

OptiMed

Value Care Plus Plan

AVAILABLE OPTIMED BENEFIT OPTIONS - (All medical benefit maximums shown are <u>per person per</u> benefit period, Benefit period is calendar year unless otherwise stated)	Benefit Amounts
Outpatient Physicians Office Visit Benefit – both general and specialist - 8 day benefit period maximum	\$60 per day
Emergency Room Benefit for Sickness - 3 day benefit period maximum	\$50 per day
Wellness Benefit - day maximum based on age under age 1 - 4 day <i>benefit period maximum</i> 1 and older - 3 day benefit period maximum	\$50 per day
Hearing Exam Benefit- Benefit is payable one time per 24 consecutive month period per insured and dependent spouse and one time per 12 consecutive month period per dependent child	\$70 exam
Outpatient Diagnostic Laboratory Tests - 3 day benefit period maximum	\$30 per day
Outpatient Diagnostic Tests - 3 day benefit period maximum	\$50 per day
Outpatient Advanced Diagnostic Testing Level 1 - Ultrasound, Mammogram, Stress test, Electroencephalogram (EEG) test, Electrocardiogram (EKG) test, Echocardiogram Level 2 - CT (CAT) Scan, Magnetic Resonance Imaging (MRI) Scan, Magnetic Resonance Angiogram (MRA) Scan, Positron Emission Tomography (PET) Scan - 3 days per person per Benefit Period (Level 1 & Level 2 combined maximum)	\$100 per day \$300 per day
Ambulance Trip Ground/Water Air 3 day per benefit period maximum	\$150 per day 3x the ground/water bene
Emergency Room Benefit for Injury - For treatment in an emergency room if performed within 72 hours of the accident/3 day benefit period maximum	\$500 per day
inpatient Surgery - 2 day benefit period maximum	N/A
Outpatient Jurgery - 2 day benefit period maximum	N/A
Anesthesiology - Inpatient and Outpatient	N/A
Hospital Indemnity Benefit (for sickness or accidents) - Requires 24 hour stay	\$500 per day
Intensive Care - 30 day benefit period maximum (paid in addition to Hospital Indemnity Benefit)	\$500 per day
Skilled Nursing - For stays in a Skilled Nursing Facility within 14 days following a 3+ day hospital stay, must be under age 65 60 day maximum per benefit period/120 day maximum lifetime	\$250 per day
Employee Term Life Insurance/AD&D	\$5,000/\$5,000
Dependent Life - Term Life Insurance Only Spouse Children 6 months to 19 (25 if full time student) Infants 14 days to 6 months	\$2,500 \$1,250 \$125
Outpatient Indemnity Prescription Drug Insurance - Average Tier Insured Cost Generic \$10 Annual Maximums: \$3,000 Per Insured - subject to drug formulary Cost may vary by Formulary Tier and Pharmacy. Manual Maximum of discounted price for drug not covered under the formulary.	Generic Only

This is not a contract of insurance. Above Indemnity and Outpatient Prescription Drug plan benefits provided through Fidelity Security Life Insurance Company. This is a brief summary of a group limited medical indemnity insurance plan designed to assist you in the process of comparing several health insurance options. This plan is not major medical insurance and is NOT designed to replace, provide, or modify major medical insurance. Some provisions, benefits, and exclusions or limitations listed herein may vary by state.

Additional Included OptiMed Programs - These are not insurance benefits

-National Medical PPO

-Patient Advocacy Service

-Telephonic Doctor Visits

-Employee Assistance Program (EAP)

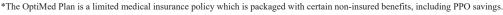
Member pays 100% of discounted price for drugs not covered under the formulary

-Enhanced Customer Care

-Cobra Administration

-Section 125 Premium Only Plans (POP)

-Wellness Nurseline





<u>Disclosures:</u> Please note: The Hearing Exam Benefit, Term Life/AD&D and Indemnity Outpatient Prescription Drug Benefits are optional and may be declined should a group request those coverages be removed. Administered by United Group Programs, Inc. Term life, AD&D and limited medical benefits underwritten by Fidelity Security Life Insurance Company, Kansas City, MO 64111 Policy Form Nos. M-6012/M-6014/M-9114/M-9118/ M-9091/M-9096. Policy Nos. LM-150/LM-151/IP-106/IP-107/HC-104-HC-105.

Certain states require a minimum of 51+ eligible employees. Before any presentation of a proposal, please check with your OptiMed sales representative to be certain that the program being proposed is appropriate for the state intended. This is not an offer of sale. No offering of this material should be given without the expressed approval of OptiMed, and any offering will be based upon state availability, underwriting guidelines, agent guide, and minimum group size and participation requirements being met. The OptiMed program is not available in all states, including Washington. Please check with your OptiMed Group Sales Representative to confirm that OptiMed is available in the state or states in which you may have an interest in offering OptiMed.