







Association Health Benefits

Using Network Providers

One of the strongest features of the Secure BHP is that members can see the doctor or specialist of their choice. If, however, the Member chooses to use the doctor and hospital referral network, the costs of all medical services and procedures will be automatically "repriced" to the lowest pre-negotiated network price. Our Provider network has tens of thousands of doctors, specialists, hospitals, emergency clinics and testing centers throughout the United States.

Physicians Referral Network

Description

The Physician referral network is NOT insurance. The program represents a contracted "network savings" up to 50% on all doctor medical services for a provider that is in our network. The network savings are applied directly to your physician (doctor or specialist) bill. The bill for your doctor services will be "repriced" to reflect the contracted savings. The insurance benefits (provided to each member of the association) will then be applied to the remaining doctor bill or paid directly to you to help offset or pay in full the balance of your bill. The insurance benefits are scheduled and will vary depending upon the benefits as outlined in your certificate of insurance.

- Anesthesiologists Cardiologists
- Dermatologists
 Endocrinologists
 Gynecologists

Chiropractors

- Neurologists
- Oncologists
- Pediatricians
- Psychiatrists
- Surgeons
- and more

Hospital Referral Network

Description

The Hospital Savings Program is NOT insurance. The program represents a contracted "network savings" on all medical services that a Provider Hospital charges for their hospital services. The network savings are applied directly to your hospital bill. The bill for your hospital services will be "repriced" to reflect the contracted savings and then the insurance benefits will be applied to the remaining balance to help offset or pay your bill in full. The insurance benefits are scheduled and will vary depending upon the benefits as outlined in your certificate of insurance.

Our Hospital Referral Network is one of the largest hospital networks in the country, including some of the finest facilities in the U.S. Usual and customary savings can range up to 25% and more. In some cases, hospitals have agreed to package rates for certain procedures making possible a savings of up to 40% and more.

Hospitals

• Testing Centers

- Clinics
- Surgical Clinics • Rehab Centers
- · and more
- Emergency Rooms

Association Benefits

Dental Plan Save up to 50%

Save at thousands of dental practice locations, including general dentists and specialists. Save on everything from general dentistry and cleanings to root canals, crowns and orthodontia, oral surgery, dentures, periondontics, and cosmetic surgery where available. There are no claim forms

Vision Plan Save up to 50%

Members can save up to 50% at over 10,000 participating vision eye care locations nationwide. Discounted products and services include eyeglasses, contacts, prescription and non-prescription sunglasses, eye exams and corrective surgery. The network includes opticians, ophthalmologists, optometrists, laser surgery centers, independent optical centers and national chain locations.

Hearing Program Savings up to 20%

Save on discounted charges for diagnostic hearing evaluations performed by licensed audiologists. Receive 20% off conventional hearing aids, or 10% off programmable/digital hearing aids. Also, 20% off custom ear molds, repairs and related products (excluding batteries).

Laboratory Screening Tests Savings up to 70% All blood tests are offered at a savings of up to 70% off typical laboratory costs. The tests available are the same lab tests ordered by physicians, and are analyzed by the same CLIA certified, accredited clinical laboratories. Medicare and Medicaid have refused to pay for tests without symptoms of disease - which eliminates "Wellness" for most seniors.

Medical Radiology Services Savings up to 50% Deep discounts of up to 50% off are available to Members for MRI & CT Scan, and Diagnostic Testing.

Durable Medical Equipment

Receive discounts on Assistive Devices that aid in the essentials of daily living: Bathing, Dressing, Eating, Using the Toilet, Walking and Transferring into or out of a bed, chair, bathtub, car, etc.

Chiropractic Care Savings up to 20-30%

Members can access a nation-wide network of thousands of Chiropractors that will provide services at up to 20% to 30% savings. Office visits, x-rays, diagnostic services and spinal manipulations are included.

Diabetic Care Savings up to 30%

Members can save up to 30% on supplies and educational materials such as: Blood glucose monitors, test strips, lancets & lancing devices, diabetic medications, diabetes education & support. Members also have access to a knowledgeable team with a registered dietician on staff to advise and support.



Association Health Benefits



TelaDoc

A Powerful New Way to Save Time and Money on Doctor Visits.

\$35 per Doctor Service Call - One time \$15 Registration Fee 24 hours a day, 7 days a week, 365 days a year, you have instant access to board-eligible physicians that specialize in telemedicine. The doctor will perform a personal interview to evaluate your medical history and to diagnose your symptoms over the phone. The doctor will prescribe medications and call in prescription(s) to the member's pharmacy, if necessary.

