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National General Accident and Health markets products underwritten by
National Health Insurance Company, Integon National Insurance Company,
and Integon Indemnity Corporation.

New Short Term Medical PPO



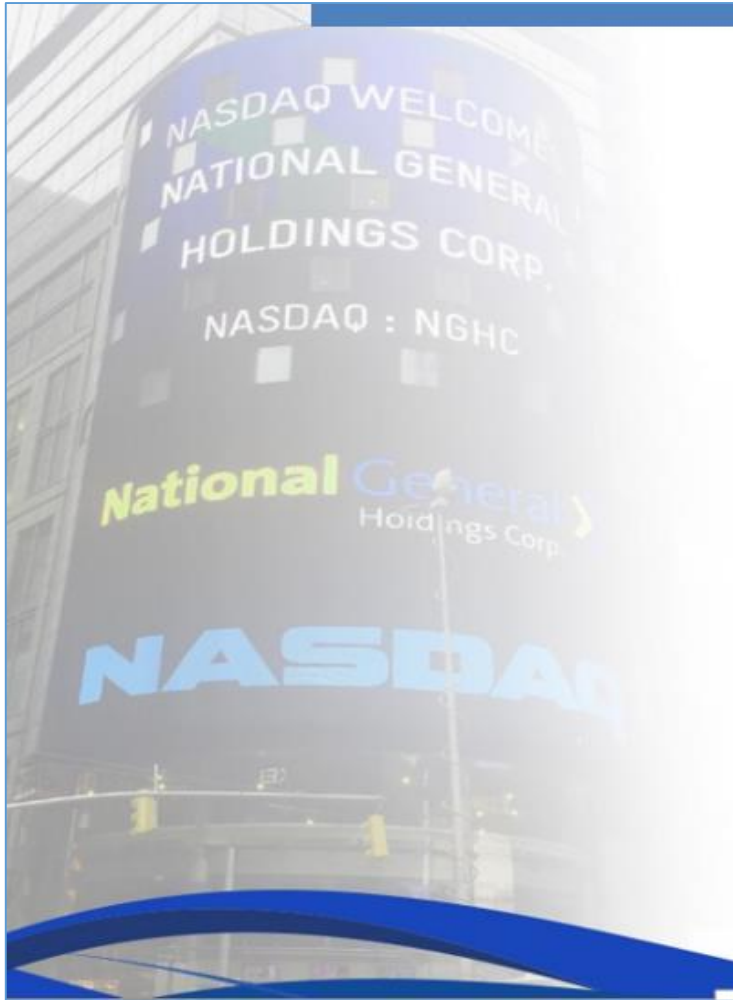
Why NatGen?

New Short Term PPO Offerings

Benefits in Depth

Out-of-Pocket Protectors

Why National General?



- Roots back to 1939
- AM Best A- rated company
- Specialist in Short Term Medical and Supplement insurance
- Listed as NGHC on NASDAQ

What's New?

- Addressed both agent & client feedback
- Staying on top of market shifts while being transparent
- Giving you more opportunity to help clients with long-term solutions
- One-stop health insurance company with more options
- More robust plan options that include: Office Visit Copays, Rx Copays, increased Coverage Period Maximums, and more

What's New?

- ✓ True PPO plan, versus a passive PPO, helping to reduce premiums
- ✓ Three Short Term plan designs as well as our Guaranteed Issue plans

Copay Enhanced PPO, Enhanced PPO & Essentials PPO

- ✓ Multiple Discounts for 2 or more people on a plan & non-smokers
- ✓ Ability to purchase consecutive terms for up to 24 months or renewable options up to 36 months*

*length and policy count dependent on state

Why Short Term Medical?

Sell certainty with transparency

Short Term Medical is a great option for clients who:

- Want longer term plan stability with renewable options
- Don't want to pay the high costs of ACA plans and need budget-friendly options
- Missed the Open Enrollment Period
- Are between jobs or meeting a waiting period requirement
- Want coverage that includes office visits, preventive care, urgent care, prescriptions, and more
- Are looking for to bridge the gap to Medicare



Short Term Medical Plans Provide Limited Benefits and are not Minimum Essential Coverage as mandated by the Affordable Care Act. Your customers may be subject to a tax penalty if this is their only insurance coverage. This is not comprehensive major medical coverage.

