can reduce the cost of medications that are not covered
- SENIORS WITH MEDICARE PART D can save on prescriptions that are EXCLUDED from coverage

Honored at Over 62,000 Participating Pharmacies, Including:



Plus Thousands of Additional Chains and Independent Pharmacies Nationwide.

DISCOUNT ONLY - NOT INSURANCE. Discounts are available exclusively through participating pharmacies. The range of the discount will vary depending on the pharmacy or provider chosen and services rendered. The program does not make payments directly to the pharmacies or providers. Members are required to pay for all health care services.



YOU'RE UNIQUE, your nutrition should be too! IDLife is YOUR own Individually Designed Nutrition Program.

No matter what your goals are in life, to look and feel better, lose weight, or get in the best shape of your life, IDLife is your systematic approach to achieving the health and wellness you've always wanted.

IDLife products are scientifically formulated to help you by providing therapeutic doses of specific nutrients to:

- Restore nutrients depleted by your Rx program
- Help your body resist Rx side effects
- Improve your overall nutrition status thus optimizing your health

Additionally, they have been pre-screened to avoid drug/nutrient interactions that may be present with your current vitamin program.



ENERGY Drink & Chew

- Phase I (short term) The Advantra Z gives you a rapid onset of energy.
- Phase II (mid term) The caffeine gives you sustained energy, increasing focus, mental clarity, metabolism, cognitive function, performance and feelings of well-being.
- Phase III (long term) -Theobromine helps with fatigue protection, with no jitters or crash, appetite suppression, elevated mood and helps reduce fluid retention.

APPETITE CONTROL

- Advantra Z Citrus Aurantium boosts metabolism and increases lean muscle mass.
- Promotes thermogenesis and suppresses appetite.
- Increases energy level and mental clarity so you can stay sharp and focused while curbing your hunger.

MEAL REPLACEMENT Shake

- A superior low calorie, high-quality shake loaded with nutrients, with only six nutritional and organic ingredients.
- The only shake with 23 grams of cold-filtered whey protein and micro milled Chia.
- Simply the best tasting, most nutritious meal of the day.
- Non-GMO, Casein, Soy and Gluten free.

PRE WORKOUT

- Take your workout further and push through the plateau with Pre Workout from IDLife.
- A balanced complex of targeted amino acids, branched chain amino acids (BCAAs), vitamins, minerals, enzymes and nutrients to assist in maximizing your physical conditioning and mental focus.
- Combine Pre Workout with IDLife Post Workout formula to optimize lean muscle regeneration.

POST WORKOUT

- Reduce inflammation and soreness after exercise while promoting fast muscle repair with Post Workout from IDLife.
- A high quality complex of proteins, vital electrolytes and antioxidants that address post workout recovery.
- Get professional grade nutritional support for your body's muscular and nervous system with Post Workout from IDLife.

SLEEP STRIPS

- Uses a complex of nutrients, including Melatonin, L-Theanine & 5HTP.
- Brings your body into balance so you can go to sleep fast, stay asleep, and get restful, restorative, deep sleep.
- Great mint flavored strips melt in your mouth.
- Wake up refreshed, never groggy, and ready to take on whatever the day has in store.

HYDRATE

- About 75% of Americans are dehydrated, which can lead to health complications.
- IDLife Hydrate is a formula of vital electrolytes, antioxidants, minerals and vitamins.
- Hydrate supports cardiovascular, muscular and nervous system functioning to keep you healthy and hydrated.

LEAN

- IDLife Lean is a natural way to boost metabolism, increase thermogenesis, reduce sugar cravings and promote the preservation and development of lean muscle mass.
- Whether your interest is weight management or building lean muscle, choose Lean as a part of your personal nutritional plan.

These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease. * IDLife does not represent that its products are certified organic under the United States Department of Agriculture rules and regulations. Not available in AK, FL, OK, UT, VT, WA. If members move to one of those states, their discount medical benefits will terminate.

Disclosures for pages 8-13: The discount medical, health, and drug benefits of this Plan (The Plan) are NOT insurance, a health insurance policy, a Medicare Prescription Drug Plan or a qualified health plan under the Affordable Care Act. The Plan provides discounts for certain medical services, pharmaceutical supplies, prescription drugs or medical equipment and supplies offered by providers who have agreed to participate in The Plan. The range of discounts for medical, pharmacy or ancillary services offered under The Plan will vary depending on the type of provider and products or services received. The Plan does not make and is prohibited from making members' payments to providers for products or services received under The Plan. The Plan member is required and obligated to pay for all discounted prescription drugs, medical and pharmaceutical supplies, services and equipment received under The Plan, but will receive a discount on certain identified medical, pharmaceutical supplies, prescription drugs, medical equipment and supplies from providers in The Plan. The Discount Medical Plan Organization is Alliance HealthCard of Florida, Inc., P.O. Box 630858, Irving, TX 75063. Members may call (855) 351-7535 for more information or visit members.healthdepotassociation.com for a list of providers. The Plan will make available before purchase and upon request, a list of program providers and the providers' city, state and specialty, located in the member's service area. Any complaints should be directed to Alliance HealthCard of Florida, Inc. at the address or phone number above. Upon receipt of the complaint, member will receive confirmation of receipt within 5 business days. After investigation of the complaint, Alliance HealthCard of Florida, Inc. will provide member with the results and a proposed resolution no later than 30 days after receipt of the complaint. Note to DE, IL, LA, NE, NH, OH, RI, SD, TX, and WV consumers: If member remains dissatisfied after completing the complaint system, they may contact their state department of insurance.

Note to MA consumers: The plan is not insurance coverage and does not meet the minimum creditable coverage requirements under M.G.L. c. 111M and 956 CMR 5.00.

MyMedLab offers an efficient, affordable and confidential solution to medical laboratory testing. You can purchase the same testing ordered by your doctor at a cost 50% to 80% less than in your doctor's office or local hospital lab.

Testing can be purchased 24 hours a day on the MyMedLab website. Tests are listed both individually and in groups called Wellness Profiles based on your age, sex and family history. This basic information is all you need to identify which profile evaluates your risk for common conditions associated with your specific group.

Get Your Test Results Online in 6 Easy Steps!

mymedlab	Order Test Online	Find a Test or Wellness Profile using the Test Links. Your first purchase creates a MyMedLab account and Personal Health Record (PHR).
	Our Doctor Approves	The MyMedLab Physician in your states reviews your order and approves it. The approved Digital Lab Order (DLO) is automatically uploaded into your secure Personal Health Record.
	Print Lab Order	You receive an email within 2 hours that your order is complete. Using the link in the email, you log in to your Personal Health Record and print your DLO.
Q	Visit Local Lab	Using the Locations tab, you locate a collection site in your area. Take the printed DLO to the collection site, at your convenience, no appointment required. Have your sample collected.
	View Results Online	After your test results are reviewed by a MyMedLab Physician, you will receive an email notifying you that your results are ready. Simply log into your secure, online PHR to view your results.
<pre>S</pre>	Buy Expert Review	Once results are complete, you can show the results to your doctor, or purchase a result review with a growing list of experts worldwide to: ask questions, identify risk factors and help you plan to move forward with your personal physician.