WorldDoc

Can significantly reduce overall healthcare costs

WorldDoc offers on-line health decision support services that empower people to make better health care choices. For example, WorldDoc helps people decide what they may have and what they should do for medical problems like cough, red eye, high blood pressure, asthma, or knee pain. No other company offers comprehensive health decision support that answers people's questions. A team of board certified doctors in 20 specialties created WorldDoc. The medical information contained in WorldDoc covers over 90% of common medical conditions.

Only WorldDoc offers comprehensive health decision support services. WorldDoc is an interactive application, not static content, and uses technology to service a large number of subscribers at low cost.

24 Hour Nurse Hot Line

This service provides a toll-free number for instant access to a live health care professional for any health care information day or night. Members have unlimited access 24/7.

Alternative Medicine Savings up to 20-30%

at thousands of network locations, including acupressure, massage therapists, nutritional counselors, meditation and relaxation technique practitioners.

Podiatric Service Savings up to 50%

Over 10,000 Podiatrists across America are available to members offering savings of up to 50% on podiatry services. Treatment extends for conditions such as arthritis, diabetes, nerve and circulatory disorder.

For more Information contact:



A New Concept in Quality Health Care





Frequently Asked Questions & Answers

Q: Is this insurance?

A: You will receive insurance coverage, but this is not a traditional major medical policy. By becoming a member of NationalWay Healthcare Association, you receive both the network savings and the coverage of a basic medical insurance policy that pays according to a fee schedule on doctor visits, hospital stays, surgeries and more.

Q: Is NationalWay Healthcare an insurance company?

A: No. We are a not-for-profit member association dedicated to providing our members with information on health related issues. We have acquired and packaged service benefits, network savings and a basic medical insurance in order to provide our members with a low-cost alternative to traditional medical insurance and equip our members with a way to take control of their personal health management.

Q: How do I register?

A: We have worked diligently to ensure that the registration process is simple and efficient. There is a quick electronic registration used for all new members. The process takes only a few moments and you will not be asked any health questions.

Q: How long does my membership have to last?

A: One of the most powerful aspects of the NationalWay Healthcare plan is that you have no obligation so that you can remain in control of your personal health management. You will have no contract to sign or long-term responsibilities to the Association. All billing and memberships are handled on a month-to-month basis.

O: What procedures are covered by this plan?

A: The Association network price reductions apply to virtually every procedure performed by a doctor or nurse. The basic medical insurance pays according to the fee schedule on doctor visits, hospital stays, intensive care, inpatient/outpatient surgery and more.

Q: Do I have to go to your network providers?

A: No! One of the strongest features of the Secure BHP is that members can see the doctor or specialist of their choice. The basic medical insurance will pay toward your bill regardless of what doctor or hospital you go to. If you choose to go to a Network Provider (doctor or hospital) you will, in addition, receive the contracted association reductions to your bill. Our current network consists of tens of thousands of doctors and medical facilities all over the nation.

Q: How do I know if my doctor is in the network?

A: Remember, the insurance benefits in this plan pays directly to you or can be assigned to **any** doctor you choose. However, after you receive your cards, you can call member services for a complete listing of available network providers in your area. If for some reason your doctor is not part of the network already, you can nominate him/her to become contracted with the network for additional savings by calling member services.

Q: How much are my deductibles?

A: Remember that this is not a traditional major medical policy. You are not responsible for meeting a deductible with the basic medical insurance, because it pays an amount determined by the fee schedule regardless of your financial situation. The only portion of the program requiring a deductible is the Medical Accident Plan, and that is only \$50 to \$150, depending on the plan you choose.

Q: How do I know if I'm eligible for this plan?

A: Regardless of medical history, pre-existing conditions or choice of lifestyle, NationalWay Healthcare is proud to offer you membership in the program. No health questions are ever asked and all membership levels are Guaranteed Issue.

Q: When can I start using my benefits?

A: After your registration is complete, you will receive your Member Guidebook and insurance cards in approximately 2 weeks. You can begin using your benefits on the effective date assigned to you at the time of registration. The activation date will be on either the 1st or 15th of the following month.

Brief Coverage Description *



Physician Office Visit

The Carrier will pay the Benefit Amount as shown if you seek treatment for a covered illness or injury. The Carrier will also pay one (1) wellness visit per year in addition to the office visits. Emergency room visits also apply to this benefit.

Basic	Standard	Preferred	Premier	7)
\$50	\$60	\$75	\$100	
Per Office Visit up to 5 per year per person	Per Office Visit up to 5 per year per person	Per Office Visit up to 5 per year per person	Per Office Visit up to 5 per year per person	

Hospitalization Admission & Confinement

The carrier will pay the Benefit Amount shown if you are admitted to a hospital as a patient because of a covered sickness. You are allowed unlimited hospital stays per year, however, you will be limited to 30 total days per year including first day hospital stays.

