



ASSURANT  
Health®

COLORADO

Assurant. On your terms.®

**Assurant Clarity<sup>SM</sup>**  
Finally, Original Thinking



*Time Insurance Company  
John Alden Life Insurance Company*

*Assurant Health is the brand name for products underwritten and issued by Time Insurance Company and John Alden Life Insurance Company.*



# Assurant Clarity *What a concept.*

Almost everyone today has an opinion on how to improve health insurance. You've heard some of the concerns – confusing information about coverage and costs, numerous medical statements, frustration over poor customer service. You're left wondering if you're covered, what you need to pay – and who can help find answers.

That's when we thought, isn't it time for some *original thinking?*

# Introducing Assurant Clarity<sup>SM</sup>

## A SIMPLE PLAN DESIGN

Your Assurant Clarity plan begins when you select from two affordable, simplified plans – a Deductible Plan or a Zero Deductible Plan. Benefits are clearly defined in terms that make sense.

## ONE CONSOLIDATED MONTHLY STATEMENT

Once you use your plan, you won't need to pay anything at the time of service when seeing Averde Health<sup>SM</sup> network providers. Instead, we pay them for your share of the covered charges – and bill you directly through an easy-to-read Patient Health Care Statement. Now details are captured in one place, and you only write one check for your medical expenses.

## PERSONALIZED CUSTOMER SERVICE

We're here when you need us. Feel secure knowing you can contact your Front Desk team with questions about Assurant Clarity. And you'll talk with a real person, not an automated telephone system.

## AN INDEPENDENT ADVOCACY SERVICE

We think you'll find your Assurant Clarity plan quite simple. For your convenience, Patient Care serves as an additional resource to help you navigate the health care system, and will research to compare costs among providers, so you can save money.



## Choose from two simple plans

# Deductible Plan

We pay all covered charges after you meet your deductible

## Network Coverage

*Save money using Averde Health network doctors and hospitals!*

## Deductible

Select the amount you'll pay first – we pay the remainder of your covered charges for the calendar year.

Choose your deductible

Individual	\$2,000	\$3,000	\$4,000	\$5,000
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For family plans,<sup>1</sup> double the amounts above.

## Deductible Plans feature:

- **One family deductible** – Only one deductible for the whole family – making it easier to meet and track.
- **No coinsurance** – We pay 100% of covered charges after you meet your deductible.
- **Prescription drugs** – Your prescriptions apply toward your medical deductible, so you don't need to meet a separate deductible.
- **Wellness visits covered immediately** – \$1,000 of wellness services per person are covered when your policy starts. You just pay your deductible.
- **HSA compatibility** – Use the Assurant Clarity plan in conjunction with a Health Savings Account for qualified medical expenses.

All Assurant Clarity plans feature:

# Zero Deductible Plan

We share costs with you right from the beginning



## Network Coverage

*Save money using Averde Health network doctors and hospitals!*

## Out-of-pocket maximum

We share your health care costs until you reach the amount you choose to pay each calendar year. Afterward, we pay 100% of covered charges.

Choose your out-of-pocket maximum

Individual	\$2,500	\$5,000	\$7,500
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For family plans,<sup>1</sup> double the amounts above.

## Zero Deductible Plans feature:

- **No network medical deductible** – Individual or family.
- **Coinsurance** – We share the costs – we pay 50%, you pay 50% – for covered charges up to the out-of-pocket maximum you select above. Afterward, we pay 100% of covered charges.
- **Prescription drugs** – First, you have a single deductible – \$500 for individuals or \$1,000 per family – for both generic and brand names at any pharmacy you choose. We pay 50% of the remaining charges.
- **Wellness visits after six months** – \$1,000 of wellness services per person are covered after six months. You just pay coinsurance.

- No payments to providers at the time of service when using network doctors and hospitals
- Initial 12-month rate guarantee
- A \$3 million or \$8 million lifetime maximum benefit per covered person
- 24-hour access to doctors by phone – only \$35 per call with TelaDoc™<sup>2</sup>

<sup>1</sup>A family plan includes the policyholder and one or more of the policyholder's dependents.