MyMedLab

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Radiology tests have become key tools for physicians to help diagnose and monitor disease. Through One Call Care, our members can save 20% to 50% on MRIs, PET and CT scans when these tests are ordered by a doctor. Make the most out of your health plan and take advantage of optimal quality, convenience, and savings with just one call.

One Call Care's Specialty Network Solution

As the nation's largest diagnostic imaging network, One Call Care offers PPO access to a specialty panel of over 3,000 high-quality radiology imaging centers nationwide. Each imaging center and radiologist that participates in our network is credentialed to rigorous quality standards. Since 1993, One Call Care has been the preferred solution for ensuring access to high-quality radiology testing at lower cost for participants.

Savings Benefit

Our network providers typically average 20% to 50% less than the usual costs for radiology testing. That means reduced out-of-pocket costs and significantly lower claims expenses for participants and covered dependents. In an ongoing effort to maximize your healthcare dollars, One Call Care ensures these test remain affordable for all members.

Scan	Average Charge	Average OCC Cost	Percent Savings	Dollar Savings
MRI	\$1600	\$800	50%	\$800
СТ	\$900	\$500	45%	\$400
Other	\$3000	\$1700	45%	\$1300

Savings Example*

 st Savings may vary based on plan design and geographic location.

Convenient Scheduling Service

Before you or a covered family member are scheduled for an MRI, CT or PET scan, simply call One Call Care. One Call Care coordinators will assist in selecting a network provider conveniently located near your home or work. Once a facility is selected, the appointment is scheduled by conducting a unique 'three way' call involving One Call Care, the imaging center and the patient. During the same call, you can ask questions regarding your test or for further help in understanding how the medical plan covers the imaging procedure.

One Call Care's Specialty Diagnostic Network broadens your health care choices and saves you money by providing advanced radiology discounts whenever you use One Call Care participating providers. 9



Members and their immediate family members (grandparents, parents, spouse and children) will receive complimentary hearing screenings and a 15% retail discount off the usual and customary retail price of any Beltone hearing instrument at any of over 1500 locations throughout the United States.

Your Hearing Health

Good hearing lets you savor life. When it's easy to hear, it's easy to stay involved. Sharing laughter with loved ones, excelling on the job, remaining independent—good hearing is the key.

Did you know?





If you suspect you have a hearing loss, ignoring or neglecting it can make it worse. But, treating a hearing loss with hearing aids can dramatically slow its progression—helping you preserve good hearing for a lifetime!

Maintaining healthy hearing starts with a baseline hearing screening at Beltone. Just as you schedule annual physicals and dental exams, it's essential to schedule a hearing test every year.

Preventing Hearing Loss

Extremely loud noises can cause permanent damage to the tiny hair cells inside the cochlea. Even moderately loud noise over a period of time can be damaging. Studies show that prolonged exposure to sounds at, or above, 90dB can damage hearing.

Protect your hearing and wear earplugs whenever your surroundings are so loud, you must raise your voice to be heard. It doesn't matter what the source of the loud sounds is—music, machinery, conversation—or other noisy environments.

Styles and Features

If you suffer from hearing loss, Beltone offers revolutionary digital hearing instruments that provide clear, more comfortable hearing and a virtually invisible appearance at prices that fit your budget. And, you can try out different styles right in the office before making your decision.

Follow-up Care

All Beltone hearing instruments come with the exclusive BelCareTM commitment - one of the most comprehensive aftercare programs available. BelCareTM assures you a lifetime of attention at any one of Beltone's participating hearing care centers nationwide. No other company offers the same level of commitment.

With 70 years of experience, highly trained professionals and friendly service, Beltone is the most trusted brand among adults 50+.

Beltone Hearing

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Members and their dependents can save 15% to 50%^{*} on dental care through our Dental network of over 110,000 participating provider listings, including both general dentists and specialists across America.

Simply select a participating dentist in your area and present your membership card at your appointment to receive the discounted rates. There is no limit to the number of visits and you can change dentists within the network at any time for any reason.

*Actual costs and savings vary by geographic area. Not available in AK, FL, MT, ND, OK, SD, UT, VT, WA, WY.

DiabeticSupplies

Through this program, you can get your diabetic testing supplies shipped directly to your door each month at a savings of 40% to 60% less than the retail drug store prices, including glucose meter, ultra-thin lancets, test strips and carrying case! Monthly fees are based on the number of testing times per day and the supplies will meet your monthly need. There are no health restrictions and no limit on the number of times a year you can use this service.

Features

- · Easy enrollment with no complicated forms to fill out
- No inconvenient trips to the pharmacy
- Supplies delivered directly to your home with free shipping
- Automated shipments to ensure you never run out of testing supplies
- Nine Years of Experience
- Prescription Services
- Accessible Customer Care
- 100% satisfaction guaranteed

Their customer service representatives are both knowledgeable and courteous and ready to assist you along the way. The Diabetic Supplies Savings program provides reliable, affordable testing supplies to the thousands of diabetics who are uninsured or under-insured or have to pay out of pocket.

Price Comparison – If you test 3 times per day					
Walmart	\$1,623.16/year				
Walgreens	\$1,867.86/year				
Walgreens Brand	\$1,801.61/year				
Drugstore.com	\$1,693.11/year				
DiabeticExpress.com	\$1,576.38/year				
Diabetic Savings Program	\$873.00/year				

This example is for illustrative purposes only. Individual results may vary.



Access to a national network of over 65,000 vision providers in 26,000+ locations, including LensCrafters[®], Sears Optical[®], Target Optical[®], JCPenney Optical[®] and most Pearle Vision[®] locations. Members enjoy their choice of participating independent optometrists, ophthalmologists and opticians located throughout the country.