Basic	Standard	Preferred	Premier
\$500 first day	\$500 first day	\$750 first day	\$1,250 first day
\$250 per day thereafter	\$500 per day thereafter	\$750 per day thereafter	\$1,000 per day thereafter

Diagnostic Testing & Lab

The Carrier will pay the Benefit Amount for all diagnostic testing (x-rays) and laboratory fees at the reimbursement rate shown. This benefit pays up to a limit of 3 per year.

Basic	Standard	Preferred	Premier
\$50	\$60	\$75 Per Office Visit up to 3 per year per person	\$100
Per Office Visit	Per Office Visit		Per Office Visit
up to 3 per	up to 3 per		up to 3 per
year per person	year per person		year per person

Surgical Benefit

The Carrier will pay the Benefit Amount (limited to 30 RVU units) for required surgery because of a covered procedure. The surgery can be performed on an in-patient basis. Reimbursements are based on the 2000 National Physicians Fee Schedule of Relative Value Unit schedule.

Basic	Standard	Preferred	Premier
\$50 x	\$100 x	\$200 x	\$300 x
RVU (30 Max)	RVU (30 Max)	RVU (30 Max)	RVU (30 Max)
\$1,500 мах	\$3,000 Max	\$6,000 Max	\$9,000 Max

Accident Rider

The Carrier will pay the Benefit Amount as shown per covered accident. There is only one accident allowed per covered person per year. This benefit pays a portion of the medical costs resulting from injury. The costs must be incurred within 90 days of the injury.

Basic	Standard	Preferred	Premier
\$1,000 Per accident \$50	\$1,000 Per accident \$50	\$2,500 Per accident \$100	\$5,000 Per accident \$150
deductible	deductible	deductible	deductible

Substance Abuse & Mental Illness

The Carrier will pay for 24-hour availability with face-toface visits with a counselor for both Substance Abuse and Mental Illness. If a referral to a facility is warranted by a counselor, that person will be referred to a facility contracted at a repriced rate.

Basic	Standard	Preferred	Premier
3 Office Visits annually per person	3 Office Visits annually per person	3 Office Visits annually per person	3 Office Visits annually per person

Term Life Insurance

This benefit pays a stated amount if an insured dies. The spouse death benefit is 50% of that for the primary insured child death benefit(s) are 50% of this amount.

Basic	Standard	Preferred	Premier
No Benefit	\$2,500 \$1,250 Spouse \$1,250 Per Child Per Insured	\$2,500 \$1,250 Spouse \$1,250 Per Child Per Insured	\$5,000 \$2,500 Spouse \$2,500 Per Child Per Insured

Accidental Death Benefit

This benefit pays a stated amount if the primary insured dies as the result of an injury.

E	Basic	Standard	Preferred	Premier	
	No Benefit	\$5,000 Per Insured	\$5,000 Per Insured	\$5,000 Per Insured	

This is a Limited Benefit Plan underwritten by the Chesapeake Life Insurance Company and may not cover all medical expenses for an illness or injury once the maximum plan payment limits per Covered Person, Per Calendar year are reached. Plans may not be available in all states. *Actual benefits are calculated and paid by the insurance company.

Low Cost Healthcare That Anyone Can Afford





Unique Plan Features

- ✓ Choose Any Doctor or Hospital
- ✓ No Required Networks
- Extra Savings When Network Providers are Utilized
- ✓ No Medical Underwriting or Health Questions Asked
- Everyone is Accepted
- ✓ Guaranteed Issue Regardless of Any Pre-Existing Health Condition
- √ 12/12 Pre-Existing Limitation
- ✓ No Co-Pays Except for Prescription Drugs
- ✓ Insurance Pays Benefits Directly to You or can be Assigned Directly to Health Providers
- ✓ Simple Web Registration

Plans may not be available in all states

Prescription Program

One of the fastest growing concerns for families is the rising cost of prescriptions drugs. NationalWay has designed its prescription program in a way that will make most generic prescriptions available to its members for \$15 dollar or less. One of the unique features of this program includes an online web tool that enables members to better understand their medications and manage their prescription needs. It also enables members to find the best price on prescriptions by shopping pharmacy prices.

