

# FirstChoice Victory Series

**The FirstChoice in Defined Health Insurance Benefits**

This is a Hospital Indemnity Insurance Policy



**Guaranteed Issue \***

*\* To receive Guaranteed Issue underwriting consideration, the primary insured must be gainfully employed, and working an average of 27 hours per week or more. Some permanent exclusions apply.*



# Our Commitment

## Our Commitment to the Hospital Indemnity Marketplace!

Not many companies can boast that the Limited Benefit market is open for business based solely on actions it took to keep the market open. In fact, only one can and that is ManhattanLife.<sup>1</sup> We invested in our policyholders and on behalf of our agents to keep the Limited Benefit marketplace viable. Why? It was the right thing to do. We stand behind our plans as do thousands of agents and policyholders.

<sup>1</sup>For details, search *Central United Life Insurance Co. v. Burwell* – DC Circuit

“ “ Because HHS lacked authority to demand more of fixed indemnity providers than Congress required, the district court’s permanent injunction is hereby . . .

Affirmed. ” ”

Excerpt from United States Court of Appeals for the District of Columbia Circuit

(Central United Life Insurance Co., Et al., Appellees v. Sylvia Mathews Burwell In her Capacity as Secretary of U.S. Department of Health and Human Services, Et. al., Appellants)

Decided July 1, 2016

# New FirstChoice Victory Series Hospital Indemnity Plans:

- No lifetime maximum benefit limits!
- Your choice of three benefit packages
- No deductibles
- Guaranteed Issue!\*
- Pays directly to you after easy claim filing
- Pays in addition to all other insurance
- No networks, use any doctor or hospital

## The Two “Costs” of Healthcare

The first is the premium cost to have health insurance. The second is the out-of-pocket exposure when using it. If the premiums are affordable but unsuitable due to high deductibles, co-insurance, and out-of-pocket charges, it can create a financial burden difficult or impossible to afford.

One of two possibilities will occur for you this year; you will either be hospital confined, or you will not. It is unlikely that many of us will exceed our deductibles in a year without a hospital stay, so in most years we wind up paying our insurance premiums and most or all of the cost of our treatment. But, if and when we are hospital confined, the high cost of treatment will likely have us reach the maximum out-of-pocket threshold of any qualified metal plan level for even a relatively short confinement.

The irony is that today it seems that health insurance has never been easier to qualify for, nor harder to afford.

Many see the merit of purchasing a qualified Bronze plan and using the premium difference between it and the more expensive designs to purchase supplemental Insurance to “Fill the gaps.” By doing so, particularly in years with a hospital stay, an individual can purchase a Bronze plan and a FirstChoice Bridge and reduce or eliminate the out of pocket costs, often for less total premium expenditure than would have been required for a Silver or Gold plan alone.

*\* For full-time employees ages 18-65 (inclusive) working 27 or more hours per week on average (spouse/dependent coverage also available. ) Certain permanent exclusions apply.*

## Victory Series Hospital Indemnity Plan Premiums

Rates are for the following states\*:

AL, AR, AZ, CA, DE, FL, GA, IA, IL, IN, LA, MD, MI, MS, NC, NE, OH, OK, PA, SC, TN, TX, VA, WI and WV

DELUXE	Employee	Emp / Spouse	Emp / Children	Family
18-39	168.17	331.33	304.17	467.34
40-59	226.30	447.60	362.31	583.61
60-65*	270.60	536.20	406.61	672.21
BASIC	Employee	Emp / Spouse	Emp / Children	Family
18-39	110.08	215.17	198.90	303.98
40-59	147.90	290.80	236.71	379.61
60-65*	177.05	349.10	265.86	437.91
BRIDGE	Employee	Emp / Spouse	Emp / Children	Family
18-39	34.50	64.00	62.49	91.99
40-59	45.65	86.30	73.64	114.29
60-65*	52.80	100.60	80.79	128.59