Vision Care Services	In-Network Member Cost	Out-of-Network Reimbursement
Exam With Dilation as Necessary	\$5 off routine \$5 off contact lens fit & follow-up	N/A N/A
Frames	35% off retail price	N/A
Standard Plastic Lenses Single Vision Bifocal	\$50 \$70	N/A N/A
Trifocal Standard Progressive Lens	\$105 \$135	N/A N/A
Lens Options (paid by the member and o UV Treatment Tint (Solid and Gradient)	added to the base price of the lens) \$15 \$15	N/A N/A
Standard Plastic Scratch Coating Standard Polycarbonate Standard Anti-Reflective Coating Other Add-Ons and Services	\$15 \$40 \$45 20% off retail price	N/A N/A N/A
Contact Lenses Conventional Disposable	15% off retail price 0% off retail price	N/A N/A
Laser Vision Correction Lasik or PRK* from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Frequency Examination Lenses and Contact Lenses Frame	Unlimited Unlimited Unlimited	N/A N/A N/A

THIS IS NOT INSURANCE

Not all discounts available at all providers.

Complete Pair Eyeglasses Purchase Discounts: Frame, lenses, and lens options must be purchased in same transaction to receive full discount. Items purchased separately will be discounted 20% off the retail price.

For Lasik providers, call (877) 5LASER6 (552-7376) or visit www.eyemedlasik.com and request the discount authorization.

*Since LASIK or PRK vision correction is an elective procedure, performed by specially trained providers, this discount may not always be available from a provider in your immediate location.



Members will receive a 20% discount on those items purchased at participating providers that are not specifically covered by this Discount design. The 20% discount may not be combined with any other discounts or promotional offers, and the discount does not apply to EyeMed Provider's professional services, or contact lenses. Retail prices may vary by location. Please note, all dependents are eligible for discounts with all discount plans.

Limitations/ Exclusions

- · Orthoptic or vision training, subnormal vision aids, and any associated supplemental testing
- \cdot Medical and/or surgical treatment of the eye, eyes, or supporting structures
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear unless specifically covered under plan
- Services provided as a result of any Worker's Compensation law
- $\cdot\,$ Discount is not available on those frames where the manufacturer prohibits a discount

Not available in AK, FL, OK, UT, VT, WA.

THIS IS NOT INSURANCE

Members must pay for products or services at the time they are purchased. This program will provide savings over the normal cost.



Consumer Discounts

Consumer Discounts

Retail Benefits



Through this online shopping site, members can earn up to 40% cash back at more than 5,000 leading merchants and save even more with coupons that can be used instantly in-store. Shop at popular stores like Walmart, Target, Best Buy, Crate & Barrel, Gap, Banana Republic, Champs Sports, Home Depot, Macy's and JCPenney. Book travel (airfare, hotels, rental cars, and more) through featured sites like Travelocity, Orbitz, Hotels.com, Priceline and Expedia.

Gym America

YMAMERICA

Online access for personalized meal plans tailored to your needs, interactive tools for keeping you on track with fitness and nutrition goals, smart weekly shopping lists and much more for a special price.

*GymAmerica.com is a proprietary Web property of Genesant Technologies, Inc.



GlobalFit Gym Network

Members receive discounted gym memberships at more than 10,000 gyms nationwide including, 24 Hour Fitness, Bally, Curves, Anytime Fitness, plus regional chains (New York Sports Clubs, etc.) and local favorites. Members can also take advantage of exclusive member savings on home exercise products, Nutrisystem, exercise videos and health coaching.



True Car Auto Buying Service

Save time and money shopping for a new or used car through True Car. Members receive exclusive pricing, price protection and a hassle-free buying experience at thousands of Certified Dealers.



Car Rental Discounts

Take advantage of affordable auto rental rates from Avis®, Budget® and Dollar® Rent A Car. Note: Some blackout dates and restrictions may apply. 24-hour advance reservations are required.

Massage Envy

A spa day isn't just a way to pamper yourself-a massage can also offer health benefits to many people. Whether you suffer from chronic pain such as headaches and back issues or have a highstress life, a massage may help. Members receive up to 20% off many of the plans and services at Massage Envy.



ME Massage Envy

1-800-flowers

Save 15% when you order flowers and gifts from 1800flowers.com, either online or by phone. You'll enjoy top-quality customer service with same-day delivery on many items.



Moving Discounts

Cord North American, an agent for North American Van Lines, offers members valuable discounts on moving and relocation services while providing the highest level of service and customer satisfaction.



Magazine Discounts

Save up to 85% off regular subscription rates on popular titles through Magazineline.com and Magazines.com, Inc.

Business Solutions

Business Solutions



ADP Payroll Processing

Members can access a 25% discount on processing costs and a free month of payroll processing. In addition, the one-time setup fee will be waived.



Hewlett-Packard Computer and Technology Products

Hewlett-Packard offers members affordable pricing on business and home office products. Members receive discounts on HP notebooks, laptops, desktops, servers, printers, digital cameras, handhelds, point-of-sale (scanners, cash registers, etc.) and more.



NAC Web Services

Members can access discounts on website development and maintenance as well as web hosting. Their experienced staff of programmers and graphic designers offer creative and intuitive websites custom-built to your specifications.

Office Depot/Max Office Supplies

Office DEPOT

Members save 15% off hundreds of office supplies and 60% off printing online, by phone/fax, or in stores. Members also receive additional monthly special offers and incentives, as well as free next day delivery on qualifying orders of \$50 or more (reduced shipping costs for lesser orders).



Penny Wise Office Supplies

Members receive the guaranteed lowest prices on over 20,000 office products and additional savings when orders are placed online. Fast, free shipping is also virtually guaranteed from the 40 Penny Wise distribution centers nationwide.



UPS Shipping

Members receive discounts on UPS delivery services for a variety of next day, 2-day and 3-day shipping options.



Sprint Wireless Services

With Sprint Wireless Services, new subscribers can have unlimited freedom, better choice plans and up to \$250 in service credits. If you are with another carrier, Sprint will help you determine the best plan and best time to switch. Members receive discounts on most rate plans, select Sprint accessories, 3G/4G data solutions, mi-fi and hot spot devices.



Sherwin Williams

Members receive exclusive discounted pricing of up to 40% on key product lines such as paint and accessories. Free next day delivery, electronic and centralized invoicing.



FedEx Shipping

Members can save up to 54% off list rate Priority & Standard Overnight; Save up to 39% off list rate Express Saver; Save up to 53% off list rate on select FedEx Ground® services plus other options!





Your HD Essential Protection plan includes the MultiPlan Limited Benefit Network through MultiPlan, Inc. You now have access to the largest primary PPO (Preferred Provider Organization) in the nation, which offers you:

Choice Broad access to nearly 4,400 hospitals, 79,000 ancillaries and more than 700,000 healthcare professionals.

Savings Negotiated discounts that result in significant cost savings when you visit in-network providers, helping to maximize your benefits. A MultiPlan logo on your health insurance card tells both you and your provider that a MultiPlan discount applies.

Quality MultiPlan applies rigorous criteria when credentialing providers for participation in the MultiPlan Network, so you can be assured you are choosing your healthcare provider from a high-quality network.