Prescription Card

- \$15 Max Pay (Optional Benefit)
 Plans may not be available in all states
 \$15 Max-Pay Prescription Card (Generic)
- Members have a \$15 Max-Pay for most generic drugs which is honored at most pharmacies throughout the US.
- Includes most generic prescriptions. *
 - You pay \$15 or less per prescription
 - No Waiting Periods
 - 98% of all Pharmacies
 - 58,000 Locations

Benefit Features:

- Max-Pay R_X Card a "generic only" Max-Pay card.
- Members receive the same Max-Pay amount
- Max-Pay $R_{\rm x}$ is honored at over 98% of all pharmacies nationwide
- Retail Max-Payments of \$15.00 within the network for each 30 day supply of eligible generic drugs
- A covered member may purchase up to a 90 day supply, subject to one Max-Pay for each 30 days

Monthly Maximum Benefit

• \$150 per member and \$450 per family

Annual Maximum Benefit

• \$1,800 per member and \$5,400 per family

Neighborhood Pharmacy Savings

*Save up to 27% on name brand prescription drugs, and up to 60% on generic prescriptions. Plan is accepted by most local and chain pharmacies throughout the U.S. Members pay wholesale cost plus a small dispensing fee. 90-day supply mail order plans are available.



^{*}See membership guide for limitations & exclusions & schedule of benefits.



Choose the Plan That is Best for You







All monthly costs include the Basic Insurance benefits listed in the Secure BHP outline of coverage, plus the additional Association Health Benefits listed in this brochure.

Basic

Standard | |

Preferred

or

Premier `

THE SECURE RX PLAN

The Secure RX Plan is available only in approved states and is included in the Secure RX Health Benefits package. The plan is a fully insured prescription benefit that covers most generic medications. The member pays \$15 or less for his/her generic prescription.

Includes the \$15 Max-Pay Prescription Card

	Basic Plan	
Member \$161 a month	Member+1 \$223 a month	Family \$347
	Standard Plan	
Member \$211 a month	Member+1 \$323 a month	Family \$ 447 a month
	Preferred Plan	
Member \$241 a month	Member+1 \$403 a month	Family \$ 547 a month
	Premier Plan	
Member \$291	Member+1 \$ 493	Family \$ 677

THE SECURE EXPRESS PLAN

The Secure Express Plan is available in all states. The prescription plan is a discount plan that saves up to 27% on name brand prescriptions and up to 60% on generic prescriptions. The program also includes an online web tool that enables members to better understand their medications and manage their prescription needs.

	Basic Plan	
Member \$149	Member+1 \$199	Family \$299
	Standard Plan	
Member \$199	Member+1 \$299 a month	Family \$399
	Preferred Plan	1
Member \$229	Member+1 \$379 a month	Family \$ 499 a month
	Premier Plan	
Member \$279	Member+1 \$ 469	Family \$629

Registration \$ 45.00 11 to 50 Memberships **90.** 1 to 10 Memberships

\$ 20.00 51 or more Memberships

The one-time registration fee per Membership / Family. A membership is one person, Member + 1, or the entire family

Surgical Schedule - Partial List

Surgical Benefit Examples

The following shows surgical payment examples for some common surgical procedures.

	0DT 0 /	Basic	Standard	Preferred	Premier
Procedure	CPT Code				
Appendectomy	44960	\$537	\$1,074	\$2,148	\$3,222
Artery Bypass Graft	35651	\$1,252	\$2,504	\$5,008	\$7,512
Breast Reconstruction	19366	\$1,064	\$2,128	\$4,256	\$8,512
Carpal Tunnel Surgery	64721	\$215	\$429	\$858	\$1,287
Cesarean Delivery	59510	\$1,311	\$2,622	\$5,244	\$7,866
Circumcision	54161	\$164	\$327	\$654	\$1,308
Colonoscopy	45379	\$236	\$472	\$944	\$1,416
Elbow Arthroscopy/Surgery	29838	\$386	\$771	\$1,542	\$3,084
Hysterectomy	58267	\$750	\$1,500	\$3,000	\$4,500
Kidney endoscopy & treatment	50557	\$331	\$662	\$1,324	\$2,648
Knee Arthroscopy	29889	\$757	\$1,513	\$3,026	\$4,539
Neck/Spine Disk Surgery	63075	\$971	\$1,941	\$3,882	\$5,823
Obstetrical, Normal	59410	\$969	\$1,478	\$2,956	\$5,912
Reconstruction, Knee	27429	\$776	\$1,552	\$3,104	\$6,208
Removal of Breast	19180	\$440	\$880	\$1,760	\$3,520
Repair Achilles Tendon	27650	\$485	\$969	\$1,938	\$3,876
Repair Heart Septum Defects	33647	\$1,437	\$2,873	\$5,746	\$8,619

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