



THIS PLAN PROVIDES LIMITED BENEFITS.
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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.

NatGen Access



Why fixed-benefit indemnity plans

Plan design & how it works

State availability & eligibility

Resources

Why fixed-benefit indemnity plans

- 64% of Americans avoid or delay treatment due to medical costs ¹ and would appreciate more money to help pay for them
- 44% of Americans don't go to a doctor when they are sick or injured because of cost ² with fear of not knowing the true cost of the visit
- 41% of Americans have problems with Medical Bills or Debt ³ due to the cost of health care services



1 Retrieved 2/20/2020 from <https://www.beckershospitalreview.com/finance/64-of-americans-avoid-treatment-due-to-cost-of-medical-care-5-survey-insights.html/>

2 Retrieved 2/20/2020 from <https://www.norc.org/NewsEventsPublications/PressReleases/Pages/survey-finds-large-number-of-people-skipping-necessary-medical-care-because-cost.aspx>

3 Retrieved 2/20/2020 from <https://www.commonwealthfund.org/publications/newsletter-article/survey-79-million-americans-have-problems-medical-bills-or-debt>

Why fixed-benefit indemnity plans



An affordable way for your clients to get the health care they need by:

- Helping to cover the anticipated cost of everyday health care services
- Paying set dollar amounts for certain covered health care services; customer pays anything in excess of the plan benefits

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Why National General Access

Offers predictable and affordable access to health care

- Clients can go to any doctor or hospital they want and receive their set benefit amount
 - They save more when they use First Health Network providers
- Benefits for preventive office visits, unplanned office visits, lab and x-rays, surgeon costs, and more
- Benefits are paid on top of other coverage
 - No coordination of benefits



Plan benefits may vary by plan design.

Plan Details: Office Visits and Lab work

			Value	Fundamentals	Enhanced	Guaranteed
Outpatient and Laboratory Services	Office Visit	Year 1	\$75/visit 2 per year	\$75/visit 4 per year	\$100/visit 4 per year	\$75/visit 2 per year
		Year 2	\$75/visit 3 per year	\$75/visit 5 per year	\$100/visit 5 per year	\$75/visit 2 per year
		Year 3+	\$75/visit 4 per year	\$75/visit 6 per year	\$100/visit 6 per year	\$75/visit 2 per year
	Preventive Office Visit <i>Available with Enhanced level only, with a 90 day waiting period.</i>		N/A	N/A	\$100/visit 2 per year	N/A
	Urgent Care Visit		\$100/visit 2 per year	\$100/visit 3 per year	\$200 visit 4 per year	N/A
	Outpatient Prescription Drugs ¹		N/A	\$15/Fill 50 Fills per year	\$25/Fill 50 Fills per year	N/A
	Radiology		\$200/test 2 per year	\$250/test 2 per year	\$300/test 2 per year	\$200/test 1 per year
	Laboratory		\$75/test 2 tests per day 3 per year	\$75/test 2 tests per day 4 per year	\$75/test 2 tests per day 5 per year	\$75/test 1 per year

¹ Outpatient Prescription Drugs benefits are reimbursed after clients pay for their prescriptions

Plan Details: Transitional Care and Emergency Services

		Value	Fundamentals	Enhanced	Guaranteed
Transitional Care	Skilled Nursing Facility	N/A	N/A	\$100/day 50 days	N/A
	Home Health Care	N/A	N/A	\$100/day 50 days	N/A
	Hospice Care	N/A	N/A	\$100/day 50 days	N/A
Emergency Services	Ground Ambulance	\$500/trip 1 per year	\$750/trip 1 per year	\$1,000/trip 1 per year	\$500/trip 1 per year
	Air Ambulance	\$1,000/trip 1 per year	\$1,500/trip 1 per year	\$2,000/trip 1 per year	\$1,000/trip 1 per year
	Emergency Room	\$100/visit 1 per year	\$250/visit 1 per year	\$250/visit 3 per year	N/A