Find a MultiPlan Network Provider

MultiPlan can help you find the provider of your choice. Simply call **(800) 457-1403** Monday through Friday from 8 a.m. to 8 p.m. (Eastern Standard Time) and identify yourself as a health plan participant accessing MultiPlan Network for Limited Benefit plans. You may also search online at **www.multiplan.com**:

1	Click on the Search for a Doctor or Facility button
2	Indicate that you have the MultiPlan Limited Benefit Plan logo on your ID card (found in Front of Card/Other network logos section)
3	Follow the prompts to enter your search criteria

If you are currently seeing a doctor or other healthcare professional who does not participate in the MultiPlan Limited Benefit Network, you may use the Online Provider Referral System in the Patients section of **www.multiplan.com**, which allows you to nominate the provider in just minutes using an online form. When you complete the form, MultiPlan will contact your nominee to determine whether the provider is interested in joining. If so, they will follow up to recruit the provider.

Confirm Participation in the MultiPlan Network

It is your responsibility to confirm your provider or facility's continued participation in the MultiPlan Limited Benefit Network and accessibility under your benefit plan. When scheduling your appointment, specify that you have access to the MultiPlan Limited Benefit Network through the HD Essential Protection plan, confirm the provider's current participation in the MultiPlan Network, their address and that they are accepting new patients. Please also be sure to follow any preauthorization procedures required by your plan (usually a telephone number on your ID card). In addition, to ensure proper handling of your claim, always present your current benefits ID card upon arrival at your appointment.

Please note: MultiPlan, Inc. and its subsidiaries are not insurance companies, do not pay claims and do not guarantee health benefit coverage.

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karis **360**

The expert voice in a confusing healthcare world.

Karis360's team of Advisors offer personalized, caring, expert service helping members navigate the complex and expensive healthcare maze. With services from Healthcare Navigator to Bill Negotiator to Surgery Saver to Chaplaincy, Karis360 will sort through your healthcare paperwork saving you time and money.

Karis360 sorts through healthcare needs from start to finish Karis360 saves time and money Karis360 provides unlimited assistance from a Personal Advisor

Healthcare Navigator

Karis360 members never face the healthcare world alone. Each member has access to an expert Advisor to help address healthcare needs and concerns.

Looking for a Physician or Hospital? Karis360 Advisors will find quality physicians, specialists and surgeons in the member's area who focus on the member's unique healthcare needs.

Need Alternative Treatments? Advisors help find alternative care in areas like Chiropractic, Acupuncture, Homeopathic and Naturopathic.

Health Cost Estimates Cost estimates for various outpatient procedures are provided so members know what to expect.

Medical Records Transfer Karis360 Advisors organize the seamless transfer of member medical records between providers.

Insurance Policy Assistance Advisors can help clarify health insurance benefits as well as help resolve issues and expedite solutions.

Elder Care Solutions Members get help finding assisted living facilities, coordinating home health, Medicare questions, VA benefits, supplemental insurance and more.



Bill Negotiator

With two-thirds of all bankruptcies in America including a medical bill debt component, the Bill Negotiator becomes important as we assist members in avoiding financial hardship and possible bankruptcy.

Medical Bill Negotiation Karis360 Advisors will assign a dedicated Patient Advocate to work directly with a member's healthcare provider (doctor's offices, hospitals, etc.) to help reduce their medical bills. If a member has bills totaling over \$2,000 from a single-related medical incident during membership, Advisors will negotiate the medical bills.

Pre-Negotiation Advisors can negotiate potential medical costs before a procedure. Members provide a written estimate stating the bill will likely total over \$2,000 and Advisors will pre-negotiate the potential medical bills easing stress and saving money.

Results Karis360 has unparalleled results negotiating discounts. Members can see up to 65% average savings with insurance and 85% average savings without insurance.

Surgery Saver

Each Karis360 member has access to an experienced Advisor who researches up to five surgical facilities for nonemergency procedures in the member's area with information regarding cost, quality, availability and physician privileges.

Results With Surgery Saver, members see an average savings of \$13,000. Advisors have found a 66% difference between the highest and lowest quoted surgery costs between facilities.

Chaplaincy

On-staff Chaplains are available to spend time with members on the phone, listening and providing support. Sustaining, guiding and healing, Chaplains help members find answers and direction.

Note: Karis360 is not insurance and does not provide funds to pay for bills. This is a best-efforts service. Despite Karis360's diligent efforts on member's behalf, some providers refuse to make accommodations to help resolve outstanding medical bills.

About HD Essential Protection

Who Needs HD Essential Protection

The HD Essential Protection membership provides members with access to a variety of health care programs, services and discounts to help you manage your everyday healthcare expenses, as well as consumer and lifestyle discounts and business solutions.

The HD Essential Protection membership also provides each Member coverage under Accident and Sickness Limited Benefit Cash Insurance and plan levels 2-6 include Voluntary Accident Insurance. HD Essential Protection Insurance benefits can help with out of pocket medical expenses as well as living expenses. And, these memberships are offered year round versus short enrollment periods. Whatever your circumstance, HD Essential Protection may be the answer you are looking for.

Advantages of a HD Essential Protection membership:

- Accident and Sickness Limited Benefit Cash Insurance for Inpatient and Outpatient services
- Voluntary Accident insurance up to \$2,000 Excess Accident Medical Expense and \$10,000 AD&D
- Membership can be effective as early as the next day
- · Perfect for individuals looking to supplement their current insurance plans or help with living expenses
- · Association benefits provide discounts on many health care and every day services

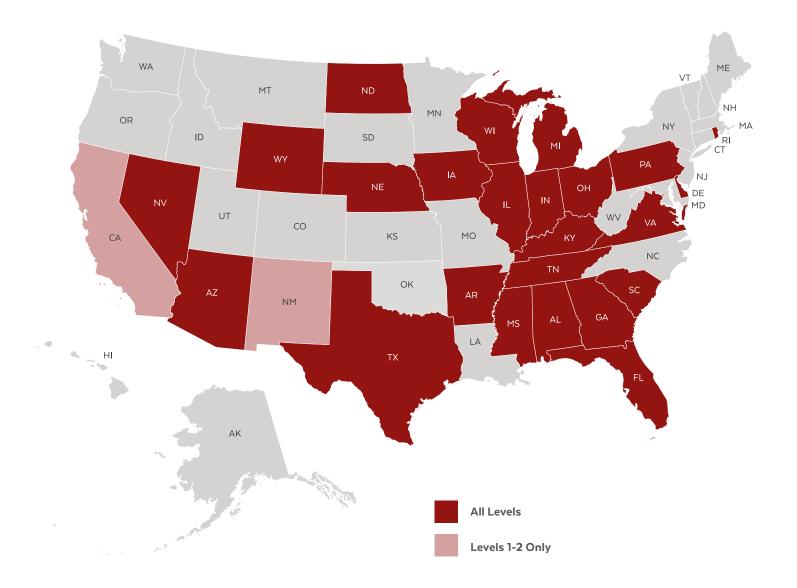
With six plan levels, HD Essential Protection is sure to have a membership to meet your benefit and budget needs!



