



Assurant. On your terms.sm

Assurant[®] HSA Plan



Assurant Health Staying power you can count on

An insurance plan is only as reliable as the company behind it. For health insurance you can depend on, insist on a track record of expertise, strength, and commitment.

EXPERTISE

Long-term stability and success in any business takes expertise. Tracing our roots back to 1892, Assurant Health has been selling individual medical insurance longer than any company. And with almost one million customers nationwide, we've earned a solid reputation for health insurance know-how.

STRENGTH

A company's strength is most important when it's time to pay benefits. A.M. Best, the highly respected insurance rating source, consistently rates Time Insurance Company¹ A- (Excellent)² — affirming our outstanding ability to meet claims-paying obligations.

COMMITMENT

Assurant Health specializes in you. While many health insurance companies focus on large businesses, Assurant Health's commitment is to individuals and families. This commitment makes us a leader and innovator in individual medical insurance — and the best choice for those who buy their own health insurance coverage.



Get lower premiums and tax advantages with a Health Savings Account (HSA)

With health care costs increasing year after year, many people responsible for buying their own health insurance find that conventional plans with low deductibles and high premiums are impractical. An HSA program that offers savings through lower premiums and tax advantages may be the perfect solution.

The HSA solution combines a high deductible health plan with a tax-favored savings account.

An HSA is a tax-favored savings account set up for you and your family. When combined with a high deductible insurance plan, funds can be deposited into the HSA tax-free. Then you can use the funds to pay for health care expenses or accumulate them to supplement retirement income.

Here's how it works:

- The money deposited and the earnings on the deposits are tax free.
- Withdrawals to pay for qualified medical expenses are tax free.
- Unused balances roll over from year to year.
- At age 65, withdrawals for non-medical expenses are penalty-free but taxed based at current (typically lower) income levels.



The money you save on premiums with a high deductible plan can be put into your tax-sheltered HSA to grow tax free year after year. You own the HSA funds and choose how to spend them.



Many ways to use your HSA dollars

Following is a partial list of medical expenses which can be paid for with your tax-free HSA funds^{*}. For the complete list, see *IRS Publication 502* at www.irs.gov.

- Acupuncture
- Alcoholism treatment
- Artificial teeth
- Bandages
- Birth control pills
- Breast reconstruction surgery
- Chiropractic treatment
- Contact lenses
- Crutches
- Dental treatment
- Diagnostic devices
- Drug addiction treatment
- Eyeglasses
- Fertility enhancement

- Hearing aids
- Long-term care insurance
- Medications
- Nursing home fees
- Psychiatric care
- Smoking cessation programs
- Special education
- Sterilization
- Surgery
 - Vision correction surgery
 - Weight-loss programs

*Depending on the plan chosen, these services may not be covered under your health benefit plan. Please refer to your health benefit plan for all benefits, limitations, and exclusions.

Assurant Health and its legal entities are not engaged in rendering tax or legal advice. If tax or legal advice is required, seek the services of a qualified professional.

Savings, protection, and convenience

Assurant Health enhances the HSA concept with an HSA program that provides quality coverage and easy account management.

Plan Highlights

Lifetime Benefit Maximum

With the Assurant[®] HSA Plan, you choose the amount of protection you want — \$3 million or \$6 million.

Initial Rate Guarantee

Your premium rate is locked in for the first 12 months. Have the convenience of knowing what you'll pay in premium for an entire year.

Worldwide Coverage, 24 Hours a Day

Whether you're near or far from home — you're covered.

No Referrals Necessary to See a Specialist

You don't have to jump through hoops when you need a specialist's care — simply make an appointment.

First-Dollar Preventive Services

Your HSA plan provides benefits for preventive services. You'll have \$500 per person per calendar year for preventive services — covered at 100%. Remaining preventive services are covered subject to deductible and coinsurance. Preventive services include immunizations, Pap tests, PSA screening, lipid profile tests, barium enemas, and tuberculosis tests.

Emergency Room Care at Network Rate

Care includes the services of the facility and supplies. Benefits for covered emergency services are always paid at the higher network benefit percentage — even if you are out of network.

Complications of Pregnancy

Complications are covered under the plan deductible and plan coinsurance. Includes emergency Caesarean section and any sickness associated with pregnancy except hyperemesis gravidarum.

Transplants

After a 12-month waiting period, includes:

- Kidney, cornea, and skin transplants covered as any other service to the lifetime maximum of the policy.
- Transplants such as bone marrow, heart, liver, and lung covered up to a lifetime limit of \$250,000 when performed through a network provider. When performed at a designated transplant provider, transplants are covered up to a lifetime limit of \$500,000.
- Up to an additional \$10,000 toward travel expenses when a designated transplant provider is selected.

