

Independence Hospital Insurance Plus

Fixed Hospital Indemnity Insurance

At a time when high deductibles and out-of-pocket costs are on the rise, Independence Hospital Insurance Plus provides options to help manage those costs.

THE IHC GROUP

Independence American Insurance Company
A Member of The IHC Group

This policy is underwritten by Independence American Insurance Company (IAIC), a member of The IHC Group. For more information about IAIC, visit www.independenceamerican.com. This policy is administered by The Loomis Company.

This product is not considered to be Minimum Essential Coverage as defined by the Patient Protection and Affordable Care Act (ACA).

Brochure Independence Hospital Insurance Plus 0321

Designed to provide coverage for hospitalizations due to accidents or illnesses, Independence Hospital Insurance Plus features:

- **Apply anytime** – with no open enrollment period requirements, you can apply for coverage year-round
- **Benefits that benefit you** – no deductibles or annual maximum requirements to meet
- **Keep your doctor** – there are no network requirements or limitations, so you can continue visiting any doctor or hospital you like
- **Optional Cancer benefit** – receive a lump-sum benefit if diagnosed with life threatening cancer
- **Flexibility** – with three plan options to choose from, finding the option that best fits your individual needs and budget is easy

Benefit Selection

All benefits listed apply per covered person. The premiums will vary with the amount of the benefit selected.

	Hospital Plus 20	Hospital Plus 30	Hospital Plus 40
Lump-Sum Hospital Benefit pays a lump-sum amount each inpatient hospitalization.	$1,000	$1,500	$2,000
Outpatient Facility Services Benefit pays selected amount one day per calendar year when outpatient surgery is received in an outpatient surgery facility.	$2,000	$3,000	$4,000
Wellness and Preventive Care Benefit pays the amount selected, one visit per calendar year, after the initial three-month waiting period.	$50	$100	$150
Daily Hospital Benefit pays per day, up to 31 days of inpatient hospitalization per calendar year.	$2,000	$3,000	$4,000
Urgent Care Benefit pays the amount selected, one visit per calendar year.	$250		
Physician Office Visit* Benefit pays the amount selected, three visits per calendar year for any illness or injury.	$100		
Cancer Rider** Benefit pays a lump-sum of the amount selected once per lifetime.	$2,000	$3,000	$4,000

**Michigan: Physician Office Visit benefits not available*

***Cancer Rider not available in CO, ID, KS, MA, NH, NM, NJ, NY, OR, VT or WA.*

Additional benefits included in all three options

Inpatient Hospital Services
Observation Unit - Benefit pays $250, one day per period of care, up to six per calendar year. Period of care is defined as a period after which the covered person is initially admitted to a hospital, receives treatment in an outpatient facility or received outpatient chemotherapy or radiation therapy. A period of care ends 190 consecutive days from which the injury or illness began.
ICU/CCU Confinement - Benefit pays $500, one day per calendar year
Inpatient Physician Visit - Benefit pays $200, one day per calendar year during a hospital, ICU, or CCU stay
Inpatient Surgeon - Benefit pays $2,000 per surgery, unlimited
Inpatient Assistant Surgeon - Benefit pays $800 per surgery, unlimited
Inpatient Anesthesiologist - Benefit pays $600 per surgery, unlimited
Outpatient Services
Outpatient Surgeon - Benefit pays $2,000 per surgery, unlimited
Outpatient Assistant Surgeon - Benefit pays $800 per surgery, unlimited
Outpatient Anesthesiologist - Benefit pays $600 per surgery, unlimited
Diagnostic Services - Benefit pays $200, two tests per calendar year related to illness or injury
Advanced Imaging - Benefit pays $500, two tests per calendar year
Other Services
Emergency Room Visit - Benefit pays $500, two visits per calendar year
Ground or Water Ambulance - Benefit pays $500, one trip per calendar year
Air Ambulance - Benefit pays $500, one trip per calendar year
Second Surgical Opinion - Benefit pays $100, one visit per calendar year

Eligibility

Independence Hospital Insurance Plus is available to the primary applicant age 18 to 64.5, their spouse age 18 to 64.5, and dependent children under the age of 26.

Wellness and Preventive Care Waiting Period

The period following your effective date during which no benefits are payable. For all three plans, there is a three-month waiting period before benefits are payable. There is no waiting period for this benefit in Maryland, Missouri, New Hampshire, North Dakota, Rhode Island, Tennessee and Utah. The Wellness and Preventive Care benefit is not available in Michigan.

