

INDEMNITY 360



USA+ is committed to the promotion of
Equal Access to Health Care
for all Americans.

Real Benefits, Real Value, *PLUS* We Really Care!

United Service Association For Health Care

800.872.1187 • 2221 E. Lamar Blvd, Suite 900 Arlington, TX 76006 • www.usahc.com

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About USA+

United Service Association For Health Care (USA+) is a non-profit membership association chartered in Washington, D.C., in 1983. USA+ was founded to benefit the lives of individuals and families by promoting equal access to health care. In November of 1987, USA+ became one of the first membership associations in the United States to provide quality benefits programs for individuals and families that were previously available only to employees of large corporations.

USA+ is NOT an insurance company. USA+ identifies the needs of its members and finds the nation's top providers of products and services to satisfy those needs. Through the size of its national membership, USA+ leverages its contracts with providers to negotiate benefits for its members. USA+ Benefit Plans may consist of insured and non-insured benefits. Members will have access to insured benefits through the group policies that have been issued to USA+ by A.M. Best rated insurance companies.

USA+ is committed to the promotion of equal access to health care for all citizens of the United States, but more specifically, for members of our association. USA+ stays abreast of legislation proposed by state regulators that may have a favorable or adverse impact on our membership population. When necessary, we contact regulators in order to have an opportunity to convey the views of USA+ members. USA+ also encourages its members to get involved by contacting their local and state leaders to be sure that their voices are heard. USA+ believes that together, we can make a difference.

USA+ and its members impact the lives of people in need all across the nation, giving to charities that make a difference, and improving the quality of life for many people who are facing difficult challenges. Through the United Service Association For Health Care Foundation (USA+ Foundation), members of USA+ are able to contribute effortlessly. A portion of the membership dues collected each month is donated to the USA+ Foundation. Through the combined contributions of our members, that small amount has exceeded \$8 million awarded to more than 200 worthwhile charities, community programs and national research programs. The United Service Association For Health Care Foundation can receive donations from businesses, other foundations, and individuals. If you want to make an additional tax-free donation, please send it to the address listed below. If you do not want to participate in this program, please send a letter to the address below.

USA+ is an accredited member of the Better Business Bureau with an A+ rating, a member of the Arlington, Texas Chamber of Commerce, and the U.S. Chamber of Commerce.

Membership in USA+ is NOT insurance nor is it meant to represent an insurance contract. This is an Association Membership offered and administered by United Service Association For Health Care. Not available in all states. Please contact USA+ for state availability.

The Privileges of Membership include the following:

USA+ Benefits Protector

Many individuals lose their job due to a company relocation, company downsizing or as the result of natural disasters. For most individuals, loss of employment also means a monetary loss.

The Benefits Protector program helps cushion the impact of economic downturns that occur. Should you lose your job through no fault of your own, we will be there for you. Your membership dues will be waived and your membership benefits will continue for three (3) months. *

*Certain Terms and Conditions Apply.

USA+ Scholarship Program

USA+ is committed to the promotion of equal access to health care for all Americans. In order to ensure equal access to health care, it is important that there are sufficient medical providers available to serve the public. For that reason, USA+ developed a scholarship program. This program will provide scholarships to outstanding high school seniors that show promise of continued academic performance. This program is only available to dependent children and grandchildren of USA+ members and will allow deserving students to attain their educational goals.

Limited Medical Indemnity Insurance Benefits

Underwritten by AXIS Insurance Company

INPATIENT*	Indemnity 2000	Indemnity 3000	Indemnity 5000
Lump Sum Hospital Admittance Benefit	\$2000	\$3000	\$5000
We will pay for the first day of Hospital Confinement of a Covered Person the lump sum benefit listed. (Day 1 of Confinement, Maximum of one day per year)			
Daily Hospital Confinement Benefit	\$300	\$500	\$1000
We will pay for each day of a Covered Person's Hospital Confinement. (Day 2 forward, maximum of 30 days per year)	30 days per year	30 days per year	30 days per year
Inpatient Surgery Benefit	\$500	\$500	\$500
We will pay the amount listed and specified on the Schedule of Benefits for each day surgery is performed as inpatient. (Maximum of one day per year)	per day	per day	per day
Anesthesia Benefit	\$125	\$125	\$125
We will pay for the amount listed and specified on the Schedule of Benefits for each day inpatient surgery is performed. (Maximum of one day per year)	per day	per day	per day
OUTPATIENT*	Indemnity 2000	Indemnity 3000	Indemnity 5000
Anesthesia Benefit	\$62.50	\$62.50	\$62.50
We will pay for the amount listed and specified on the Schedule of Benefits for each day outpatient surgery is performed. (Maximum of one day per year)	per day	per day	per day
Outpatient Surgery Benefit	\$250	\$250	\$250
We will pay the amount listed for each day surgery is performed in an Ambulatory Surgical Center. (Maximum of one per day, per year)	per day	per day	per day