Plan Details: Benefits

Doctor Visits

Applies to deductible and coinsurance or
Copay option with our Copay Enhanced plan

Urgent Care

Unlimited visits
Insured pays \$50 per visit,
Plan deductible is waived, remaining cost applies to coinsurance

Child Immunizations

First Dollar Benefit
Up to age of 18

Adult Screenings

Applies to deductible and coinsurance

Diagnostic & Lab

Applies to deductible and coinsurance
Both tests and readings/interpretations covered

All plans are subject to pre-existing limitations. Benefits for sickness have a 7-day wait , preventive and accident coverage starts right away

Plan Details: Benefits

Emergency Room

Unlimited visits
Insured pays \$250 access fee unless admitted
Applies to deductible and coinsurance

Inpatient Services

Applies to deductible and coinsurance
Includes hospitalization

Outpatient Services

Applies to deductible and coinsurance
No limit accept on Essentials PPO (\$15,000 limit)
Includes: *Surgeon, Anesthesia, Office Visits, Preventive, Urgent Care, Diagnostic & Labs**

**Sample benefits, for full list refer to the benefit summaries or policy contracts*

Plan design – Copay Enhanced PPO

Deductible	Coinsurance	Coinsurance OOP Per member	Coverage Period Maximum	Copay Specific benefits	
				Benefits	Coverage
\$2,000	75%/25%	\$7,500	\$5,000,000	Office Visit Copay	\$40 PCP \$60 Specialists
\$4,000	75%/25%	\$7,500	\$5,000,000	Pharmacy Copay	\$10 generic drugs \$3,000 Max benefit
\$6,000	100%	\$0	\$5,000,000	Adult Immunization	Applies towards deductible and coinsurance
\$8,000	100%	\$0	\$5,000,000		

Plan design – Enhanced PPO

Deductible	Coinsurance	Coinsurance OOP Per member	Coverage Period Maximum*
\$2,500	50%/50%	\$5,000	\$1,000,000
	80%/20%	\$5,000	
	100%	\$0	
\$5,000	50%/50%	\$5,000	\$1,000,000
	80%/20%	\$5,000	
	100%	\$0	
\$7,500	80%/20%	\$5,000	\$1,000,000
\$10,000	100%	\$0	\$1,000,000
\$25,000	100%	\$0	\$1,000,000

* In Indiana, the Coverage Period Maximum is \$2 million

Plan design – Essentials PPO

Deductible	Coinsurance	Coinsurance OOP Per member	Coverage Period Maximum*
\$5,000	60%/40%	\$7,500	\$250,000
\$10,000	60%/40%	\$7,500	\$250,000
\$25,000	60%/40%	\$7,500	\$250,000

* In Indiana, the Coverage Period Maximum is \$2 million

Out of Network

All PPO Plans

Out of Network

Deductible and Coinsurance are double their In-network amounts

Coinsurance Percentages are the same

Family Deductible

Capped at 3x the individual deductible

Families more than 3 members, all covered expenses accumulate towards family deductible, no individual will pay more than their individual deductible

Plan Design options — Guaranteed Issue

Deductible	\$3,500
Coinsurance	80% / 20%
Coinsurance MOOP	\$6,500
Coverage Period Maximum	\$100,000

Deductible	\$5,000
Coinsurance	90% / 10%
Coinsurance MOOP	\$5,000
Coverage Period Maximum	\$100,000

*Guaranteed Issue plans are subject to pre-existing condition limitations.
Cannot be longer then 12 months
Out-of-network deductible and coinsurance are double their In-Network amounts*

Plan Details: Network Savings



Aetna Open Choice[®] PPO Network

690,000 Medical Providers ¹

5,700 Hospitals ¹

¹ Source: <https://www.aetna.com/about-us/aetna-facts-and-subsidiaries/aetna-facts.html>

Coverage Solutions

Available at time of application

Renewable plans

- Can choose 2 or 3 years
- Year one, no more than 364 days
- Full 3 years of coverage
 - Term two 366 days
 - Term three 365 days