HSA Account Service

Enjoy the Convenience of HSA Tools

HSA Tools provide extensive account services for easily managing your HSA funds.

Services include:

- Easy online claims payment and account tracking services.
- A Visa® debit card.
- A line of credit option to help cover expenses¹.
- Tax-free interest on HSA funds.
- A mutual fund investment option for those with larger account balances.
- Online access to helpful medical and prescription drug information.

Visa® is a registered trademark of VISA International Service Association. ¹ This credit limit applies only to charges made with your Visa debit card. This product is not overdraft protection for checks you may have written.

This brochure provides summary information. For a complete listing of benefits, exclusions, and limitations, please refer to the policy. In the event there are discrepancies with the information in this brochure, the terms and conditions of the policy will govern.

Assurant[®] HSA Plan – Network Benefits

Plan Design

Unless otherwise noted, all deductibles, maximums, and benefit amounts are applied per person and are reset each January 1.

Network	First Choice Health Network
Integrated Deductible Amount you pay toward covered expenses before the plan pays benefits	Individual plan: \$2,700 Family plan: \$5,400
Benefit Percentage Percentage of covered expenses the plan pays after the deductible	80%
Coinsurance Percentage of covered expenses you pay after the deductible	20%
Total Out-Of-Pocket Maximum (includes deductible) After this maximum is met, the plan pays 100% of covered expenses	Individual: \$4,700 Family: \$9,400
Lifetime Benefit Maximum The total maximum amount the plan pays per person	\$3 million or \$6 million

Outpatient Benefits

Preventive Services	First \$500 at 100% – additional services are also covered subject to deductible and coinsurance
Mammograms	Covered – subject to coinsurance, deductible waived
Office Visits	Covered – subject to deductible and coinsurance
Diagnostic Imaging and Laboratory Services	Covered – subject to deductible and coinsurance
Outpatient Hospital, Surgical Center, and Urgent Care Facility	Covered – subject to deductible and coinsurance
Professional Ground and Air Ambulance	Covered – subject to deductible and coinsurance
Emergency Room	Access fee: \$75 copay, then subject to deductible and coinsurance – \$75 copay waived if admitted to the hospital
Health Care Practitioner Services	Covered – subject to deductible and coinsurance
Outpatient Physical Medicine	Rehabilitation: 20 visits- subject to deductibleChiropractic: 10 visits- and coinsuranceAcupuncture: 10 visits- and coinsurance
Home Health Care	Up to 130 visits — subject to deductible and coinsurance
Inpatient Benefits	

Inpatient Hospital	$\label{eq:covered-subject} \mbox{Covered} - \mbox{subject to deductible and coinsurance}$
Inpatient Rehabilitation Facility	Up to 10 days – subject to deductible and coinsurance
Subacute Rehabilitation and Skilled Nursing Facilities	Up to 45 days — subject to deductible and coinsurance

Optional Coverage

Dental-Vision Discount Plan Saves You Money at the Dentist and the Eye Doctor.

You'll get discounts on services from a nationwide network of dental and eyewear providers. You'll save 15 - 50% on dental services and 10 - 60% on eyewear.

Actual costs and savings may vary by provider and geographic area. This optional coverage is available at an additional cost. Discount programs are not insurance. Additional provisions may apply.

Other Covered Services

Paid same as sickness.

- Behavioral Health
- Complications of Pregnancy
- Dental Injuries
- Hospice Care
- Reconstructive Surgery

Plan Provisions

Medically Necessary Care

Treatment must be medically necessary to be covered. Medically necessary services or supplies must be:

- Appropriate and consistent with the diagnosis.
- Commonly accepted as proper treatment.
- Reasonably expected to result in improvement of the condition.
- Provided in the least intensive setting without affecting the quality of medical care provided.

Maximum Allowable Amount

The maximum allowable amount is the most the plan pays for covered services. If you use an out-of-network provider, you are responsible for any balance in excess of the maximum allowable amount.

Network Services

When you use network providers, covered charges are eligible for discounts and never exceed the maximum allowable amount.

Out-of-Network Services

Emergencies: Covered services are always paid at the network benefit percentage of 80%—even if you are out of network—subject to the maximum allowable amount.

Non-emergencies: Covered services are subject to the out-of-network deductible, the maximum allowable amount provision, the out-of network percentage of 60%, and the increased out-of-network coinsurance out-of-pocket maximum. See the chart below.