(Outpatient Continued)

INDEMNITY 360

Limited Medical Indemnity Insurance Benefits

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OUTPATIENT*

Indemnity
2000

Indemnity
3000

Indemnity
5000

Outpatient Physician Benefit

We will pay the amount listed for the following:

- Physician Office Visit Member Pre-pay[†]
- Benefit amount per day

\$10

\$10

\$10

\$50 per day
Maximum of 3
Visits Per Year

\$55 per day
Maximum of 5
Visits Per Year

\$85 per day
Maximum of 5
Visits Per Year

- Annual Physical (Wellness) benefit amount per day (Maximum of one per year)

N/A

N/A

\$125

Emergency Room Visit

If a Covered Person incurs a Sickness that requires care in an Emergency Room we will pay the amount listed for each Emergency Room visit required. (Maximum of one per year)

\$100 per day

\$100 per day

\$100 per day

Diagnostic, X-ray, Lab Benefit

Class I: Laboratory - Blood Work, CMP, Lipid Panel, ECG, Pap, PSA, urinalysis, and all other laboratory tests
- Maximum days per year

\$30 per day
2 days

\$30 per day
2 days

\$35 per day
6 days

Class II: Radiology, Ultrasound, Mammogram, Sonogram, Angiogram
- Maximum days per year

\$35 per day
2 days

\$35 per day
2 days

\$60 per day
4 days

Class III: Laboratory - Imaging, CT, PET
- Maximum days per year

\$50 per day
1 day

\$50 per day
1 day

\$125 per day
2 days

Class IV: Laboratory - Other Diagnostic test - Endoscopy, Bronchoscopy, Colonoscopy without Biopsy, MRI
- Maximum days per year

\$100 per day
1 day

\$100 per day
1 day

\$300 per day
1 day

*The Fixed Hospital Indemnity Benefit Plans are underwritten by AXIS Insurance Company.

[†]The office visit prepay is a service through First Health PPO Network. Benefit amounts listed are for Member. Pre-existing condition limitations and all limitations and exclusions are listed on page 11 of this brochure.

NOTICE

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Other Included Benefits



You and your doctor have access to the medical guidance of over 50,000 of the leading medical specialists in over 400 subspecialties of medicine. This benefit provides you with the following services:

- InterConsultation™ - a high level second opinion, to confirm diagnosis and treatment.
- FindBestDoc™ - assistance in locating doctors in your area that have been identified as “best” by their peers to treat specific medical conditions.
- FindBestCare® - arranging access to hospitals and treatment.

Best Doctors®, Information When It Matters Most, the Best Doctors® logo, FindBestDoc™, InterConsultation™ and FindBestCare® are trademarks or registered trademarks of Best Doctors, Inc. in the U.S. and other countries, and are used under license.



Save on major surgery costs with BridgeHealth

Bridgehealth, the premier provider of medical travel services, connects you with domestic and international hospitals and doctors to provide you with excellent quality and pricing that is substantially lower than anything you can find on your own. We provide you with a connection to our pre-screened network of providers, we schedule the surgery/procedure for you, and provide personal assistance throughout the entire experience, from the initial contact with the surgeon, to trip planning, updates with family and friends, and follow up care.

CLC ID Protect Plus

CLC ID Protect Plus offers a comprehensive identity protection program with several layers of defense. ID Monitoring is the first layer; however, monitoring will never capture all fraudulent transactions. CLC ID protect backs up monitoring with additional layers of ID Protection and ID Recovery. We add up to \$25,000 of insurance coverage to protect against financial losses, a US based team of professional Fraud Resolution Specialists™ to clear your records, tax fraud specialists to help clear issues with the IRS, financial specialists to help resolve financial hardships that can result from identity theft, and finally, we provide discounted legal services should the issue require the intervention of an attorney.

ID Monitoring*

CLC ID Protect Plus includes continuous 24/7 Social Security Number and Personal Information Monitoring with text and email alerts that notify you of possible misuse of your SSN and personal information and suspicious activity. ID Monitoring is a vital component in defending your most valuable asset, your identity.