Consecutive plans

- 2 years available
- No more than 364 days per policy term

Renewable plans

- ***Eligible expenses for pre-existing conditions are covered after 12 months of coverage***
- Deductible/Coinsurance Reset with each new policy term
- Coverage Period Max does not reset
- ***Rate-guarantee*** option available

Consecutive plans

- Deductible/Coinsurance Reset with each new policy term
- Coverage Period Max does reset with each new policy term
- Rate shown at time of purchase, may vary with each policy term

L.I.F.E. Association



- TeleMed for LIFE
 - Connect to a physician via phone or video too, 24/7
 - Unlimited consultations at no extra cost
- Pharmacy discounts
 - Pre-negotiated savings on prescriptions, vitamins, and more
- Hospital Negotiation services and Discounts on Direct Lab services
- Other discounts and services include ID theft protection, auto discounts, fitness center discounts, member travel advantages, entertainment discounts, and more

LIFE Association Membership benefits may vary by state. Lifestyle and wellness benefits and discounts are not insurance. Your agent and National General Accident & Health may receive financial compensation in connection with membership fees.

State Availability

First year Term

Renewable Available

Consecutive Available

AL	12 months (minus 1 day)	Yes	Yes
AZ	12 months (minus 1 day)	Yes	Yes
FL	12 months (minus 1 day)	Yes	Yes
GA	12 months (minus 1 day)	Yes	Yes
IN	12 months (minus 1 day)	Yes	Yes
KY	12 months (minus 1 day)	Yes	Yes
LA	12 months (minus 1 day)	Yes	Yes
MI	6 months	N/A	N/A
MT	6 months	N/A	N/A
NV	6 months	N/A	N/A
SC	11 months	Yes	Yes
WI	12 months (minus 1 day)	1 renewal, only 6 months	N/A
WV	12 months (minus 1 day)	Yes	N/A
TX	12 months (minus 1 day)*	Yes <i>*avail. 1/1/2020 and later</i>	Yes

Eligibility – Age

Primary applicant

- Ages 60 days thru 64 years
 - Children up to age 26 on parent's plan

Child-only applications

- 60 days thru 17 years of age



Rating Clients

Non-Smoker

- 10% less
- No nicotine use in past 12 months

Multi-Person

- 10% discount on two or more

6 months or Less

- 10% discount *AL, AR, FL, GA, KS, KY, LA, ME, NC, NE, OH, SD, SC, TN, VA, UT, WI, WY & WV*
- 20% in Texas



Health Eligibility

- Height and weight are collected at time of application.
- Ineligible for the simplified issue if over:
 - 300 lbs. if male
 - 250 lbs. if female
 - Guaranteed issue is still an option



Health Eligibility Questionnaire

- Is any applicant now pregnant, an expectant parent, in the process of adopting, in the process of surrogate pregnancy or undergoing infertility treatment?
- Within the last 5 years, has any applicant received medical or surgical treatment, consulted a health care professional, or has medication been prescribed or recommended for Acquired Immune Deficiency Syndrome (AIDS) or tested positive for Human Immunodeficiency Virus (HIV)?
- In the last 12 months, has any applicant:
 - Been recommended or scheduled for testing (excluding routine), treatment, follow-up, or surgery that has not been completed?
 - Consulted a health care professional for signs and symptoms of a medical condition for which a diagnosis has not been determined or a final diagnosis has not been communicated or determined?

Some states may require more questions

Health Eligibility Questionnaire



Within the last 5 years, has any applicant received medical or surgical treatment, consulted a health care professional, or has medication been prescribed or recommended for the following:

Systemic Lupus Erythematosus or Multiple Sclerosis (MS)

Emphysema, Chronic Obstructive Pulmonary Disease (COPD)

Alcoholism, Alcohol or Chemical Dependency, or Drug or Alcohol Abuse

Coronary Artery Disease (CAD), Heart Attack, or a heart procedure

Stroke, Transient Ischemic Attack (TIA) or Carotid Artery Disease

Neck or Back Disorder, Joint Replacement

Crohn’s Disease or Ulcerative Colitis

Diabetes or Prediabetes

Bipolar Disorder or Schizophrenia

Kidney disorders

Heart disorder

Cancer, Tumor, Lump, or Mass

Liver disorders

Some limitations and exclusions include:

- Charges resulting directly or indirectly from a Pre-Existing Condition or a complication resulting from a Pre-Existing Condition
- Maternity
- Expenses occurred outside the United States, its possessions, or Canada
- Cosmetic Services
- Hazardous Activities
- Hazardous Occupations
- Mental Illness/Substance abuse
- Worker's compensation, employer's liability
- Eyeglasses, contact lenses, eye exams
- Weight control

This is NOT a comprehensive list of limitations and exclusions. Refer to brochure for a summary, see state-specific list on NGAH-NGIC.com

Quoting Rates

Quick Quote

Zip Code: 36104

Census Information

☐ Child Only

	Relationship	Zip Code	County	Gender	DOB	Tobacco Usage ⁱ
Applicant:	Self	36104	MONTGOMERY	<div></div>		<div></div>
Spouse:	<div>Relationship</div>	36104	MONTGOMERY	<div></div>		<div></div>
Dependent 1:	<div>Relationship</div>	36104	MONTGOMERY	<div></div>		<div></div>
Dependent 2:	<div>Relationship</div>	36104	MONTGOMERY	<div></div>		<div></div>

+ Add More Dependents

Start coverage on:

06/20/2019

Short-Term coverage up to:

12-Month [Renewable]

Renewal Options:

2 Renewal (Fixed Premium)

Payment Method:

Monthly Payment

Back

Show Plans

Quoting Rates

Select Plans

Web Report Preview

View Census Info

Effective Date05/15/2019

UPDATE

View By

Add All Plans to Cart

Short-Term

Cancer

Dental

Vision

Accident

+

Payment MethodMonthly

Coverage Up to12 Months [Renewable]

Renewal Options1 Renewal

24 months of coverage

You are currently viewing 12 Months Renewable plans with 1 renewal. This extends coverage up to 24 Months.

National General

Accident & Health

Plan Name	Primary Care Visit	Inpatient Hospital Services	Deductible	EHB OOP Max	Premium
Bronze 60 HDHP EnhancedCare PPO	40% after ded.	40% after ded.	\$6,000 w/Rx	\$6,650 w/Rx	\$500.84

Combine with our supplemental plans for even more coverage

We have many coverage options to choose from

Coverage for
out-of-pocket
expenses

- Plan Enhancer: AME with optional CHS and SIP riders*
- TrioMed: AME | Critical Illness | AD & D
- Cancer and Heart/Stroke
- Hospital Expense Protection
- Term Life – Critical Illness, or Term Life only
- National General Foundation Health – Fixed-benefit plan
- Dental PPO or Dental Indemnity plans also make a great add-on

These Plans Provide
Limited Benefits

**Riders not available in all states*

Oscar – Colon Cancer*

Help with the unexpected

Oscar went in for a routine check up, finds out he has Colon Cancer. He has our Short Term Medical, \$5,000 deductible, 100% co-insurance

Cancer and Heart/Stroke benefit	\$50,000
Treatment Cost	\$14,019
Short Term Medical paid	\$9,019
Cancer and Heart/Stroke Paid:	\$50,000
Remaining Cash Benefits:	\$45,000

* Average cost of cancer treatment for one year according to the Medical Expenditure Panel Survey, statistical brief #345, November 2011



Not an actual case. Presented for illustration only.
Cost of services will vary.

Enrollment



Coverage can start as early as the next day



Initial Payment

Drawn at time of application



Payment options

Monthly: recurring payments drawn 5 days before the Monthiversary of start date

Single Payment: option premium is non-refundable



Form of Payment

EFT

Visa, MasterCard, or Discover

Resources



Type in:

***National General
Accident and Health***

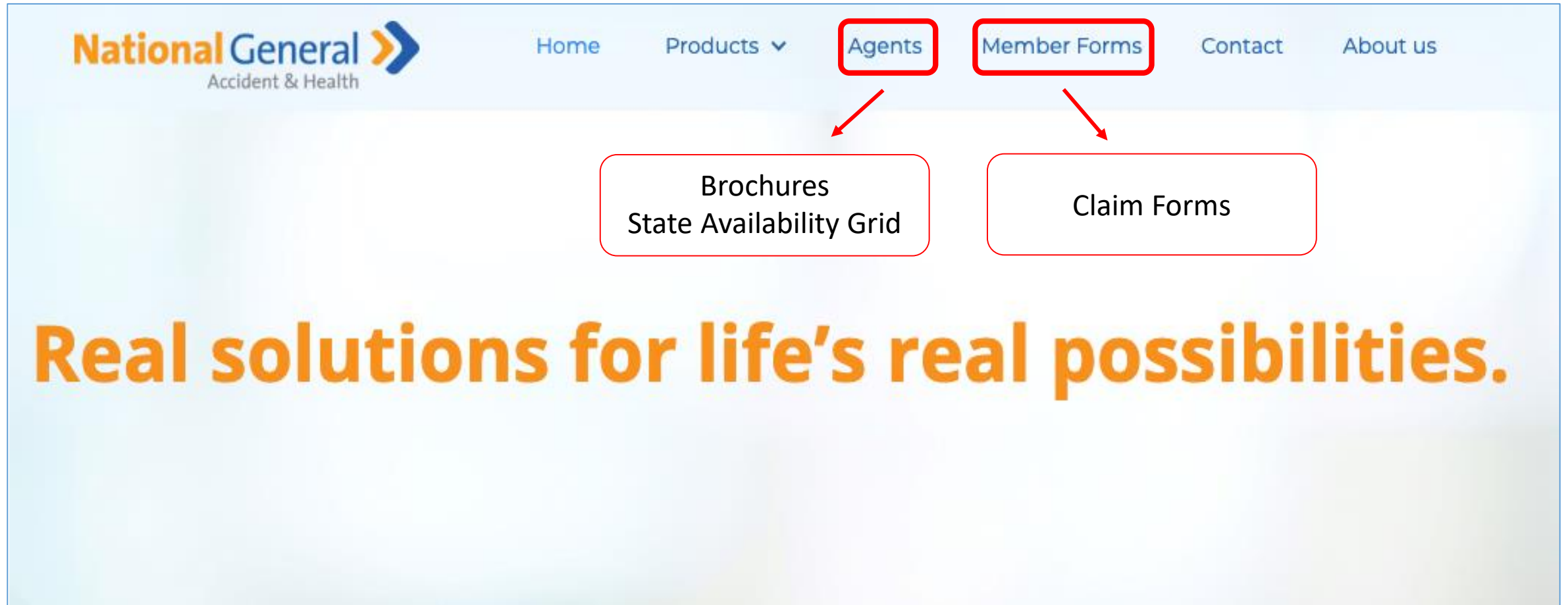
On Demand Training for our:

- Products
- Quoting systems
- Policy Administration



Resources

www.NGAH-NGIC.com



Why this Short Term Medical?

National General's

- Help with Pre-existing benefits after 12 months of coverage
- Transparency throughout your sales process
- More options to fit all types of your clients' needs and budgets
- Copays, Rx benefits, and easy underwriting
- Simple cross-selling platform

Other Carriers

- Some never help with pre-existing conditions
- Uncertainty about next year's premiums
- Waiting Periods on preventive benefits
- Fewer options
- No Out-of-Network benefits
- Small portfolio

Short Term Medical – recap



Aetna Open Choice® PPO Network



\$50 access fee to urgent care with unlimited visits, subject to coinsurance



Rate-guarantee with our rate transparency



As young as 60 days old



3 years back-to-back renewable coverage



Doctor Visit and Prescription Copay options

Remember, the following must be clear to your clients:

This coverage is not required to comply with federal market requirements for health insurance, principally those contained in the Affordable Care Act (ACA). Be sure clients check their policy carefully to make sure they are aware of any exclusions or limitations regarding coverage of pre-existing conditions or health benefits (such as hospitalization, emergency services, maternity care, preventive care, prescription drugs, and mental health and substance use disorder services). If this coverage expires or they lose eligibility for this coverage, they might have to wait until an open enrollment period to get other health insurance coverage.

Short Term Medical plans do not provide the same benefits and coverage term options as ACA major medical plans and should not be sold as ACA plans.

Questions?



Email: Training@ngisadmin.com