<sup>2</sup>Subject to deductible or coinsurance depending on the plan you choose.

# Assurant Clarity in detail

## Your Assurant Clarity plan also offers:

- Office visits – evaluation, diagnosis and management of illness or injury, and allergy shots
- X-rays, MRIs, CT scans and laboratory services
- Services for doctors, surgeons, assistant surgeons, anesthesiologists, physician assistants and nurses
- Outpatient hospital, surgical center or urgent care facility access
- Inpatient hospital – semi-private room, intensive care, specialty units and miscellaneous supplies
- Ground and air ambulance to the nearest facility equipped to provide appropriate care – not just the closest
- Outpatient physical medicine – physical, speech and occupational therapies; cardiac and pulmonary rehabilitation; and chiropractic services – up to \$3,000
- Home health care – up to 160 hours
- Inpatient rehabilitation facility – up to 90 days
- Subacute rehabilitation, a less intensive form of rehabilitation, and skilled nursing facilities – up to 90 days
- Behavioral health and substance abuse<sup>1</sup>
- Transplants<sup>2</sup>
- Worldwide coverage, 24 hours a day

## Other services covered:

- Complications of pregnancy
- Dental injuries
- Diabetic services
- Durable and personal medical equipment
- Hospice care and related counseling services (inpatient or home care)
- Drugs administered other than orally (parenteral drug therapy)
- Reconstructive surgery
- Sterilization (12-month waiting period and \$500 lifetime maximum)
- Treatment of TMJ (temporomandibular joint disorder) or CMJ (craniomandibular joint disorder) – \$1,000 lifetime maximum

<sup>1</sup>Inpatient and outpatient benefits are paid at 50%, up to \$2,500 per calendar year. Coinsurance applies to the out-of-pocket maximum.

<sup>2</sup>Includes kidney, cornea and skin transplants, regardless of provider, as well as other various transplants when performed at a designated transplant provider. Lifetime benefit maximum of \$100,000 per person applies when transplant isn't performed at a designated provider. Plan also includes up to \$10,000 toward travel expenses to a designated transplant provider, and up to \$10,000 toward donor expenses.

The amount of benefits depends upon the plan design components selected, and the premium varies with the amount of benefits. Benefit amounts are applied per person and are reset each January 1.



Isn't it time to look at health

## Optional benefits for your plan

Take a plan and make it your own with these options.<sup>1</sup> Ask your agent for additional information.

### SuiteSolutions®<sup>2</sup>

SuiteSolutions provides cash benefits that help you pay your deductible and coinsurance in the event of a serious medical condition. To participate, you need to first join the Health Advocates Alliance (see page 9 for details). Then, choose from two membership levels – either SecureSolution for injury expenses and additional accident benefits, or SelectSolution, which covers everything included with SecureSolutions, plus critical illness expenses. For more information, ask your agent for Form 30211.

### Dental Insurance<sup>2</sup>

This plan pays quick cash benefits – sent directly to you or your provider – that offset the cost of routine, basic and major dental services. For more information, ask your agent for Form 29998.

### Term Life Insurance

Our term life insurance is available to everyone on your plan – you decide who will be covered. Your options include primary insured only, spouse only, primary insured and spouse only, dependents and primary insured and/or spouse.

Life Insurance options are:

- \$50,000 to \$200,000 for primary insured or spouse
- \$10,000 or \$25,000 for dependents ages one year to eighteen years
- \$2,000 for dependents ages two months to one year

### Dental-Vision Discount Plan<sup>3</sup>

When you select from our nationwide network of dental and eyewear providers, you'll enjoy savings of 15 to 50% on dental services and 10 to 60% on eyewear.

<sup>1</sup>Available at an additional cost.