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Eligibility Requirements

- Between the ages of eighteen (18) and sixty-four (64)
- Reside in an available state
- Dependent children must be under the age of nineteen (19) or under the age of twenty-five (25) if enrolled as a full-time student at an Institution of Higher Learning



Benefits Available - 26 States & DC: AL, AZ, AR, CA[†], DE, FL^{*}, GA, IL, IN^{*}, IA, KY, MI, MS, NE, NV, NM[†], ND, OH^{*}, PA, RI, SC, TN, TX, VA, WI, WY.

Insurance benefits are not available to residents of: AK, CO, CT, HI, ID, KS, LA, ME, MD, MA, MN, MO, MT, NH, NJ, NY, NC, OK, OR, SD, UT, VT, WA, WV.

+ CA and NM are only available for levels 1-2.

* The Accident Medical Expense Benefit is payable on a primary basis for residents of FL, IN & OH. In all other jurisdictions, the Accident Medical Expense Benefit is payable on an excess basis.

How Your Benefits Work Together

Association Benefits

- When the doctor orders blood tests and/or radiology tests, members can use MyMedLab and One Call Care to receive discounted rates on top-quality lab testing and imaging
- Lab tests confirm Diabetes? Diabetic Savings Program offers deep discounts on daily testing supplies
- Toothache/Gum infection? Save money on oral care with Cigna Discount Dental
- Wear glasses or contacts? Use EyeMed Vision Savings network for discounts on exams and eyewear needs
- Need a prescription? Use pharmacies in the ScriptSave network for deep discounts

Insured Benefits

- The Accident and Sickness Limited Benefit Cash Insurance provides daily cash benefits regardless of other insurance you may have to help with out-of-pocket expenses
- The Voluntary Accident policy includes an Excess Accident Medical Expense insurance benefit which reimburses covered medical expenses up to \$2,000 with a \$200 deductible if the medical expenses are due to a Covered Accident
- The Voluntary Accident Insurance also provides a lump sum cash benefit of \$10,000 in the event of an accidental death or dismemberment



All the benefits work together to help you maximize savings!

HD Essential Protection Insurance Benefits

Federal Insurance Company

Federal Insurance Company, a Chubb company ("Chubb"), is one of the strongest carriers in the market: a specialty Accident & Health carrier with the experience, and financial strength to offer rich options, broad coverages and higher limits at competitive rates. Over the past 55 years, Chubb has offered accident and health solutions to a wide range of markets including large and small businesses, professional practices, schools and colleges, financial institutions, membership associations, civic, church and nonprofit organizations. Chubb Accident & Health has consistently demonstrated an exceptional ability for creative collaboration with policyholders, through their flexible and innovative approach to products and services.

Chubb receives consistently high ratings for financial strength from A.M. Best, Moody's and Standard & Poor's, the leading independent analysts of the insurance industry.



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Accident and Sickness Limited Benefit Cash Insurance & Voluntary Accident Insurance