Pre-Existing Condition Limitation Definition

The policy contains a pre-existing condition limitation. We will not pay benefits for loss resulting from a pre-existing condition, unless such loss occurs 12** months or more after the effective date. A pre-existing condition is a condition for which medical advice, diagnosis, care, or treatment was recommended by or received from a physician within 12* months prior to the effective date or which manifested itself within 12* months prior to the effective date in a manner that would have caused a reasonably prudent person to seek diagnosis, care or treatment by a physician. Definition may vary by state.

**6 months in MI, NC, NH, UT.
*6 months in MI, NC, NH, UT.

Exclusions

The following list of exclusions is a partial list of services or charges not covered. Exclusions may vary by state, check the policy for a full listing.

- Preventive care, except as specified in the Wellness and Preventive Care Benefit, as shown in the schedule of benefits
- Any treatment, service or supply which is:
  - Not due to an illness or injury
  - Not recommended by a physician
  - Not medically necessary
  - No charge is made or the covered person is not required to pay
  - Provided by a government owned or operated facility or by government employed health care providers
- Treatment, services or supplies:
  - To improve the appearance or self-perception of a covered person, which does not restore a bodily function including cosmetic or plastic surgery, hair loss or skin wrinkling, or the complications of any such treatment
  - For breast augmentation, the removal of breast implants unless medically necessary and related to surgery performed as reconstructive surgery due to an illness and breast reduction surgery unless medically necessary due to an illness
  - To restore or enhance fertility or to reverse sterilization
  - Impregnation techniques such as artificial insemination or in vitro fertilization; including but not limited to artificial insemination, in vitro zygote and intra-fallopian transfers, gamete intra-fallopian transfer and genetic counseling
  - For complications of conditions that are not covered under the policy
  - Related to the teeth and the gums other than tumors and any other associated structures and the prevention or correction of teeth irregularities and malocclusion of jaws by wire appliances, braces or other mechanical aids and dental implants, regardless of the cause
  - As the result of prognathism, retrognathism, microtrognathism, or any treatment, services or supplies to reposition the maxilla (upper jaw), mandible (lower jaw), or both maxilla and mandible, unless due to an injury to sound natural teeth which occurs while the covered person is covered under the policy and provided such treatment is received within 12 months following the date of the injury, or is to correct growth defects after one year from the date of birth of a covered dependent child
  - To eliminate or reduce a dependency on or an addiction to tobacco, including nicotine withdrawal programs; nicotine products, such as transdermal patches and gums; hypnotism; and goal oriented behavioral modification

- Related to the feet by means of posting or strapping, or range of motion studies or to paring or removal of corns, calluses, bunions or toenails (other than partial or complete removal of nail roots)
- For obesity or weight reduction, including wiring of the teeth and all forms of intestinal bypass surgery and complications resulting from such surgery

› Illness or injury:
- Which arises out of or in the course of any employment for wage or profit or an illness or injury for which the covered person has or had a right to recovery under any workers' compensation or occupational disease law
- Incurred during the commission or attempted commission of a crime or felony or while engaged in an illegal act, while imprisoned or incurred or contracted as a consequence of a covered person being intoxicated, under the influence of any illegal narcotic, barbiturate, hallucinatory or other drug, unless administered by a physician and taken in accordance with a prescribed dosage
- For which treatment, services or supplies were received or purchased outside the United States unless the charges are incurred while traveling on business or for pleasure, for a period not to exceed 90 days, and the charges are incurred for an emergency, provided the treatment, services or supplies used in connection with the emergency are approved for use in the United States
- Resulting from participation in hazardous avocations including mountain or rock climbing, sky diving, hang gliding, motor vehicle racing, scuba diving, rodeo or private aviation