<sup>2</sup>SuiteSolutions and Dental Insurance plans are separate contracts. Accident and critical illness benefits are underwritten by National Union Fire Insurance Company of Pittsburgh, PA, a subsidiary of Chartis Insurance Company.

<sup>3</sup>Discount programs are not insurance coverage. Actual costs and savings may vary by provider and geographical area.



insurance a little differently?

# Assurant Clarity in detail

## Out-of-network coverage

Using Averde Health network doctors and hospitals will save you money. With an out-of-network provider, you will pay more – including charges for deductibles, coinsurance and out-of-pocket maximums – and you will be billed directly by the provider for the amount you owe.

### Deductible Plan

**Deductible** – When you use out-of-network providers, your deductible is twice as much as your corresponding network deductible. These amounts include:

Network deductible	Individual	\$2,000	\$3,000	\$4,000	\$5,000	◀ Your chosen deductible
Out-of-network deductible	Individual	\$4,000	\$6,000	\$8,000	\$10,000	◀ Your deductible when using out-of-network providers

For family plans,<sup>1</sup> double these amounts.

**Coinsurance** – We pay 50% of your covered charges after you meet your deductible, up to your coinsurance out-of-pocket maximum, which is \$6,000 for individuals or \$12,000 for a family.

### Zero Deductible Plan

**Out-of-pocket maximum** – When you go out of network, you pay a deductible. Then, we share health care costs until you reach your out-of-pocket maximum – which is \$6,000 more than your corresponding network amount. These amounts include:

Network out-of-pocket maximum	Individual	\$2,500	\$5,000	\$7,500	◀ Your chosen out-of-pocket maximum
Out-of-network out-of-pocket maximum	Individual	\$8,500	\$11,000	\$13,500	◀ Your out-of-pocket maximum when using out-of-network providers

For family plans,<sup>1</sup> double these amounts.

**Deductible** – You pay a \$1,000 individual out-of-network deductible or a \$2,000 out-of-network deductible for the entire family, an expense that's eliminated when staying in the network.

**Coinsurance** – We pay 30% after your deductible – for covered charges up to your out-of-network out-of-pocket maximum.

<sup>1</sup>A family plan includes the policyholder and one or more of the policyholder's dependents.





## Important information about your plan

Assurant Clarity is all about understanding the details of your plan, as well as the features and benefits.

### Network services

When you use Averde Health network providers, you'll experience significant savings. You pay only what appears on your Patient Health Care Statement.

### Emergencies

You're covered in an emergency – regardless of where services are performed.

### Non-emergencies

Using Averde Health network providers saves you money. If you go out of the network in a non-emergency situation, covered services are subject to your contract's maximum allowable amount provision, the out-of-network deductible and an increase in your portion of coinsurance and your out-of-pocket maximum. Please see the out-of-network coverage details on page 8 for more information.

### Medically necessary care

To ensure your services are covered, treatment must be medically necessary, meaning all of the following:

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

### Authorization for services

Before you seek inpatient treatment and certain types of outpatient procedures or services, authorization is required to be eligible for coverage. For example, transplants must always be authorized.

### Health Advocates Alliance membership

Health Advocates Alliance is an association dedicated to the health and well-being of its members. Membership, which allows you to participate in SuiteSolutions, includes access to a 24-hour nurse helpline, a scholarship program for qualified students studying in a health-related field and a number of additional benefits, including discounts. Ask your agent for details.



## What Assurant Clarity does not cover

Knowing exactly what your health plan does and doesn't cover is important. To give you the best possible experience, we offer the following summary of what is not covered. Complete details will be included in your insurance contract.