\* In CA, the third age band is 60-64



## Victory Series Hospital Indemnity Plan Designs

Benefit	Deluxe	Basic	Bridge
<b>Daily Room Benefit</b> Maximum 365 days per period of confinement	\$300	\$200	\$50
<b>Riders</b>			
<b>Lump Sum Indemnity</b> Paid to an insured upon the first hospital confinement each year.	\$3,000	\$2,000	X
<b>Hospital Injury Indemnity</b> Maximum 365 days per period of confinement when the confinement is the result of an accident or injury.	\$1,000 per day	\$1,000 per day	\$1,000 per day
<b>Intensive Care Unit</b> Limited to 20 days per confinement	\$3,000 per day	\$2,000 per day	X
<b>Surgical</b> Per day when confined and a covered surgical event takes place. Maximum of 5 days per confinement.	\$3,000 per day	\$2,000 per day	\$1,000 per day
<b>Anesthesia</b> Daily benefit paid for each day that a surgical benefit is paid.	\$600 per day	\$400 per day	\$200 per day
<b>First Hospital Confinement</b> Based upon duration of first hospital confinement of each calendar year.	\$15,000 6 day maximum	\$10,000 6 day maximum	\$5,000 6 day maximum
<b>Private Duty Nurse</b> Maximum 30 days per period of confinement (limitations apply)	\$500 per day	\$250 per day	\$250 per day
<b>Emergency Accident</b> Limit 1 visit per accident/4 accidents per year.	\$500 per day	\$250 per day	\$250 per day
<b>Outpatient Sickness</b> Limit 1 visit per sickness /maximum 4 visits per calendar year.	\$100 per day	\$50 per day	\$25 per day
<b>Outpatient Diagnosis Procedure Rider</b> Pays the Scheduled Benefit amount per day for each day a Covered Diagnostic Procedure is performed on an insured, 4 per insured person per year.	\$500 per day	\$250 per day	X

*These products do not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") Therefore, this product does not satisfy the requirement of Minimal Essential Coverage under the Federal Patient Protection and Affordable Care Act. For additional information, you can contact us, refer to the official federal website at [www.healthcare.gov](http://www.healthcare.gov), or call their toll free number at 800-318-2596.*

# Victory Series Hospital Indemnity Plan

## State Specific Premiums

State		Variation		
Kentucky		Standard benefits, state specific rates.		
DELUXE	Employee	Emp / Spouse	Emp / Children	Family
18-39	\$122.17	\$239.34	\$214.49	\$331.66
40-59	\$180.65	\$356.30	\$272.97	\$448.62
60-65	\$200.40	\$395.80	\$292.72	\$488.12
BASIC	Employee	Emp / Spouse	Emp / Children	Family
18-39	\$82.08	\$159.16	\$142.51	\$219.59
40-59	\$121.30	\$237.60	\$181.73	\$298.03
60-65	\$134.40	\$253.80	\$194.83	\$314.23
BRIDGE	Employee	Emp / Spouse	Emp / Children	Family
18-39	\$29.95	\$54.90	\$53.75	\$78.70
40-59	\$43.60	\$82.20	\$67.40	\$106.00
60-65	\$48.75	\$92.50	\$72.55	\$116.30

State		Variation		
Missouri and Nevada		The Outpatient Sickness Rider is not available.		
DELUXE	Employee	Emp / Spouse	Emp / Children	Family
18-39	156.17	307.33	278.49	429.66
40-59	210.30	415.60	332.63	517.93
60-65	251.60	498.20	373.93	620.53
BASIC	Employee	Emp / Spouse	Emp / Children	Family
18-39	104.08	203.17	186.06	285.14
40-59	139.90	274.80	221.87	356.77
60-65	167.55	330.10	249.52	412.07
BRIDGE	Employee	Emp / Spouse	Emp / Children	Family
18-39	31.50	58.00	56.07	82.57
40-59	41.65	78.30	66.22	102.87
60-65	48.05	91.10	72.62	115.67

State		Variation		
Utah		The Outpatient Sickness and Diagnostic Rider is not available.		
DELUXE	Employee	Emp / Spouse	Emp / Children	Family
18-39	142.00	279.00	260.16	397.16
40-59	192.80	380.60	310.96	498.76
60-65	231.60	458.20	349.76	576.36
BASIC	Employee	Emp / Spouse	Emp / Children	Family
18-39	97.00	189.00	176.89	268.89
40-59	131.15	257.30	211.04	337.19
60-65	157.55	310.10	237.44	389.99
BRIDGE	Employee	Emp / Spouse	Emp / Children	Family
18-39	31.50	58.00	56.07	82.57
40-59	41.65	78.30	66.22	102.87
60-65	48.05	91.10	72.62	115.67

# FirstChoice Victory Series Hospital Indemnity Plans

Your FirstChoice Victory Series comes with access to a large network of doctors and other health services available through the MultiPlan network.

## How you save with FirstChoice Victory Series

In addition to payments that help pay medical services, FirstChoice helps get you more for your money with the **MultiPlan\* series of networks**.

**MultiPlan** is one of the oldest and largest networks. Currently, MultiPlan contracts with over 770,000 respected practitioners, 5,000 hospitals, and 70,000 ancillary care facilities, so it is not difficult to find a participating provider in any area of the country.

You save an average of 20-30% off inpatient and outpatient hospital charges when you use the **MultiPlan Network**.

