North American Health Plans is Reinventing Health Care Choices with lower premiums, comprehensive benefits, the freedom to choose any doctor, and keeps you out of the ACA penalty.

Coverage Includes

- Health Plan
- Illness
- Accident
- Dental/Vision/Hearing
- Out of Pocket
- MEC
- Prescription Drug
- Life Insurance
Reinventing Health Care Choices

Coverage Includes

**Fixed Benefit Health Plan**
A fixed benefit health plan provides coverage for in-patient hospital, out-patient surgical, skilled nursing, doctor visits, x-ray labs, prescription drugs, and much more. While you can use any doctor or hospital you choose without penalty, you have the option of accessing the PHCS Multiplan Network to take advantage of great savings at no additional costs.

**Critical Illness**
Thanks to medical advances more and more people are surviving major catastrophic medical issues such as cancer, heart attack, and stroke. Unfortunately, it places a tremendous financial strain on the family. Critical Illness (CI) coverage protects your financial security and provides benefits for things like deductibles, prescriptions, rehabilitation, treatments not covered by existing insurance, your bills, your expenses, and lost wages. Lump sum benefit levels range from $10,000 to $50,000.

**Out Of Pocket Protection**
With today’s rising cost of health care and health insurance premiums, many individuals have higher deductibles and more out-of-pocket costs. Out of Pocket Protection helps pay for deductibles and co-payments. Benefits include first Hospital Admission coverage up to $5,000 per occurrence and Hospital confinement up to $200 per day.

**Minimum Essential Coverage (MEC)**
Minimum Essential Coverage (MEC) includes preventive and wellness services. It provides access to important medical screenings, vaccines, counseling, and more to help you stay healthy. The MEC plan we offer is penalty proof, protecting you from taxation penalties under the Individual Mandate of the Affordable Care Act.

**Prescription Drug Coverage**
Prescription drugs are the fastest growing costs in health care. Our Prescription Drug plan provides you with unparalleled control to customize coverage that’s right for you.

**Life Insurance**
Life Insurance is a way to leave money behind for the people who depend on you for financial support. Funds can be used to pay for funeral costs, meet living expenses, or pay off any debts. Some plans also offer living benefits in the case of a critical illness while alive. Coverage levels for 20 years of quality, level term insurance are available up to $200,000 per life.
### Fixed Benefit Health Plan (PALIC)

<table>
<thead>
<tr>
<th>Description</th>
<th>Health Saver Plus III (2 units)</th>
<th>Health Saver Plus III (3 units)</th>
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<tbody>
<tr>
<td><strong>Deductible:</strong> This deductible applies to the Facility Fees and Professional Services.</td>
<td>$2,500 or $5,000</td>
<td>$2,500 or $5,000</td>
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| **Inpatient Hospital confinement:** The plan will pay the daily Fixed Benefit selected if any Covered Person incurs charges for and is Confined in a Hospital as a result of a covered:  
  - Sickness (per day)  
  - Injury (per day)                                                                   | $3,000                        | $4,500                          |
  |                                                                                       | $6,000                        | $6,000                          |
| **Intensive Care Unit Confinement:** The plan will pay the daily Fixed Benefit selected (up to 20 days per calendar year) if any Covered Person incurs charges for and is Confined in a Hospital’s Intensive Care Unit (ICU) as a result of a covered:  
  - Sickness (per day)  
  - Injury (per day)                                                                   | $4,500                        | $6,750                          |
  |                                                                                       | $6,000                        | $6,750                          |
| **Mental Illness, Alcohol and /or Substance Abuse:** The plan will pay the daily indemnity benefit during confinement in a Hospital for Mental Illness, Alcohol and /or Substance Abuse Dependency. | $400                          | $600                            |
| **Rehabilitation Facility/ Skilled Nursing Facility:** The plan will pay the daily indemnity benefit during Confinement in a Rehabilitation Facility or killed nursing facility as a result of a covered Injury or Sickness. | $1,500                        | $2,250                          |
| **Outpatient Radiation or Chemotherapy:** The plan will pay the daily Indemnity benefit selected if any covered person incurs charges for Outpatient Radiation or Chemotherapy. | $1,500                        | $2,250                          |
| **Outpatient Hospital or Ambulatory Surgical Center:** The plan will pay the daily Indemnity benefit selected for Outpatient Hospital or Ambulatory Surgical Center services when surgery is performed as a result of a covered Injury or Sickness.  
  *The calendar year policy deductible will be waived for the first claim incurred in a calendar year for each covered person when surgery is performed under general anesthesia.* | $3,000                        | $4,500                          |
| **Surgical Services:** The plan will pay the daily surgical Fixed Benefit if any Covered Person undergoes a surgical procedure when performed in a Hospital or in an Ambulatory Surgical Center due to an eligible Injury or Sickness. (Including inpatient pathology and radiology). 20% of the surgical benefit is payable for Assistant surgeon, and 25% for Anesthesia. | 2X Medicare Fee schedule      | 3X Medicare Fee schedule        |
| **Emergency Room:** Limit 1 benefit per covered person per Calendar Year                                                                 | $200                          | $400                            |
| **Ambulance:** Limit 2 benefit payments (ground) and 1 benefit payment (air) per covered person per Calendar Year | $500 ground $1,500 air        | $500 ground $1,500 air          |
| **Doctor Office Visit**                                                                                                                         | $60                           | $80                             |
| **Prescription Drugs**                                                                                                                           | $10 generic                  | $20 brand                       |
| **Outpatient Services and Doctor Visits:** The plan will pay for each day a covered person sees a Physician in the Physicians office or outpatient clinic. Calendar Year Deductible ($50) is waived for the first (3) visits. Benefits include MRI, X-rays, and lab. Includes $125 per calendar year (60-day waiting period) for Preventive Care benefits. | $50 - $350                    | $50 - $525                      |
| **Calendar Year Max**                                                                                                                           | $250,000 or $1,000,000        | $250,000 or $1,000,000          |
| **Lifetime Max**                                                                                                                                | $5,000,000                    | $5,000,000                      |

**Value-Added Benefits At No Additional Cost**

**PHCS Multiplan network** – while you have the freedom to choose any doctor, any hospital, anywhere without penalty, you have the option of accessing the PHCS Multiplan Limited Benefit network to take advantage of great cost savings.

**Teladoc** – Teladoc is a convenient alternative to urgent care or ER visits. U.S. board-certified physicians can resolve many non-emergency medical issues and are available 24/7 at no cost to you.

**ScriptSave** – ScriptSave is included in your plan at no cost and provides discounts on both generic and brand name prescriptions at over 62,000 participating pharmacies nationwide.

**Karis 360** – Karis 360 is a patient advocacy program provided as part of your plan at no cost. This concierge style service will help you find the right provider, will help you “shop” for healthcare facility options that are affordable and provide quality service, and will negotiate with providers to minimize your out of pocket expense.
*These are a Fixed Benefit health plan. Guaranteed renewable to age 65. Exclusions and limitations apply. See outline of coverage for details. A Pre-existing condition means a condition for which medical treatment was rendered or recommended by a Physician or for which drugs or medicine was prescribed within 12 months prior to a Covered Person’s Effective Date. A condition shall no longer be considered a Pre-Existing Condition after the date a person has been covered under this policy for 12 consecutive months.

**Reinventing Health Care Choices**

**Contact us: 888-362-1214**

*[Image of a person and a business person shaking hands]*

**North American Health Plans**

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888-362-1214

northamericanhealthplans.com

2500 Legacy Drive, Suite #130

Frisco, TX 75034