	Essential	Essential	Essential	Essential	Essential	Essential
Benefit Description	Protection Level 1	Protection Level 2	Protection Level 3	Protection Level 4	Protection Level 5	Protection Level 6
Hospital Admission Indemnity Benefit						
Pays a Hospital Admission benefit if a Covered Person is admitted to a Hospit become Confined within 6 months after the covered Accident.	al and Confine	ed due to an	Accident or	Sickness. Th	e Covered P	erson must
Benefit Amount per Hospital Admission	N/A	N/A	\$250	\$500	\$750	\$1,000
Maximum Number of Admissions per Sickness or Accident per plan Year	N/A	N/A	1	1	1	1
In-Hospital Indemnity Benefit						
Pays a daily benefit after the Elimination Period ¹ for each day a Covered Pers of Confinement in the Hospital must occur within thirty (30) days of the Accid			al due to an	Accident or	Sickness. Tl	ne first day
Daily Benefit Amount	\$100	\$200	\$250	\$500	\$750	\$1,000
Maximum Number of Days per Period of Confinement	6	10	5	5	5	5
Maximum Benefit Amount per Plan Year	\$1,200	\$4,000	\$2,500	\$5,000	\$7,500	\$10,000
Recuperation Indemnity Benefit						
Pays a daily benefit after the Covered Person has been discharged from the H covered person received a benefit for in-Hospital Indemnity. This benefit pays is payable in a lump sum after discharge from the hospital. If the Covered Per	for the same n	umber of do	iys for which	the in-Hosp		
Daily Benefit Amount	N/A	N/A	\$100	\$100	\$100	\$100
Maximum Benefit Amount per Plan Year	N/A	N/A	\$1,000	\$1,000	\$1,000	\$1,000
Intensive Care Unit Indemnity Benefit						
Intensive Care Unit (ICU). This benefit is paid in addition to the In-Hospital Inde Unit must occur within thirty (30) days of the Accident. Daily Benefit Amount	emnity Benefit	Amount. Th	ne first day o \$250	of Confineme \$500	ent in the Inte	ensive Care \$1,000
Maximum Number of Days per Period of Confinement	N/A	N/A	5	5	5	
Maximum Benefit Amount per Plan Year	N/A			5	5	5
In-Hospital Surgical Indemnity Benefit	IN/A	N/A	\$2,500	\$5,000	\$7500	5 \$10,000
	N/A	N/A	\$2,500	\$5,000	\$7,500	5 \$10,000
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor	Surgical Proce					\$10,000
	Surgical Proce					\$10,000
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju	Surgical Proce ry.	dure perforr	ned while In	-Hospital. A	surgical pro	\$10,000 cedure due
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year	Surgical Proce ry. N/A	dure perforr N/A	ned while In \$250	-Hospital. A \$500	surgical pro \$750	\$10,000 cedure due \$1,000
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year	Surgical Proce ry. N/A N/A	dure perforr N/A N/A	ned while In \$250 1	-Hospital. A \$500 1	surgical pro \$750 1	\$10,000 cedure due \$1,000 1
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia	Surgical Proce ry. N/A N/A	dure perforr N/A N/A	ned while In \$250 1	-Hospital. A \$500 1	surgical pro \$750 1	\$10,000 cedure due \$1,000 1
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year	Surgical Proce ry. N/A N/A related to a c	dure perforr N/A N/A overed Majo	ned while In \$250 1 or or Minor S	-Hospital. A \$500 1 Gurgical Proc	surgical pro \$750 1 edure perfo	\$10,000 cedure due \$1,000 1 rmed while
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable.	Surgical Proce ry. N/A N/A related to a c	dure perforr N/A N/A overed Majo N/A	ned while In \$250 1 or or Minor S	-Hospital. A \$500 1 Surgical Proc \$125	surgical pro \$750 1 edure perfo \$187.50	\$10,000 cedure due \$1,000 1 rmed while \$250
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year	Surgical Proce ry. N/A N/A related to a c N/A N/A	dure perforr N/A N/A overed Majo N/A N/A	ned while In \$250 1 or or Minor S \$62.50 1	-Hospital. A \$500 1 Surgical Proc \$125 1	surgical pro \$750 1 eedure perfo \$187.50 1	\$10,000 cedure due \$1,000 1 rrmed while \$250 1
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Emergency Room Indemnity Benefit Benefit pays if an Accident or Sickness causes the Covered Person to require a	Surgical Proce ry. N/A N/A related to a c N/A N/A	dure perforr N/A N/A overed Majo N/A N/A	ned while In \$250 1 or or Minor S \$62.50 1	-Hospital. A \$500 1 Surgical Proc \$125 1	surgical pro \$750 1 eedure perfo \$187.50 1	\$10,000 cedure due \$1,000 1 rrmed while \$250 1
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Emergency Room Indemnity Benefit Benefit pays if an Accident or Sickness causes the Covered Person to require a Treatment must be received within twenty-four (24) hours of the Accident.	Surgical Proce ry. N/A N/A related to a c N/A N/A N/A	dure perforr N/A N/A overed Majo N/A N/A ergency Meo	ned while In \$250 1 or or Minor S \$62.50 1 dical Care in	-Hospital. A \$500 1 Surgical Proc \$125 1 an Emergen	surgical pro \$750 1 edure perfo \$187.50 1 cy Room of	\$10,000 cedure due \$1,000 1 rmed while \$250 1 a Hospital.
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Emergency Room Indemnity Benefit Benefit pays if an Accident or Sickness causes the Covered Person to require a Treatment must be received within twenty-four (24) hours of the Accident. Per Visit Benefit Amount	Surgical Proce ry. N/A N/A related to a c N/A N/A N/A N/A	dure perforr N/A N/A overed Majo N/A N/A ergency Meo \$50	ned while In \$250 1 or or Minor S \$62.50 1 dical Care in \$250	-Hospital. A \$500 1 Surgical Proc \$125 1 an Emergen \$250	surgical pro \$750 1 eedure perfo \$187.50 1 cy Room of \$250	\$10,000 cedure due \$1,000 1 rmed while \$250 1 a Hospital. \$250
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Emergency Room Indemnity Benefit Benefit pays if an Accident or Sickness causes the Covered Person to require a Treatment must be received within twenty-four (24) hours of the Accident. Per Visit Benefit Amount Maximum Number of ER Visits per Plan Year	Surgical Proce ry. N/A N/A related to a c N/A N/A N/A N/A N/A N/A N/A 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	dure perforr N/A N/A overed Majo N/A N/A ergency Meo \$50 1	ned while In \$250 1 or or Minor S \$62.50 1 dical Care in \$250 2	-Hospital. A \$500 1 Surgical Proc \$125 1 an Emergen \$250 2	surgical pro \$750 1 eedure perfo \$187.50 1 cy Room of \$250 2	\$10,000 cedure due \$1,000 1 \$250 1 a Hospital. \$250 2
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor to Accident must occur within thirty (30) days of the Accident, causing an Inju Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year In-Hospital Anesthesia Indemnity Benefit Pays the Anesthesia Indemnity Benefit for the administration of anesthesia In-Hospital, if the Surgical Indemnity Benefit is payable. Benefit Amount per Procedure per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Maximum Number of Procedures per Covered Person per Plan Year Emergency Room Indemnity Benefit Benefit pays if an Accident or Sickness causes the Covered Person to require a Treatment must be received within twenty-four (24) hours of the Accident. Per Visit Benefit Amount Maximum Number of ER Visits per Plan Year Benefit pays if a Covered Person requires the use of an ambulance service by	Surgical Proce ry. N/A N/A related to a c N/A N/A N/A N/A N/A N/A N/A 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	dure perforr N/A N/A overed Majo N/A N/A ergency Meo \$50 1	ned while In \$250 1 or or Minor S \$62.50 1 dical Care in \$250 2	-Hospital. A \$500 1 Surgical Proc \$125 1 an Emergen \$250 2	surgical pro \$750 1 eedure perfo \$187.50 1 cy Room of \$250 2	\$10,000 cedure due \$1,000 1 xrmed while \$250 1 a Hospital. \$250 2

¹ Elimination Period for Sickness or Accident: 1 day. If a Covered Person is Confined in a Hospital or ICU after the Elimination Period, the daily Benefit Amount will be paid retroactively to the first day of Confinement.

Accident and Sickness Limited Benefit Cash Insurance & Voluntary Accident Insurance (cont)