To learn more about finding a "Provider in Four Easy Steps" go to:

- [www.multiplan.com](http://www.multiplan.com)
- click on, "Find a Provider"
- select your card network
- find your provider

### **RXedo Prescription Benefit Partner:\***

- Discounts to 80%
- Completely free to use
- Accepted at over 67,000 pharmacies nation-wide
- Discounts on over 10,000 medications

How much will you save?

Average savings over 65% per prescription.

Use the Drug Pricing tool to price prescription at pharmacies in your zip code. The results will be by least cost pharmacies first. To use the Drug Pricing tool, click the drug pricing link provided at [www.findlowrx.com](http://www.findlowrx.com).



*\*Network and prescription drug are not part of this policy. Multiplan and RXedo are value added healthcare programs from other providers designed to enhance your healthcare experience without additional cost to you.*



# Sponsored Benefits



Improving access to quality care while reducing costs to members.

Teladoc is a modern day house call with immediate access to a network of board-certified physicians. Physicians are available anytime, anywhere for personalized, secure, web or phone-base consultation that includes diagnosis and treatment of medical issues.

### Members can use 24/7 Physician Consultations:

- For common, acute conditions that can be treated without a face-to-face visit.
- From anywhere - at home, at work or on the road.
- After hours - during the evening, on weekends or holidays.
- When they cannot reach their primary care physician.

### Product Highlights:

- Convenient, timely consultations available to members anytime.
- Reduces claims costs for benefit plans and saves members time and out-of-pocket costs.
- Offers a fast, affordable alternative for minor medical problems and health issues.
- All physicians are licensed, board certified and based in the U.S.
- Visit Fee is \$0.00

For more information go to  
Online: [www.teladoc.com](http://www.teladoc.com)

Mobile App (App Store and Google Play):  
[www.teladoc.com/mobile](http://www.teladoc.com/mobile)

or call

1-800-Teladoc (832-2362)

Advocating for the patient, saving members time and money before, during and after a healthcare event



Karis360 helps policyholders save on out-of-pocket expenses, in finding doctors, assists in searching and comparing facilities, providers, and prescription costs, as well as many other services. Karis360 offers 3 services to policyholders.

### Karis Healthcare Navigator

- Provides each member a personal, expert advisor to address healthcare-related questions and concerns.
- Services include, but are not limited to: physician and healthcare facility searches, prescription cost search, health cost estimates, alternative medicine, laboratory and imaging services, elder care solutions, appointment scheduling.

### Karis Surgery Saver

- Helps members when a non-emergency surgical procedure is being considered.
- Specialized Advisors provide cost, quality and availability comparison of up to 5 facilities in the area.

### Karis Bill Negotiator

- Works directly with healthcare providers to help reduce out-of-pocket expenses.
- Negotiates directly with providers and collection agencies to try and reduce medical bill balances.
- Works with providers to develop payment plans.

For more information go to  
[www.thekarisgroup.com](http://www.thekarisgroup.com)  
or call 1-855-399-4457

*Karis360 is not insurance and does not provide funds to pay for bills. This is a best-efforts service and results can not be guaranteed.*

*Listed above are two added sponsored benefits that are not part of the policy. There is a \$5.00 monthly administration fee for these two services included in the premium.*

**FirstChoice Victory Series is proudly provided through the  
independently licensed agents of**



**General Agent Center  
8700 E. Vista Bonita Dr. Suite 174  
Scottsdale, AZ 85255  
Toll Free: 800-366-2467**

Benefits and riders may vary by state and may not be available in all states.

This is not a complete disclosure of plan qualifications and limitations. Please access our website to obtain a completed list for the FirstChoice product at [disclosure.manhattanlife.com](http://disclosure.manhattanlife.com). Please review this information before applying for coverage. The amounts of benefits provided depend on the plan selected. Premiums will vary according to the selection made.

**THIS POLICY PROVIDES LIMITED BENEFITS.**

**Policy Form Numbers:** HIP, HIP-LA, HIP-OK, HIP-TX (including state variations)

**For use in states:** AL, AR, AZ, CA, DE, FL, GA, IA, IL, IN, KY, LA, MD, MI, MO, MS, NC, NE, NV, OH, OK, PA, SC, TN, TX, UT, VA, WI, WV

This product does not constitute comprehensive health insurance coverage (often referred to as, “major medical coverage”). Therefore, this product does not satisfy the requirement of Minimum Essential Coverage under the Federal Patient Protection and Affordable Care Act. For additional information, you can contact us, refer the official federal website at [www.healthcare.gov](http://www.healthcare.gov), or call their toll-free number at 800-318-2596.

**Underwritten by:  
ManhattanLife Assurance Company of America  
Family Life Insurance Company**

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10777 Northwest Freeway, Houston, TX 77092**

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800-999-2971**