Plan Details: Hospitalization

		Value	Fundamentals	Enhanced	Guaranteed	
Inpatient Hospitalization	Hospital Admission		\$500, 3 per year	\$750, 5 per year	\$1,000, 10 per year	\$500, 1 per year
	Confinement (Sickness) ¹	Year 1	\$1,000/day	\$2,000/day	\$3,000/day	\$1,000/day 90 days per year
		Year 2	\$1,250/day	\$2,500/day	\$3,750/day	\$1,250/day 90 days per year
		Year 3	\$1,500/day	\$3,000	\$4,500/day	\$1,500/day 90 days per year
	Confinement (Injury)	Year 1	\$2,000/day	\$4,000/day	\$6,000/day	\$2,000/day 90 days pear year
		Year 2	\$2,500/day	\$5,000/day	\$7,500/day	\$2,500/day 90 days pear year
		Year 3	\$3,000/day	\$6,000	\$9,000/day	\$3,000/day 90 days pear year

Plan Details: Hospitalization Cont...

		Value	Fundamentals	Enhanced	Guaranteed
Inpatient Hospitalization	ICU (Sickness)	\$2,000/day 60 days per year	\$3,000/day 60 days per year	\$4,000/day 60 days per year	\$2,000/day 60 days per year
	ICU (Injury)	\$4,000/day 60 days per year	\$5,000/day 60 days per year	\$6,000/day 60 days per year	\$4,000/day 60 days per year
	Health Care Practitioner Visit	\$50/visit 2 per year	\$75/visit 4 per year	\$75 visit 10 per year	\$50/visit 1 per year

Plan Details: Surgery

		Value	Fundamentals	Enhanced	Guaranteed
Surgery	Surgeon (Inpatient Tier 1)	\$5,000/surgery	\$6,000/surgery	\$7,000/surgery	\$5,000/surgery
	Surgeon (Inpatient Tier 2 & Outpatient)	\$1,000/surgery	\$2,000/surgery	\$3,000/surgery	\$1,000/surgery
	Assistant Surgeon (Tier 1)	N/A	\$3,000/surgery 3 per year	\$3,500/surgery 4 per year	N/A
	Assistant Surgeon (Inpatient Tier 2 & Outpatient)	N/A	\$1,000/surgery 3 per year	\$1,500/surgery 4 per year	N/A
	Anesthesia (Tier 1)	\$500/surgery 2 per year	\$1,000/surgery 3 per year	\$1,500/surgery 4 per year	N/A
	Anesthesia (Inpatient Tier 2 & Outpatient)	\$250/surgery 2 per year	\$500/surgery 3 per year	\$750/surgery 4 per year	N/A
	Outpatient Surgical Facility	N/A	\$500/surgery 3 per year	\$750/surgery 4 per year	N/A

Plan Details: Network

First Health Network

- Over 5,100 hospitals
- 110,000 ancillary facilities
- 695,000 professional providers
- 96% of the U.S. population has access to a First Health provider within 20 miles

Discounts range from
30% to 50% for
in-network care



*Network statistics as of December 2017 First Health Data Warehouse
**Savings shown represent average savings achieved from actual claims data set representative of 12 months of claims history. Discounts do not account for any savings based on benefit plan design or member responsibility. Actual discounts vary by provider and specific geographic locations.

How the plan works:

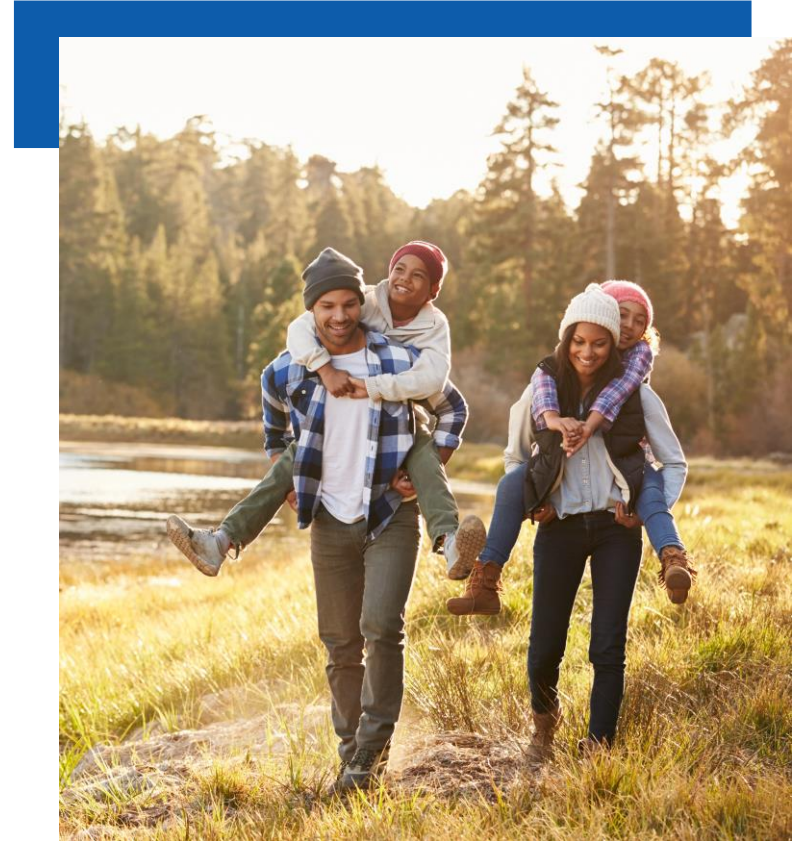
Like other insurance plans, customers should:

Use the network website to search for network providers:

www.firsthealthlbp.com

Set an appointment with the provider

- ✓ Present their ID Card when checking in
- ✓ After receiving treatment(s),
 - ✓ The EOB will show the network discount and the plan benefit paid
 - ✓ The insured is responsible for paying any remaining balance after the plan benefit is paid
- ✓ The plan benefit your client receives is the same regardless of where they receive care or how much the provider charges



How the plan works:

Filing a prescription claim

After clients pay for their prescription, they must:

1. Complete the prescription claim form found on our website at <https://natgenhealth.com/claims-help.php>.
2. Submit the form with a photocopy of the prescription receipt showing the drug, the prescription number, the quantity, and the cost of the prescription. (A generic cash register receipt is not acceptable.)

* Prescription reimbursement is available with the Fundamentals & Enhanced levels only.



How the plan works:

Stacy was walking her dog and fell down and dislocated her shoulder. She has a NatGen Access Fundamentals Plan

Shoulder injury with ER visit

ER visit	\$925 ¹
Shoulder x-ray	\$110 ¹
Total charges	\$1,035
Network discount ²	\$390
ER visit/ X-ray benefits	\$250/\$250
Total out-of-pocket:	\$145

**86% of the Treatment
was Discounted
or Paid for! ¹**

¹ Pricing based on an average of National General claims received.

² Based on the average discount applied from First Health Network

National General Access Sample Rates:

Sample rates for primary age 30 - 39

Family Composition	Value	Fundamentals	Enhanced	Guaranteed Issue
Individual	\$77.48	\$179.27	\$267.37	\$98.54
Couple	\$154.97	\$358.54	\$534.74	\$197.08
1 Parent Family	\$132.97	\$312.20	\$467.34	\$165.95
2 Parent Family	\$210.45	\$491.47	\$734.71	\$264.49

Sample rates for primary age 50 - 54

Family Composition	Value	Fundamentals	Enhanced	Guaranteed Issue
Individual	\$130.89	\$307.30	\$458.71	\$168.48
Couple	\$261.77	\$614.60	\$917.41	\$336.96
1 Parent Family	\$178.84	\$422.35	\$631.77	\$226.66
2 Parent Family	\$309.72	\$729.65	\$1,090.47	\$395.14

Rates shown are representative of rates in most states, however, rates may vary by state and age.
Always refer to the quoting tool for specific rates for your clients.