Benefit Description	Essential Protection Level 1	Essential Protection Level 2	Essential Protection Level 3	Essential Protection Level 4	Essential Protection Level 5	Essential Protectior Level 6		
Outpatient Physician Office Visit Indemnity Benefit								
Benefit pays if a Covered Person requires and receives care at a Physician's office or clinic due to an Accident or Sickness. The visit must occur within thirty (30) days of the Accident, causing an injury. This benefit is not payable for routine eye exams, dental exams (unless the result of an accident), or annual physical exams.								
Per Visit Benefit Amount	\$50	\$50	\$50	\$50	\$60	\$60		
Maximum Number of Visits per Plan Year	3	5	3	3	3	3		
Outpatient Surgical Indemnity Benefit								
Pays the Surgical Indemnity Benefit if a Covered Person has a Major or Minor Sur A surgical procedure due to Accident must occur within thirty (30) days of the Ac				patient basi	s in an Outp	atient Uni		
Benefit Amount per Procedure per Covered Person per Plan Year	N/A	N/A	\$250	\$500	\$750	\$1,000		
Maximum Number of Procedures per Covered Person per Plan Year	N/A	N/A	1	1	1	1		
Outpatient Anesthesia Indemnity Benefit								
Pays the Anesthesia Indemnity Benefit for the administration of anesthesia re outpatient basis in an Outpatient Unit, if the Surgical Indemnity Benefit is paya		overed Major	r or Minor Su	urgical Proce	edure perfor	med on a		
Benefit Amount per Procedure per Covered Person per Plan Year	N/A	N/A	\$62.50	\$125	\$187.50	\$250		
Maximum Number of Procedures per Covered Person per Plan Year	N/A	N/A	1	1	1	1		
Accident Medical Expense Benefit ²								
	Reimburses up to \$2,000 if Accidental Bodily Injury causes an Insured Person to first incur Medical Expenses for care and treatment of the Accidenta Bodily Injury within ninety (90) days after an Accident. The Benefit Amount is payable only for Medical Expenses incurred within 52 weeks after the dat							
Maximum Benefit per Covered Accident	N/A	\$1,000	\$2,000	\$2,000	\$2,000			
•	N/A N/A	\$1,000 \$200	\$2,000 \$200	\$2,000 \$200	\$2,000 \$200			
Maximum Benefit per Covered Accident Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³						\$2,000		
Deductible per Covered Accident						\$2,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³						\$2,000 \$200		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing.	N/A	\$200	\$200	\$200	\$200	\$2,000 \$200 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life	N/A N/A	\$200 \$10,000	\$200 \$10,000	\$200	\$200	\$2,000 \$200 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears)	N/A N/A N/A	\$200 \$10,000 \$10,000	\$200 \$10,000 \$10,000	\$200 \$10,000 \$10,000	\$200 \$10,000 \$10,000	\$2,000 \$200 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears) Loss of Speech and One Hand, One Foot or Sight of One Eye Loss of Hearing and One Hand, One Foot or Sight of One Eye	N/A N/A N/A N/A	\$200 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000	\$2,000 \$200 \$10,000 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears) Loss of Speech and One Hand, One Foot or Sight of One Eye Loss of Hearing and One Hand, One Foot or Sight of One Eye Loss of Both Hands or Feet	N/A N/A N/A N/A N/A	\$200 () () () () () () () () () () () () ()	\$200 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000	\$2,000 \$200 \$10,000 \$10,000 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears) Loss of Speech and One Hand, One Foot or Sight of One Eye Loss of Hearing and One Hand, One Foot or Sight of One Eye Loss of Both Hands or Feet	N/A N/A N/A N/A N/A	\$200 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000	\$2,000 \$200 \$10,000 \$10,000 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears) Loss of Speech and One Hand, One Foot or Sight of One Eye Loss of Hearing and One Hand, One Foot or Sight of One Eye Loss of Both Hands or Feet Loss of Sight or a combination of any two of Hand, Foot or Sight of One Eye Loss of Hand or Foot	N/A N/A N/A N/A N/A N/A	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$2,000 \$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000		
Deductible per Covered Accident Accidental Death Benefit (Principal Sum) ³ Pays a lump sum for accidental loss of life, limb, speech, sight or hearing. Loss of Life Loss of Speech and Hearing (Both Ears) Loss of Speech and One Hand, One Foot or Sight of One Eye Loss of Hearing and One Hand, One Foot or Sight of One Eye Loss of Both Hands or Feet Loss of Sight or a combination of any two of Hand, Foot or Sight of One Eye	N/A N/A N/A N/A N/A N/A N/A	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$200 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	\$2,000		

² The Accident Medical Expense Benefit is payable on a primary basis for residents of FL, IN & OH. In all other jurisdictions, the Accident Medical Expense Benefit is payable on an excess basis.

³ The Primary Member's benefit is equal to 100% of the Principal Sum listed. The Spouse's or Domestic Partner's benefit is equal to 50% of the Member's Principal Sum. Dependent Children's benefit is equal to 10% of the Member's Principal Sum.

THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE. LACK OF MAJOR MEDICAL COVERAGE (OR OTHER MINIMUM ESSENTIAL COVERAGE) MAY RESULT IN AN ADDITIONAL PAYMENT WITH YOUR TAXES.

Important Notice: The insurance provided under the Accident and Sickness Limited Benefit Cash Policy provides limited benefits. Benefits are supplemental and not intended to cover medical expenses. A Covered Person should maintain a separate comprehensive health insurance coverage plan. This policy does not provide Medicare Supplement Coverage. If a Covered Person is eligible for Medicare by reason of age, review the Guide to Health Insurance for People with Medicare available from Federal Insurance Company.

Accident and Sickness Limited Benefit Cash Insurance and Voluntary Accident Insurance are underwritten by Federal Insurance Company, a Chubb company. The coverage described in this literature may not be available in all jurisdictions. This literature is descriptive only. Actual coverage is subject to the language of the policies as issued: Accident & Sickness Limited Benefit Cash policies #9908-09-15 and #9907-85-41 and Voluntary Accident policies #9907-85-42 and #9907-85-86. Exclusions and limitations apply. Chubb, 202 Halls Mill Road, Whitehouse Station, N.J. 08889.

Accident and Sickness Limited Benefit Cash Insurance

The following exclusions apply to the Accident and Sickness Limited Benefit Cash policy. This insurance does not apply to any loss that is caused by or resulting from, directly or indirectly:

1. any Accident caused by or resulting from, directly or indirectly, the Covered Person entering, flying or exiting any aircraft while acting or training as a pilot or crew member. This exclusion does not apply to passengers who temporarily perform pilot or crew functions in a life-threatening emergency.

2. Cosmetic surgery or care or treatment solely for cosmetic purposes, or complications therefrom. This exclusion does not apply to cosmetic surgery resulting from an Accident if initial treatment of the Covered Person is begun within twelve (12) months of the date of the Accident or to treat congenital defects in covered newborns.

3. any service, supply or care that is Experimental or Investigational. 4. any Accident caused by or resulting from, directly or indirectly, a Covered Person's participation in scuba diving to depths of more than 130 feet; skydiving; hang-gliding or para-gliding; parascending other than over water; bungee jumping; mountaineering or rock climbing normally requiring the use of guides or ropes; or caving.

5. any Accident or Sickness caused by or resulting from, directly or indirectly, the Covered Person's commission or attempted commission of a felony or being engaged in an illegal occupation.

6. immunization shots and routine examinations including: health exams; periodic check-ups; pre-marital exams; and routine physicals, except as otherwise covered under the policy.

7. any Accident or Sickness caused by or resulting from, directly or indirectly any occurrence while the Covered Person is incarcerated.

8. sex changes or the reversal of tubal ligation and vasectomies, artificial insemination, in vitro fertilization, and test tube fertilization, including any related testing, medications, or Physician's services, unless required by law.

9. any Accident caused by or resulting from, directly or indirectly, the Covered Person being intoxicated, at the time of an Accident. Intoxication is defined by the laws of the jurisdiction where such Accident occurs. This exclusion does not apply to residents of NV.