**CLC ID Protect Plus does not monitor all transactions at all businesses. No service can stop all identity theft events.*

ID Protection

CLC ID Protect Plus uses email and text alerts to notify you of suspicious activity involving your SSN and personal information. If your identity is stolen you will receive up to \$1,000 in identity theft insurance† coverage available for fraud-related losses and expenses, such as lost wages or legal expenses.

† Identity Theft Insurance underwritten by insurance company subsidiaries or affiliates of American International Group, Inc. (AIG). The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

ID Theft Recovery

CLC ID Protect Plus gives you unlimited access to a US based team of Fraud Resolution Specialists™ who work relentlessly on your behalf to restore your stolen identity and repair your damaged credit reputation should you ever fall victim to identity theft.

FRAUD RESOLUTION TEAM

You have unlimited access to our team of Fraud Resolution Specialists™. Each FRS™ is an experienced fraud representative and has been trained under the Fair Credit Reporting Act (FCRA). Each FRS is educated on and familiar with prohibited “collection” company activities under the Fair Debt Credit Protection Act (FDCPA). Additional certifications include Certified Identity Theft Risk Management Specialist® and Certified Credit Report Reviewer.

EMERGENCY RESPONSE KIT

Receive a step-by-step guide when you fall victim to theft or a breach. This kit is available at any time through our website.

Emergency Helicopter Rescue

In the event that an eligible member suffers from a “certified injury” that requires emergency medical transportation by helicopter in accordance with EMS protocols, the program will reimburse the participant up to a maximum of \$7,000.00 per occurrence. Reimbursement includes expenses incurred from the cost of “Medically Necessary” or “Life Threatening” helicopter transportation from the scene of an accident to the nearest medical facility capable of treating the injuries or from one medical facility to another medical facility. Claims for “Medically Necessary” transports from one medical facility to another medical facility are subject to review by Lifeguard’s Medical Officer.

Provisions include:

- One benefit will be paid per occurrence.
- Benefit in excess of all other valid collectable insurance.
- Coverage is worldwide.
- Transportation by helicopter only.

This benefit is provided to USA+ members by Lifeguard Emergency Travel, Inc. Certain terms and conditions apply and benefits are subject to the Exclusions and Limitations. See your membership Handbook for the details.

Not available to Iowa residents.

LIMITATIONS AND EXCLUSIONS

The following conditions represent coverage exclusions:

1. *Suicide or attempted suicide;*
2. *Intentionally self-inflicted injuries;*
3. *War, invasion, acts of foreign enemies, hostilities between nations (whether declared or not), civil war;*
4. *Participation in any military maneuver or training exercise;*
5. *Mental or emotional disorders, unless hospitalized;*
6. *Being under the influence of drugs or intoxicants, unless prescribed by a Physician;*
7. *Commission or the attempt to commit a criminal act;*
8. *Participation as a professional in athletics;*
9. *Pregnancy and childbirth (except for complications of pregnancy);*
10. *Bodily injury or sickness which can be treated locally*

AirMed

The following services are available if the Participant suffers an injury or a sudden and unexpected illness, when you are 100 or more miles away from home.

- **Air Medical Repatriation.** If a Member is admitted to (or being discharged from) a hospital anywhere in the world that is more than 150 miles from the Member's residence in the United States or Canada and it is determined by the Member's physician and AirMed's medical director that the Member's medical condition is stable enough to allow air transport but that medical escort is required, AirMed will provide flight, ground transportation, & patient care, a full bedside to bedside experience for any covered member.
- **24/7 Worldwide Medical Services Hotline.** This program connects Members 24 hours a day, seven days a week, to the worldwide resources of AirMed. Members have access to AirMed's Customer Care Center (CCC) who will provide information about how and where to obtain medical care while traveling, including medical monitoring and coordination with local health care professionals.
- **Transport of Mortal Remains.** In the unfortunate event of a Member's death while traveling more than 150 miles from the Member's residence in the United States, AirMed will make all necessary arrangements, at no additional cost, to return the mortal remains to a funeral facility in the city of the Member's primary residence as requested by the family.
- **Global Security & Risk Assistance.** Members have 24/7 access to the AirMed Communications Center and the resources of our worldwide security firms for up-to-the-minute global threat assessments, foreign travel advisories, pre-trip threat evaluations, and political and security evacuation arrangements to a safe haven location.
- **Emergency Call Referrals.**

Please refer to your Membership Handbook for Exclusions and Limitations.