### Maintenance care and therapies:

- Routine hearing care, adult hearing aids, routine vision care, vision therapy, surgery to correct vision, routine foot care or foot orthotics
- Routine dental care, unless you choose the dental insurance option

### Cosmetic services and procedures:

- Services including chemical peels, plastic surgery and medications
- Any correction of malocclusion (irregular tooth contact), protrusion, hypoplasia (abnormality in dental enamel) or hyperplasia (abnormality) of the jaws
- Cranial orthotic devices, except following cranial surgery

### Reproductive-related procedures and concerns:

- Contraceptive drugs, devices or procedures
- Diagnosis and treatment of infertility
- Maternity and routine nursery charges
- Pregnancy, hyperemesis gravidarum (extreme, persistent nausea), maternity and expenses related to surrogate pregnancy

### Quality of life concerns:

- Chronic pain disorders
- 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
- Concerns such as obesity and weight management, hair loss or sexual function, dysfunction, inadequacy or desire
- Cognitive enhancement
- Prophylactic treatment

### Experimental medicine and treatment:

- Chelation therapy, used to remove heavy metals or obstructive plaque from the body
- Charges for non-medical items
- Charges for alternative medicine including acupuncture and naturopathic medicine
- Experimental or investigational services

### Prescription drug plans do not include and will not cover:

- Over-the-counter products
- Drugs not approved by the FDA
- Drugs obtained outside the United States
- The difference in cost between a generic and brand name drug when the generic is available

### Also not covered:

- Illness or injury caused by war or while in the military; commission of a felony; or attempted suicide unless committed while insane
- Illness or injury caused by a hazardous activity for which compensation is received
- 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
- Treatment used to improve memory or to slow the normal process of aging
- Custodial care
- Charges reimbursable by Medicare, Workers' Compensation, automobile insurance carriers or covered by a federal, veteran's, state or municipal medical facility
- Charges for educational testing or training, vocational or work-hardening programs, transitional living or services provided through a school system
- Charges related to health care practitioner-assisted suicide
- Testing and treatment related to the diagnosis of behavioral conduct or developmental problems; for example, autism
- Non-surgical treatment for TMJ (temporomandibular joint disorder), CMJ (craniomandibular joint disorder) or any related surgical treatment not preauthorized, other than what's described as covered in the contract
- Growth hormone stimulation treatment to promote or delay growth
- Charges for treatment due to sleep apnea
- Charges due to a pre-existing condition, until you've been continuously insured for 12 months, unless the condition was fully disclosed on the application. After this period, benefits will be paid for the condition unless it's specifically excluded from coverage. A pre-existing condition is an illness or injury and related complications for which the following occurred during the 12-month period immediately prior to the effective date of your coverage:
  - you sought, received or were recommended medical advice, consultation, diagnosis, care or treatment, or
  - prescription drugs were prescribed, or
  - symptoms were produced, or
  - diagnosis was possible





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For more information and to learn about optional benefits and apply for coverage, contact your insurance agent.

**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 to 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. 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](http://www.assuranthealth.com).

Assurant Health is part of Assurant, a premier provider of specialized insurance products and related services in North America and select worldwide 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 approximately 15,000 employees worldwide and is headquartered in New York's financial district. The Assurant Web site is [www.assurant.com](http://www.assurant.com).

#### COLORADO STATE NOTICES

Colorado law requires carriers to make available a Colorado Health Benefit Plan Description Form, which is intended to facilitate comparison of health plans. The form must be provided automatically within three (3) business days to a potential policyholder who has expressed interest in a particular plan or who has selected the plan as a finalist from which the ultimate selection will be made. The carrier also must provide the form, upon oral or written request, within three (3) business days, to any person who is interested in coverage under or who is covered by a health benefit plan of the carrier.

We maintain an access plan for each network offered in Colorado. The access plan includes information regarding availability and accessibility of participating providers and our method of informing you of the plan's services and features. The access plan is available upon request by contacting us at 800.800.1212.

#### Network Adequacy:

- I. Depending on the network chosen, there may be counties with no participating providers available. Please see provider directory for additional information.
- II. Non-network providers may bill more than we determine to be a maximum allowable amount and you are responsible for payment of any amount billed above the maximum allowable amount.
- III. You may request the usual, customary and reasonable rate for reimbursement for specific services by contacting us at 800.553.7654.