

Short-Term Medical FAQ

What does 10-day right-to-return period mean?

If you are not completely satisfied with your coverage and have not filed a claim, you may send a written request to decline your insurance coverage within 10 days of purchase and receive a refund of premium and fees.

Do all of my benefits go away once my temporary health insurance ends?

If you purchased additional coverage(s) along with your short-term medical policy*, you will continue to be billed for those products after your benefit coverage period has expired unless we receive written notification to cancel. To cancel any other products once your short-term medical coverage ends, contact policy services using the information listed in the green box.

If my short term medical policy coverage period ends and I do not have access to major medical health insurance, can I apply for temporary coverage again?

Depending on your state of residence, you may apply for a new short term medical policy, subject to pre-existing condition exclusions. Please contact your insurance advisor or Customer Service for more information.

I purchased multiple insurance products. Will I only receive one bill?

If you select additional coverage(s) along with your short term medical policy, your bank statement will reflect individual transactions for each separate coverage you have selected. Payments are not combined, and could deduct from your account at various times throughout the month. Contact Customer Service with any billing questions.

When will my premium for the short term medical policy deduct from my account?

After your initial payment, your subsequent monthly credit card or bank account premium deductions will occur based on the effective date of coverage. If your coverage effective date is the 1st-14th of the month, your premium will be deducted on the 1st of the month. If your coverage effective date is the 15th-31st of the month, your premium will be deducted on the 15th of the month.

How do I change my bank information?

If you wish to change your bank information please complete the bank authorization at www.myihcgroup.com/payment and email or fax the form found in the contact information listed in the green box.

Administrative and Billing Customer Service

Phone: 800-397-5800

Email: newpolicyservices@ebix-hae.com

Claims and Benefits Customer Service

Phone: 866-513-1479

Email: ebix.claims@ebix-hae.com

Administrative and Billing

Fax: 815-633-0277

Mailing Address

Ebix Health Administration Exchange, Inc.
PO Box 15250
Loves Park, IL 61132-5250

About The IHC Group

Independence Holding Company (NYSE: IHC) is a holding company that is principally engaged in underwriting, administering and/or distributing group and individual specialty benefit products, including disability, supplemental health, pet, and group life insurance through its subsidiaries since 1980. The IHC Group owns three insurance companies (Standard Security Life Insurance Company of New York, Madison National Life Insurance Company, Inc. and Independence American Insurance Company), and IHC Specialty Benefits, Inc., a technology-driven insurance sales and marketing company that creates value for insurance producers, carriers and consumers (both individuals and small businesses) through a suite of proprietary tools and products (including ACA plans and small group medical stop-loss). All products are placed with highly rated carriers.

About Ebix Health Administration Exchange, Inc.

Ebix Health Administration Exchange, Inc. doing business as Ebix Health Administration ("Ebix HAE") is an administrative services company that operates in 50 jurisdictions in both the individual and employer markets. Through certain administrative agreements with insurance carriers and its affiliation with Ebix Incorporated, Ebix HAE offers state-of-the-art and highly efficient open health insurance exchanges. Ebix HAE also provides pet insurance solutions that furnish pet owners, specialty pet hospitals, universities and general veterinary practices with the only open exchange in the country.

About Standard Security Life Insurance Company of New York

Standard Security Life was founded in 1958, and is domiciled in the State of New York and headquartered in New York City. It is licensed in all 50 states, the District of Columbia, the Virgin Islands, and Puerto Rico. Standard Security Life provides various lines of life, health and disability insurance, including: employer medical stop-loss, disability benefit law (DBL), short-term medical, group major medical, individual and group dental and vision, individual accident and health insurance, group term life, specialty programs designed for volunteer emergency service personnel, including group life insurance and service awards programs. Standard Security Life is rated A- (Excellent) by A.M. Best Company, Inc., a widely recognized rating agency that rates insurance companies on their relative financial strength and ability to meet policyholder obligations (an A++ rating from A.M. Best is its highest rating).

*Coverage includes association membership enrollment in Communicating for America, Inc. Communicating for America, Inc., (CA) is a national non-profit advocacy organization that supports affordable healthcare for all Americans. Since 1972, more than 100,000 consumers have trusted CA to help them find affordable health insurance and Gap plans to stretch their healthcare dollar while advocating on their behalf with insurance companies, regulators and lawmakers.

THIS IS A SHORT TERM HEALTH BENEFIT PLAN THAT IS NOT INTENDED TO QUALIFY AS THE MINIMUM ESSENTIAL COVERAGE REQUIRED BY THE AFFORDABLE CARE ACT (ACA). UNLESS YOU PURCHASE A PLAN THAT PROVIDES MINIMUM ESSENTIAL COVERAGE IN ACCORDANCE WITH THE ACA, YOU MAY BE SUBJECT TO A FEDERAL TAX PENALTY. ALSO, THE TERMINATION OR LOSS OF THIS POLICY DOES NOT ENTITLE YOU TO A SPECIAL ENROLLMENT PERIOD TO PURCHASE A HEALTH BENEFIT PLAN THAT QUALIFIES AS MINIMUM ESSENTIAL COVERAGE OUTSIDE OF AN OPEN ENROLLMENT PERIOD. THIS POLICY INCLUDES A PRE-EXISTING CONDITION EXCLUSION PROVISION.