Script Claim Retail Services

Script has established a network of community pharmacies to provide a combination of convenience and cost effectiveness for the delivery of acute medication. This plan is designed to save you money on your prescription drug costs. Your Prescription Plan is recognized at most pharmacies in the United States.

Script Claim - Retail Services

Our formulary has four tiers: Tier 1, 2 and 3 include preferred brands and generic drugs. Your cost per drug tier is as follows.

- **Tier 1** - The first tier is preferred brand and generic drugs that are priced at \$10 or less for the scheduled quantity and dose.
- **Tier 2** - The second tier is preferred brand and generic drugs that are priced between \$10 - \$20 for the scheduled quantity and dose.
- **Tier 3** - The third tier is preferred brand and generic drugs that are priced between \$20 - \$40 for the scheduled quantity and dose. \$40.00 for less.
- **Tier 4** - The fourth tier is non-preferred brand and generic drugs that are priced greater than \$40 for which we have negotiated a special pricing – The USA+ contracted rate.

Script Mail Service Pharmacy

Script provides a high quality, dependable and convenient mail order prescription program.

Order long term shipments through Script and save time and money. Due to the time required for mail order shipments, this program is not suitable for one-time prescriptions needed for emergencies or temporary conditions. Certain terms and conditions apply and are subject to the Exclusions and Limitations.

Limited Medical Indemnity Insurance Benefits

Limitations and Exclusions

Underwritten by AXIS Insurance Company

Pre-Existing Condition Limitation

For Outpatient Services, Hospital Confinement and/or Surgery Benefits on all plans:

- 6 Month Treatment Period
- 12 Month Limitation Period
- State variations apply**

Pre-Existing Condition Limitation

The Insurance Company will not pay Outpatient Services, Hospital Confinement and/or Surgery Benefits for any Pre-existing Condition. A "Pre-existing Condition" means a disease or physical condition for which the Covered Person received medical treatment, during the treatment period shown above before his or her most recent effective date of insurance. The Pre-existing Condition Limitation will apply to any added benefits or increase in benefits. It will not apply after the Limitation Period shown above.

Under the Group Hospital Indemnity Policy we will not pay benefits for any loss, injury or sickness that is caused by, or results from:

- Intentionally self-inflicted injury, suicide or any attempt while sane or insane;
- Commission or attempt to commit a felony or an assault;
- Commission of or active participation in a riot or insurrection;
- Declared or undeclared war or act of war;
- Release, whether or not accidental, or by any person unlawfully or intentionally, of nuclear energy or radiation, including sickness or disease resulting from such release;
- An injury or sickness that occurs while on active duty service in the military, naval or air force of any country or international organization. Upon our receipt of proof of service, the Company will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days;
- Travel or activity outside the United States, Canada or Mexico, except for a Medical Emergency;
- Flight in, boarding or alighting from an Aircraft except as:
 - o a fare-paying passenger on a regularly scheduled commercial or charter airline;
 - o a passenger in a non-scheduled, private Aircraft used for pleasure purposes with no commercial intent during the flight;
- Travel in any Aircraft owned, leased or controlled by the Policyholder, or any of its subsidiaries or affiliates. An Aircraft will be deemed to be "controlled" by the Policyholder, if the Aircraft may be used as the Policyholder wishes for more than 10 straight days, or more than 15 days in any year;
- Bungee-cord jumping, parachuting, skydiving, parasailing, hang-gliding;
- Voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a Physician and taken in accordance with the prescribed dosage;
- The Insured Person's intoxication. The Insured Person is conclusively deemed to be intoxicated if the level in his blood exceeds the amount at which a person is presumed, under the law of the locale in which the accident occurred, to be under the influence of alcohol if operating a motor vehicle, regardless of whether he is in fact operating a motor vehicle, when the injury occurs. An autopsy report from a licensed medical examiner, law enforcement officer's report, or similar items will be considered proof of the Insured Person's intoxication;

Pre-Existing Condition Limitation (Continued)