ASSURANT HSA PLAN OUT-OF-NETWORK COSTS		
OUT-OF-NETWORK DEDUCTIBLE		
Individual	Family	
\$3,700	\$7,400	
OUT-OF-NETWORK TOTAL OUT-OF-POCKET MAXIMUM		
Individual	Family	
\$11,700	\$23,400	

Utilization Review

Authorization is required before inpatient treatment and certain types of outpatient procedures. Unauthorized services will result in a penalty. Unauthorized transplants are not covered.

Benefit Waiting Periods on Certain Treatment

Benefits for certain types of treatment are payable after the benefit waiting period listed here:

- Durable and personal medical equipment (\$500 lifetime maximum) six months.
- Face and jaw dysfunction services (\$500 lifetime maximum) six months.
- Surgical treatment of bunions, hemorrhoids, inguinal hernia, varicose veins — six months.
- Surgical treatment of tonsils/adenoids six months.
- Transplants 12 months.

Pre-Existing Conditions

A pre-existing condition is a sickness or an injury and related complications for which, during the six-month period immediately prior to the effective date of your health insurance coverage:

- You sought, received, or were recommended medical advice, consultation, diagnosis, care, or treatment.
- Prescription drugs were prescribed.
- Symptoms were produced, or diagnosis was possible.

No benefits are paid for charges incurred due to a pre-existing condition until you have been continuously insured under the plan for nine months regardless if the condition was fully disclosed on the Standard Health Questionnaire. After the nine-month period, benefits are paid for a pre-existing condition.

Exclusions Summary

No benefits are provided for the following:

- Charges incurred due to a pre-existing condition until you have been continuously insured for nine months.
- Sickness or injury caused by war, participation in a felony, attempted suicide, or a hazardous activity for which compensation is received.
- Routine hearing care, routine vision care, vision therapy, surgery to correct vision, routine foot care, or foot orthotics.
- Cosmetic services including chemical peels, plastic surgery, and medications.
- Charges by a health care practitioner or medical provider who is an immediate family member. Immediate family members are you, your spouse, your children, brothers, sisters, parents, their spouses, and anyone with whom legal guardianship has been established.
- Custodial care.
- Charges reimbursable by Medicare, Workers' Compensation, or automobile insurance carriers.
- Growth hormone stimulation treatment to promote or delay growth.
- Routine dental care.
- Services provided through a school system.
- Diagnosis and treatment of infertility.
- Maternity and routine nursery charges.
- Pregnancy, maternity, and other expenses related to surrogate pregnancy.
- Storage of umbilical cord stem cells or other blood components in the absence of sickness or injury.
- Genetic testing, counseling, and services.
- Charges for sex transformation, treatment of sexual dysfunction or inadequacy, or to restore or enhance sexual performance or desire.

- Over-the-counter products.
- Outpatient prescription drugs.
- Treatment of "quality of life" or "lifestyle" concerns, including, but not limited to: smoking cessation, obesity, hair loss, or cognitive enhancement.
- Cranial orthotic devices, except following cranial surgery.
- Experimental or investigational services.
- Charges in excess of the lifetime maximum or any other benefit maximum.
- Charges for non-medical items.
- Charges related to health care practitionerassisted suicide.
- Treatment of substance abuse, including related prescription drugs.



For more information, or to apply for coverage, contact:

Assurant Health 501 W. Michigan Milwaukee, WI 53203

About Assurant Health

Assurant Health has been in business since 1892 and is the brand name for products underwritten and issued by Time Insurance Company, John Alden Life Insurance Company and Union Security Insurance Company. Together, these three underwriting companies provide health insurance coverage for almost one million people nationwide. Each underwriting company is financially responsible for its own insurance products. Primary products include individual medical, small group, short-term and student health insurance products, as well as non-insurance products and consumer-choice products such as Health Savings Accounts and Health Reimbursement Arrangements. With almost 3,000 employees, Assurant Health is headquartered in Milwaukee, Wisconsin, with operations offices in Minnesota, Idaho and Florida, as well as sales offices across the country. The Assurant Health Web site is www.assuranthealth.com.

Assurant Health is part of Assurant, a premier provider of specialized insurance products and related services in North America and selected international markets. Its four key businesses – Assurant Employee Benefits, Assurant Health, Assurant Solutions and Assurant Specialty Property – have partnered with clients who are leaders in their industries and have built leadership positions in a number of specialty insurance market segments worldwide.

Assurant, a Fortune 500 company and a member of the S&P 500, is traded on the New York Stock Exchange under the symbol AIZ. Assurant has more than \$25 billion in assets and \$8 billion in annual revenue. Assurant has more than 14,000 employees worldwide and is headquartered in New York's financial district. The Assurant Web site is www.assurant.com.