



Coverage for
unexpected
Sickness
& Injury

Why Short Term Medical Insurance?

The Simple Term Health Insurance Plan provides medical insurance coverage for up to 364 days. Short Term Health helps to protect you from the medical bills that can result from unexpected Injuries and Sickness.

What is MDLive?***

Healthcare should be simple, fast and uncomplicated. MDLIVE is a telehealth service that makes it easy to visit a doctor in minutes through their mobile app, online and by phone. Get access to quality healthcare without ever leaving your home, your job or wherever you are. Unlimited calls with no copays for our members.

Get the coverage you need with Short Term Medical Insurance

You can rely on the Simple Term Health Insurance Plan to help provide the insurance coverage you need.



- Plans available up to 364 days depending on the state
- For those who qualify, coverage as soon as the day after you apply
- Flexibility to choose your own Physician and hospital
- One common family Deductible and individual Deductible per Policy Period

This is Short Term Medical Insurance 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.

Why Choose Simple Term?

FEEL SECURE:

We have years of experience and an excellent rating.

FEEL CONFIDENT:

You have access to convenient resources that make Short Term Medical Insurance easier to understand.

FEEL RESPECTED:

No matter your question, concern or request, you can contact us knowing we'll treat you with respect.

Choose your Simple Term Insurance Plan

Eligible Expenses are subject to your selected Deductible and Coinsurance.

COPAY

(A specified amount of out-of-pocket expenses payable by the Covered Person for services at the time the service is rendered. This applies separately to each Covered Person for each visit up to the maximum)

- \$35 or \$50 options available
- Unlimited Physician Office visit copays

DEDUCTIBLE

(The amount you must pay before Simple Term pays benefits)

- Deductible is per Covered Person per Coverage Period
- Once three family members have met their Deductible in a Coverage Period no further Deductible will apply for the Policy Period.

COINSURANCE

(The percentage of Usual, Reasonable and Customary Expenses for which the Company and the Insured is responsible for a specified covered service after the Deductible is met)

- During the Policy Period the Company will pay 50% or 80% of the next \$5,000 or \$10,000 of the Eligible Expenses after the deductible, 100% Eligible Expenses to the Policy Period Maximum

POLICY PERIOD MAXIMUM

(Maximum amount your plan will pay toward medical bills per Covered person)

- \$1 million

PHYSICIAN OFFICE VISITS

- Coverage for unexpected Sickness and Injury
- You may choose your own Physicians
- Subject to terms and limitations as outlined in the coverage forms

HOSPITAL BENEFITS

- Inpatient and outpatient services are eligible
- Discounts for using facilities in the network
- Subject to terms and limitations as outlined in the coverage forms

EMERGENCY ROOM CARE

- Subject to terms and limitations as outlined in the coverage forms

AMBULANCE

- Service to nearest hospital able to treat condition
- Subject to terms and limitations as outlined in the coverage forms

OUTPATIENT SERVICES

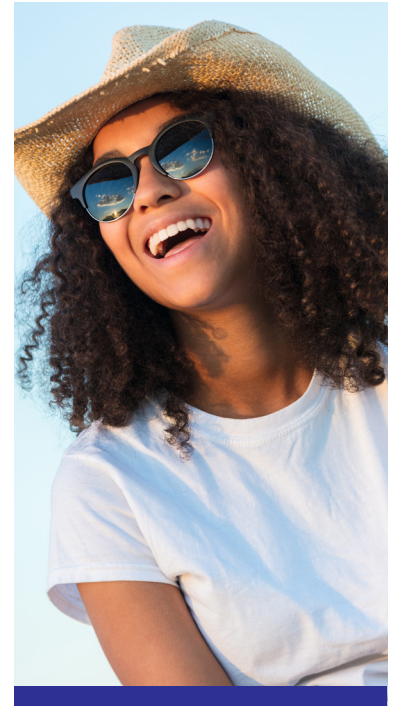
- Subject to terms and limitations as outlined in the coverage forms

X-RAY AND LABORATORY

- Subject to terms and limitations as outlined in the coverage forms
- Discounts for using Lab Card Select for lab testing savings