Add our supplemental plans for even more coverage

Add more
financial
protection

We have many coverage options to choose from

- Plan Enhancer: AME with optional CHS and SIP riders*
- TrioMed: AME, Critical Illness, and AD&D
- Cancer and Heart/Stroke
- Term Life – Critical Illness
- AcciMed: AME and AD&D

Dental PPO or Dental Indemnity plans also make a great add-on

**Riders not available in all states*

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
- Access to a pharmacy savings card that offers:
 - Pre-negotiated savings on prescriptions, vitamins, and more
- Hospital Negotiation services and Discounts on Direct Lab services
- Other discounts and services: 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 – Available for quoting March 13, 2020

AL

AR

AZ

DC

FL

GA

IA

IL

LA

MI

NC

NE

OK

SC

VA

WI

WV

WY

State Availability – Additional States coming April 2020

KY

ME

MS

SD

TX

Eligible Ages

Primary applicant

- Age 18 – 64 at time of application
 - Children up to age 26
 - No child only
 - Requires a Health Questionnaire
- Renewable to month client turns 65



Who it's good for

A fixed-benefit indemnity plan is good for clients who:

- Can't afford major medical plans
- Want help covering costs other plans don't cover
- Need help paying for health care expenses

These plans are not suitable for clients who:

- Utilize a lot of medical services or need ACA coverage
- Want comprehensive medical coverage
- Have a serious illness or chronic condition
- Eligible for an ACA plan subsidy



National General Access is a limited medical plan that pays set-dollar amounts when a member receives particular services, no matter what the provider charges. Members are responsible for any remaining costs not covered by the plan benefits. Limited medical plans are not major medical insurance and do not meet the standards set for minimum essential coverage by the ACA.

Example of exclusions

- Pre-existing conditions
- Dental procedures
- Elective or cosmetic surgery
- Weight Loss
- Chronic Pain
- Pregnancy/Maternity
- Workers' compensation
- Hazardous activities
- Mental disability and chemical abuse

*Not a comprehensive list of exclusions. Please refer to the policy of the marketing product brochure for a complete list.

Enrollment



- Any date between 1st and 31st
- Can be as soon as the next day



Initial Payment

Drawn at Time of
Application



Reoccurring Payment

5 days before the
Monthly anniversary
of start date



Form of Payment

EFT

Visa, MasterCard
or Discover

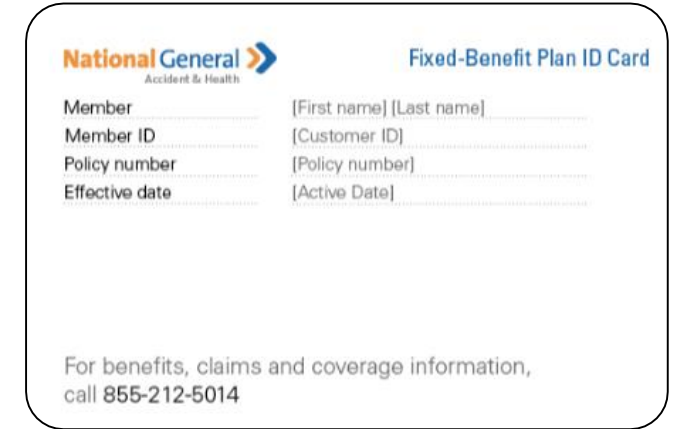
Member Portal: www.MyNatGen.com



Where members can:

- View Policy Documents
 - Print Temporary ID Cards
- Check current and past payments as well as current payment method.
- Find quick links to finding network providers

Permanent ID cards will arrive in mail



Resources



Type in:

***National General
Accident and Health***

On Demand Training for our:

- Products
- Quoting systems
- Policy Administration



Resources

www.NatGenHealth.com

The screenshot shows the National General Accident & Health website. The navigation bar includes links for Home, Existing Members, Brokers, Resources, and Contact Us. A 'Get A Quote' button is located in the top right corner. The main content area features two large promotional banners: 'COVERAGE FOR YOU & YOUR FAMILY' with a 'Find Your Plan' button, and 'COVERAGE FOR YOUR BUSINESS' with a 'Find Group Plans' button. Red boxes and arrows highlight specific resources: 'Brokers' and 'Resources' in the navigation bar, and 'Brochures' and 'Claim Forms' in the main content area.