- An Accident if the Insured Person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, unless:
 - (a) the Insured Person holds a valid learners permit and (b) the Insured Person is receiving instruction from a driver's education instructor;
- Alcoholism, drug addiction or the use of any drug or narcotic except as prescribed by a Physician unless specifically provided herein;
- Repair or replacement of existing dentures, partial dentures, braces, fixed or removable bridges, or other artificial dental restoration;
- Repair, replacement, examinations for prescriptions or the fitting of eyeglasses or contact lenses;
- Elective Abortion. Elective Abortion means an abortion for any reason other than to preserve the life of the female upon whom the abortion is performed;
- Mental and nervous disorders;
- Elective surgery or cosmetic surgery, except for reconstructive surgery needed as the result of a Covered Injury or Covered Sickness;
- Experimental or Investigational drugs, services, supplies. For the purposes of this exclusion, "Experimental or Investigational" means medical services, supplies or treatments provided or performed in a special setting for research purposes, under a treatment protocol or as part of a clinical trial (Phase I, II or III). The covered service will also be considered Experimental or Investigational if the Insured Person is required to sign a consent form that indicates the proposed treatment or procedure is part of a scientific study or medical research to determine its effectiveness or safety. Medical treatment, that is not considered standard treatment by the majority of the medical community or by Medicare, Medicaid or any other government financed programs or the National Cancer Institute regarding malignancies, will be considered Experimental or investigational. A drug, device or biological product is considered Experimental or Investigational if it does not have FDA approval or approval under an interim step in the FDA process, i.e., an investigational device exemption or an investigational new drug exemption;
- Treatment for being overweight, gastric bypass or stapling, intestinal bypass, and any related procedures, including complications;
- Sexual reassignment surgery, sexual transformation surgery, sexual transgendering surgery;
- Services related to sterilization, reversal of a vasectomy or tubal ligation; in vitro fertilization and diagnostic treatment of infertility or other problems related to the inability to conceive a child, unless such infertility is a result of a Covered Injury or Covered Sickness;
- Treatment or services provided by a private duty nurse;
- Organ or tissue transplants and related services;
- Personal comfort or convenience items;
- Rest or custodial cures;
- Hearing aids.
- An Injury or Sickness for which the Insured Person is paid benefits under any Workers' Compensation or occupational disease law or under any insurance policy that provides benefits to the Insured Person for injuries resulting from an occupational accident.

In addition, benefits will not be paid for services or treatment rendered by any person who is:

- employed or retained by the Policyholder; Subscriber;
- living in the Insured Person's household;
- an Immediate Family Member of either the Insured Person or the Insured Person's Spouse;
- the Insured Person.

NOTICE

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Coverage may not be available in all U.S. states and jurisdictions. Product availability and plan design features, including eligibility requirements, descriptions of benefits, exclusions or limitations may vary, depending on state laws. This insurance does not apply to the extent that trade or economic sanctions or regulations prohibit AXIS Insurance Company from providing insurance, including, but not limited to, the payment of claims. Payment of claims under any insurance policy issued shall only be made in full compliance with all United States economic or trade and sanction laws or regulation, including, but not limited to, sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC").


Note on Premium Rates Paid to AXIS Insurance Company:

The monthly association membership fees you will be charged include insurance premiums which are paid to AXIS Insurance Company for limited medical indemnity insurance coverage as well as non-insurance fees for products and services offered by and paid to the Association. The monthly insurance premiums paid to AXIS Insurance Company out of the monthly association membership fees are as follows:

	Indemnity 2000	Indemnity 3000	Indemnity 5000
Individual	\$70.28	\$90.92	\$172.09
Member +1	\$154.61	\$211.03	\$378.60
Family	\$224.89	\$306.95	\$550.69

The above Insurance Premium reflects only the coverage underwritten by AXIS Insurance Company. It does NOT include the association's costs for other coverages, programs and services; including but not limited to member discount and savings related programs and services; administration and maintenance of association information and benefits, websites, enrollment, fulfillment, and any other costs related to the administration of association membership. Monthly Association Membership dues can be found below.

USA+ Indemnity 360 - Monthly Membership Dues




Individual

Indemnity 2000 -	\$171
Indemnity 3000 -	\$221
Indemnity 5000 -	\$371



Member +1

Indemnity 2000 -	\$342
Indemnity 3000 -	\$452
Indemnity 5000 -	\$792



Family

Indemnity 2000 -	\$482
Indemnity 3000 -	\$642
Indemnity 5000 -	\$1132

You have 30 days from the date you receive your membership materials (or such longer period as may be required by state law) to review and evaluate the USA+ membership. If you wish to cancel your membership and receive a full refund, you may do so by submitting a written request to USA+ at the address listed below.

USA+ For Health Care and You!



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