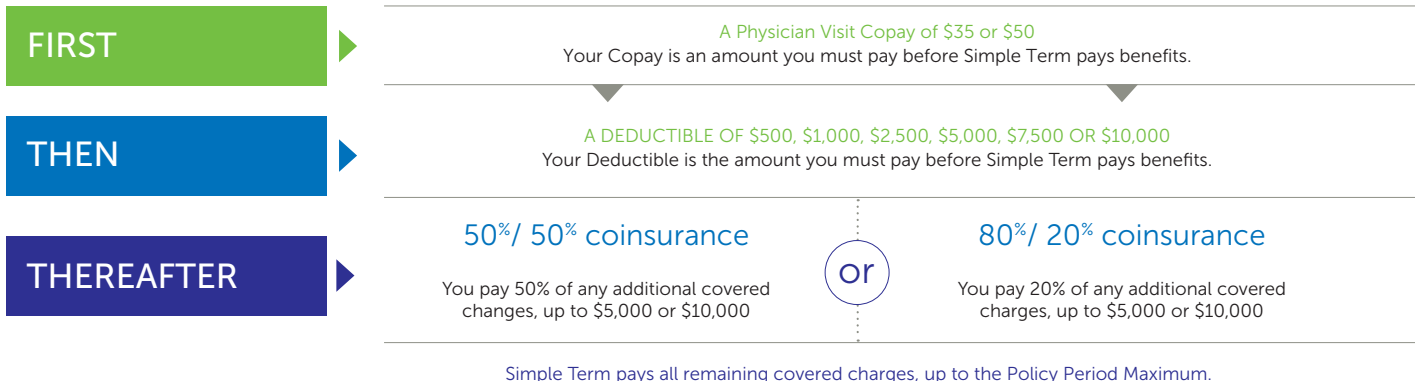
Don't be without Simple Term Insurance!



This coverage contains a Pre-Existing Condition Limitation. Pre-Existing Condition means a disease or physical condition for which medical advice or treatment was recommended or received by the Covered Person during the 12 months prior or after the Covered Person's Effective Date of coverage, may vary by state.

Policy terms, conditions, exclusions and limitations may vary by state. This product may not be available in all states.

How the Simple Term Health Insurance Plan Pays Short Term Medical Benefits



3 Quick & Simple Steps to the Short Term Medical Insurance



If you are eligible coverage can begin as soon as 12:01 a.m. the next day once the application is accepted, processed and payment is posted.



Know what's not covered

Knowing exactly what your Short Term Medical Insurance does and does not cover is important. To give you the best possible experience, we offer this summary of what is not covered. Complete details regarding Exclusions and Limitations are included in your policy.

- Treatment of a Pre-Existing condition, including those not inquired about on the enrollment form
- Preventive treatments, examinations or immunizations
- Illness or injury that is self inflicted or caused while engaged in a felony, under the influence, in military service, in a hazardous occupation or activity, or while engaged in intercollegiate sports
- Vision or dental treatments, foot care or orthotic
- Expenses incurred outside the United States, its possession and Canada
- Genetics or fertility treatment or testing
- Custodial care or private duty nursing
- Cosmetic, experimental, investigational or medically necessary treatment
- Hearing examination or hearing aids

Note: Plan limits may vary by state. Please review short term medical insurance policy for a full list of state specific exclusions.

After Simple Term Plan Expires...

This short term medical insurance is nonrenewable, and policy termination is not considered a qualifying life event for purposes of enrolling in a Major Medical Insurance Plan. Therefore, depending on your policy's termination date, when your Simple Term Plan expires, you may have a gap in insurance coverage until you can begin coverage with a Major Medical Insurance Plan.



Avoid the wait.

Your life is 24/7. Now your doctor is too.



Activate MDLIVE today.



Consult with a board-certified doctor by phone, secure video, or MDLIVE App—anytime, from anywhere



Average wait time is less than 10 minutes

Non-emergency conditions we treat:

- Acne
- Allergies
- Cold / Flu
- Constipation
- Cough
- Diarrhea
- Ear problems
- Fever
- Headache
- Insect bites
- Nausea / Vomiting
- Pink eye
- Rash
- Respiratory problems
- Sore throats
- Urinary problems / UTI
- Vaginitis
- And more

e-prescriptions can be sent to your local pharmacy (if needed).