National General Accident & Health

Home Existing Members **Brokers** **Resources** Contact Us **Get A Quote**

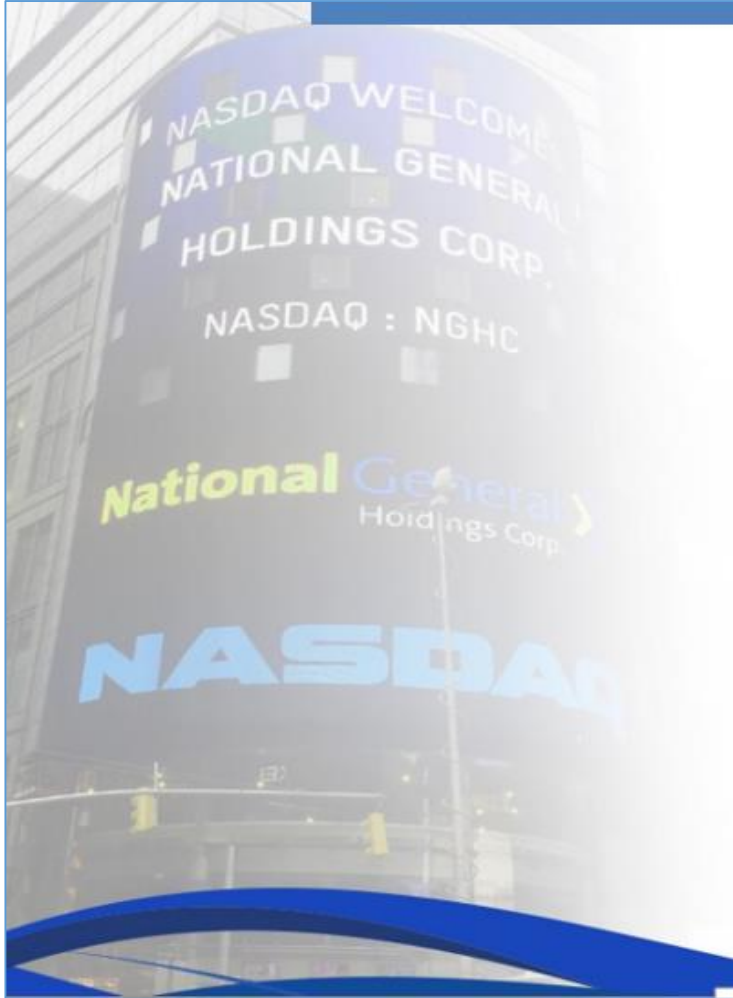
COVERAGE FOR YOU & YOUR FAMILY
Find Your Plan

COVERAGE FOR YOUR BUSINESS
Find Group Plans

Brochures
State Availability Grid

Claim Forms

Why National General?



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

NatGen Access



Set dollar amounts to help with health care costs



4 benefit options to choose from including Guarantee Issue



Easy to use and easy to understand



No lifetime limits

- \$100,000 lifetime limit on Guaranteed Issue



Pick any doctor or hospital

- Could save more by staying within First Health Network



No waiting periods on sickness and injury benefit

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.

National General Access is a limited medical plan that pays set-dollar amounts when a member receives particular services, no matter what the provider charges. Members are responsible for any remaining costs not covered by the plan benefits. Limited medical plans are not major medical insurance and do not meet the standards set for minimum essential coverage by the ACA.

Questions?



Email: Training@NGISAdmin.com

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