› A weekend hospital confinement occurring between noon on any Friday and noon the following Sunday for non-emergency procedures, unless medically necessary or unless surgery is scheduled for the next day
› Physical or psychological examinations required by any third party, such as by a court or for employment, licensing, insurance, school, sports or recreational purposes
› Surgery to correct refractive errors, such as radial keratotomy or radial keratectomy
› Routine eye exams, glasses, visual therapy, contact lenses
› Routine hearing exams, purchase, fittings or adjustments for hearing aids; purchase, fittings or adjustments of hearing aids
› International travel immunizations
› Penile implants and fertility and sterility studies
› Voluntary abortion, except if the life of the mother would be in danger if the fetus were carried to term
› Mental illness disorders
› Substance abuse, or medical conditions resulting there from
› Marriage or family counseling, recreational therapy, equine therapy, educational therapy, social therapy, or sex therapy
› Sexual reassignments or sexual dysfunctions or inadequacies
› Meridian therapy (acupuncture), or spinal manipulation
› Orthotics
› Custodial Care, domiciliary care or rest cures regardless of who prescribes or renders such care
› Telephone consultations, missed appointment fees and fees for completing claim forms
› Treatment services or supplies provided for temporomandibular joint (TMJ) dysfunction
› Occupational or Speech Therapy (unless covered under the Home Care Services Benefit Rider, if selected)
› Hospice care or home health care
› Experimental or investigational procedures, drugs, treatment methods, organ transplant procedures
› Pregnancy and related services and routine newborn care, except for services related to a complication of pregnancy
› Services related to joint replacement, unless performed due to an Injury
› Intentional self-inflicted illness or injury while sane; except that this exclusion will not apply to any self- inflicted illness or injury that is the result of a medical condition
› Physical Therapy (unless covered under the Home Care Services Benefit Rider, if selected)
› Inpatient personal convenience items including beauty or barber services, radio and television, massages, telephone charges, take home drugs and supplies, guest meals, and motel accommodations



Important Information

This brochure provides a very brief description of the important features of Independence Hospital Insurance Plus. This brochure is not the insurance Policy, and only the actual Policy provisions will control. The Policy itself sets forth, in detail, the rights and obligations of both the policyholder and the insurance company. It is, therefore, important that you READ THE POLICY CAREFULLY. For complete details, refer to the Fixed Hospital Indemnity Insurance Policy (IAIC HIP POL 0719), and the Cancer Benefit (IAIC HIP CAN 0719). Policy number may vary by state.

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.

THIS POLICY IS NOT A MEDICARE SUPPLEMENT POLICY. It is not intended to replace any Covered Persons' present health insurance. If a Covered Person is eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from Independence American Insurance Company (IAIC).

About Independence American Insurance Company

Independence American Insurance Company is domiciled in Delaware and licensed to write property and/or casualty insurance in all 50 states and the District of Columbia. Its products include short-term medical, hospital indemnity, fixed indemnity limited benefit, group and individual dental, and pet insurance. Independence American is rated A- (Excellent) for financial strength by A.M. Best, 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). Located at 485 Madison Ave., Floor 14, New York, NY 10022.

About The Loomis Company

The Loomis Company (Loomis), founded in 1955, has been a leading Third Party Administrator (TPA) since 1978. Loomis has strategically invested in industry leading ERP platforms, and partnered with well-respected companies to enhance and grow product offerings. Loomis supports a wide spectrum of clients from self-funded municipalities, school districts and employer groups, to large fully insured health plans who operate on and off state and federal marketplaces. Through innovation and a progressive business model, Loomis is able to fully support and interface with its clients and carriers to drive maximum efficiencies required in the ever evolving healthcare environment.

About The IHC Group

Independence Holding Company (NYSE: IHC), formed in 1980, is a holding company that is principally engaged in underwriting, administering and/or distributing group and individual specialty benefit products, including Medicare Supplement, disability, supplemental health, pet, and group life insurance through its subsidiaries (Independence Holding Company and its subsidiaries collectively referred to as "The IHC Group"). The IHC Group consists of three insurance companies (Standard Security Life Insurance Company of New York, Madison National Life Insurance Company, Inc. and Independence American Insurance Company). We also own the following agencies: (i) PetPartners Inc., our pet insurance administrator; (ii) IHC Specialty Benefits, Inc., a technology-driven full-service marketing and distribution company that focuses on small employer and individual consumer products through its call center, career agents, and Independence Brokerage Group; and (iii) The INSX Cloud Platform through My1HR, our wholly-owned Web-Based Entity. Our InsureTech division is comprised of our call centers, field and career agents, in-house MarTech artificial intelligence capabilities, and domains, including www.healthedeals.com; www.healthinsurance.org; www.medicareresources.org; www.petplace.com; and www.mypetinsurance.com.

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