\$0 Copay and unlimited calls



Download the MDLIVE App



MDLIVE does not replace the primary care physician. MDLIVE is not an insurance product nor a prescription fulfillment warehouse. MDLIVE operates subject to state regulation and may not be available in certain states. MDLIVE does not guarantee that a prescription will be written. MDLIVE does not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. MDLIVE physicians reserve the right to deny care for potential misuse of services. MDLIVE interactive audio consultations with store and forward technology are available 24/7/365, while video consultations are available during the hours of 7 am to 9 pm 7 days a week or by scheduled availability. MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc. and may not be used without written permission. For complete terms of use visit www.mdlive.com/pages/terms.html 120115 © 2016 MDLIVE, Inc. All rights reserved. V.42716

MDLIVE is not insurance and is not part of the Simple Term Health insurance plan. MDLIVE monthly membership cost for InsuranceTPA.com clients is \$15.95 per month. This monthly fee provides access to MDLIVE service at \$0 copay and unlimited calls. This fee is separate from the cost of insurance.

Payment Options

Single Payment - If you know the exact length of time you will need this coverage for and prefer to make one single payment for the entire Policy Period, this payment option is ideal. Simply enter the exact total number of days you need coverage (30 day minimum/up to 364 maximum in certain states).

Monthly Payment - If you are unsure how long you will need this coverage or prefer the convenience of making monthly installments, this option is ideal. Each monthly payment is for 1 month of coverage, up to a 364 day maximum Policy Period in certain states.

Payment methods include: automatic bank draft or credit card.

Note: 5 days advance written and signed notice from the Insured Person is required to ensure future credit card debits are discontinued.

This brochure provides summary information. Please refer to the insurance policy or ask your agent for a complete listing of benefits, exclusions and terms of coverage.

Simple Term Insurance Plan is the brand name for products underwritten by:

United States Fire Insurance Company
5 Christopher Way, 2nd Floor
Eatontown, NJ 07724

Simple Term is administrated by:



(1) THIS IS A SHORT TERM MEDICAL INSURANCE POLICY 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.

NOTE: THIS POLICY IS NOT RENEWABLE. NO CONTINUOUS COVERAGE. This policy of insurance provides coverage for short term duration only. It is not renewable. Although this short term plan may be written for new and completed separate Coverage Periods (as long as you meet the eligibility criteria described in the application), coverage does not continue from one policy to another. This means that a new application must be submitted, a new effective date is given, a new preexisting condition exclusion period begins and a new deductible and out-of-pocket expense must be met. Any medical condition which may have occurred and/or existed under a prior policy will be treated as a preexisting condition under the new policy.

(2) Read this guide carefully. This is a brief description of Short Term Medical Insurance and is not an insurance contract, nor part of the insurance policy and is subject to the terms, conditions, limitations, and exclusions of the policy. Coverage may vary or may not be available in all states. You'll find complete coverage details in the policy. Plans are underwritten by United States Fire Insurance Company. Short Term Medical Policy does not meet Minimum Essential Coverage as mandated by the Affordable Care Act. Short Term, limited duration plans are not subject to certain provisions of federal health care reform, including the provisions related to Essential Health Benefits, lifetime limits, preventive care, guaranteed renewability, and preexisting conditions. The preexisting condition exclusion for Short Term Medical Plans will apply for all insureds, including those under the age of 19. Know your plan. Short Term Medical plans offer medical coverage, are medically underwritten (so you can be declined) and do not provide Minimum Essential Coverage. What does this mean for the applicant? They may have to pay a tax penalty, depending on their income level and the cost of plans available. Examples of the claims Short Term Medical Plans do not cover are for most preventive care, mental health and treatment related to medical conditions they had prior to the plan's effective date. Because these plans are not guaranteed renewable, the applicant may not be eligible for another short term plan after the plan's termination date; and the preexisting condition exclusion will apply to any conditions that arose during any prior short term plans.



*Underwritten by the United States Fire Insurance Company, 5 Christopher Way, 2nd Floor, Eatontown, NJ 07724. Rated "A" (Excellent) by AM Best (2015 Edition). Benefits not available in all states at this time. Coverage is not provided for insureds age 65 or over, coverage will terminate at the end of the month insured turns age 65. Changes to coverage underwritten by United States Fire Insurance Company can only be made if the change is the result of a qualifying life event. A qualifying life event means marriage, divorce, the death of your spouse, or the birth or adoption of a child. If coverage is canceled, persons may not re-enroll in coverage with United States Fire Insurance Company until six-months after their termination date.

This coverage contains a Pre-Existing Condition Limitation. Pre-Existing Condition means a disease or physical condition for which medical advice or treatment was recommended or received by the Covered Person during the 12 months prior or after the Covered Person's Effective Date of coverage, may vary by state.

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