10. alcoholism or drug or substance abuse. In addition, the insurance does not apply to any confinement in a detoxification facility or drug or alcohol rehabilitation facility that is not also a Hospital or part of a Hospital.

11. any Accident or Sickness caused by or resulting from, directly or indirectly, the Covered Person being under the influence of any narcotic or other controlled substance at the time of the loss. This exclusion does not apply if any narcotic or other controlled substance is taken and used as prescribed by a Physician. 12. any benefits for Sickness caused by or resulting from a Covered Person's Pre-existing Condition if the Sickness occurs during the first 12 months that a Covered Person is insured under this policy. There is a 6 months Pre-Existing Condition in FL, KY and NV. 13. Pregancy, except Complications of Pregancy.

14. pregnancy of a Dependent Child, unless required by law.

15. any Accident caused by or resulting from, directly or indirectly, the Covered Person participating in any professional sporting activity for which the Covered Person received a salary or prize money.

16. any rest care or custodial care or treatment for any Accident or Sickness.

17. any Accident caused by or resulting from, directly or indirectly, the Covered Person being engaged in or participating in a motorized vehicular race or speed contest.

18. any Accident caused by or resulting from, directly or indirectly, the Covered Person traveling or flying on any rocket propelled or rocket launched conveyance.

19. any Accident or Sickness caused by or resulting from, directly or indirectly, the Covered Person participating in military action while in active military service with the armed forces of any country or established international authority.

20. related to the Covered Person's suicide, attempted suicide or intentionally self-inflicted injury.

21. voluntary abortion, except with respect to the Insured Person or his or her covered Spouse or Domestic Partner where such person's life would be endangered if the fetus were carried to term.

22. any Accident or Sickness caused by or resulting from, directly or indirectly, war, undeclared war, civil war, insurrection, rebellion, revolution, warlike acts by a military force or personnel, any action taken in hindering or defending against any of these or any consequences of any of these acts regardless of any other direct or indirect cause or event, whether covered or not, contributing in any sequence to the loss.

23. routine newborn well baby care, including routine nursery charges.

24. Accident or Sickness arising out of and in the course of any occupation for compensation, wage or profit or which are payable under Occupational Disease Law, Workers Compensation or similar law, whether or not application for such benefits have been made.

Voluntary Accident Insurance

The following exclusions apply to the Voluntary Accident policy. This policy does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing the insurance. In addition no benefits will be paid for any Accident, Accidental Bodily Injury or Loss caused by or resulting from any of the following:

1. an Insured Person entering, or exiting any aircraft while acting or training as a pilot or crew member. (This exclusion does not apply to passengers who temporarily perform pilot or crew functions in a life threatening emergency.)

2. an Insured Person's emotional trauma, mental or physical illness, disease, pregnancy, childbirth or miscarriage, bacterial or viral infection, bodily malfunctions or medical or surgical treatment thereof. (This exclusion does not apply to an Insured Person's bacterial infection caused by an Accident or by Accidental consumption of a substance contaminated by bacteria.)

3. an Insured Person's commission or attempted commission of any illegal act, including but not limited to any felony.

4. any occurrence while an Insured Person is incarcerated after conviction.

5. an Insured Person being intoxicated, at the time of an Accident. Intoxication is defined by the laws of the jurisdiction where such Accident occurs. 6. an Insured Person being under the influence of any narcotic or other controlled substance at the time of an Accident. (This exclusion does not apply if any narcotic or other controlled substance is taken and used as prescribed by a Physician.)

7. an Insured Person being engaged in or participating in a motorized vehicular race or speed contest.

8. an Insured Person participating in military action while in active military service with the armed forces of any country or established international authority. (This exclusion does not apply to the first 60 consecutive days of active military service with the armed forces of any country or established international authority.)

9. an Insured Person's suicide, attempted suicide or intentionally self-inflicted injury.

10. a declared or undeclared War.



FAQs

Are Pre-existing Conditions covered on the HD Essential Protection Accident and Sickness Limited Benefit Cash Insurance Plans?

The insurance does not pay any benefits for Sickness caused by or resulting from a Covered Person's Pre-existing Condition if the Sickness occurs during the first 12 months that a Covered Person is insured under the policy. (The time period is 6 months for residents of FL, KY and NV.). Pre-existing Condition means an Accident or a Sickness for which, in the 12 months before the Covered Person becomes insured under the policy, medical advice, treatment or care was sought by a Covered Person, or was recommended by, prescribed by or received from a Physician.

Is there a co-pay or deductible on my HD Essential Protection plan benefits?

There are no co-pays and only one benefit has a deductible. The Excess Accident Medical Expense Benefit on plan levels 2-6 has a \$200 deductible per occurrence.

How do the benefits pay?

Accident and Sickness Limited Benefit Cash Insurance pays a daily cash benefit directly to you. Excess Accident Medical Expense Insurance will reimburse covered expenses up to the benefit amount. Accidental Death & Dismemberment pays a lump sum payment.

How do I file claims for my benefits?

Register and login to your Member Portal at **www.healthdepotassociation.com**; print the appropriate CHUBB Claim Form; complete and sign; and send completed forms to: **Co-ordinated Benefit Plans, LLC, Health Depot Association Claims, P.O. Box 21673, Eagan, MN 55121.** If you have questions about filing a claim or would like to check on a claim status, please call (866) 224-6318 and their Customer Service Team will be glad to assist you. You can also check on a claim status online at **CBPconnect.com**.

Can I make changes to my membership?

You may make changes to your membership during the first thirty (30) days of coverage, on your annual anniversary or if you experience a Qualifying Event.

What is a Qualifying Event?

Qualifying Events allow you to make changes to your membership outside of your annual anniversary date:

- Change in legal marital status marriage, divorce, annulment, death of a spouse or legal separation
- Change in dependent children birth, adoption, legal guardianship or death of a child
- Dependent children "age out" child's age exceeds the age limitations of the membership

To make changes to your membership due to a Qualifying Event, call Health Depot Customer Service at (855) 351-7535.

I am moving, what do I need to do?

Please login to the Member Portal and change your address or you can call Health Depot Customer Service at (855) 351-7535. It is crucial that your address is correct in our system, because an incorrect address could delay your claims.

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Membership Rates

HD Essential Protection Monthly Membership Rates

	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
Member	\$124	\$154	\$189	\$214	\$244	\$269
Member + 1	\$139	\$195	\$249	\$289	\$329	\$355
Member + Family	\$169	\$249	\$295	\$339	\$389	\$419

One-time \$99 enrollment fee applies for levels 2-6 and one-time \$75 enrollment fee applies for level 1, charged by Health Depot Association.



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The Health Depot Association

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