



# HealthMAP

MEDICAL ASSET PROTECTION



## HealthMAP – A Supplemental Health Insurance Plan

- Reduce employee out-of-pocket medical costs
- Traditional and HSA-compatible options
- Simple to understand and easy to implement



Underwritten by Madison National Life Insurance Company, Inc., a Wisconsin insurance company.

Brochure HealthMAP 0716

# HealthMAP

As the cost to access and utilize health insurance continues to increase, employers and employees are looking for solutions.

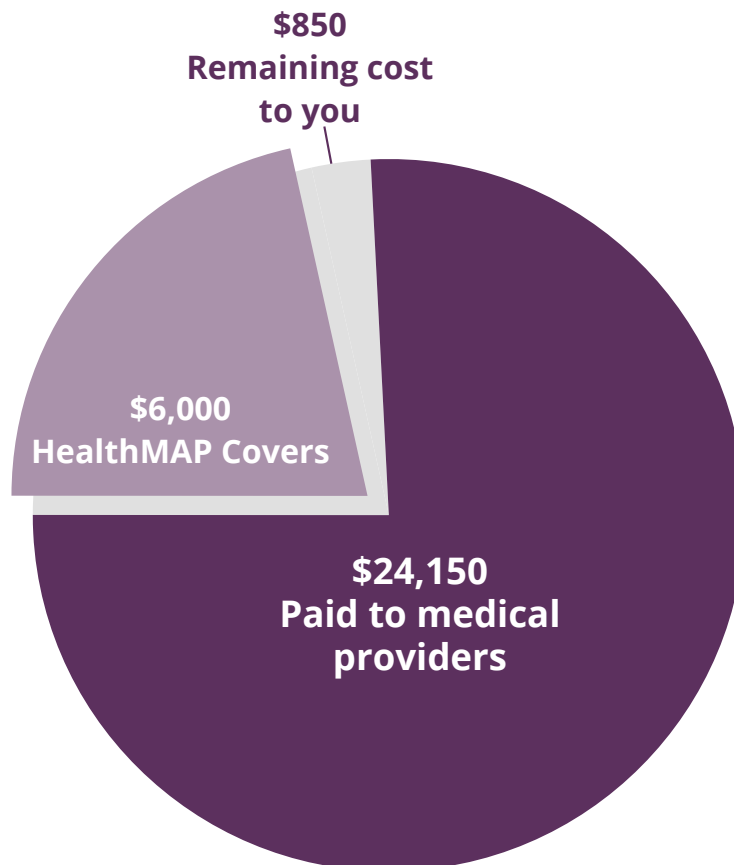
Medical expenses are continuing to increase for both employers and employees, and “supplemental” or “secondary” products are becoming increasingly more important. These plans cover out-of-pocket expenses related to deductibles, copays, and coinsurance, and they help employees with the burden of their underlying Affordable Care Act (ACA)-qualified major medical plan’s high out-of-pocket limits.

HealthMAP is designed to work in tandem with a group ACA-qualified major medical plan. It helps to strengthen the group’s employee benefit package while also helping to manage the ever increasing cost of providing benefits to employees.

## Consider the following example:

An employee has an appendectomy that results in \$31,000 of covered inpatient expenses. The group major medical plan has a \$4,000 deductible and a \$6,850 maximum out-of-pocket.

- \$4,000 applied to deductible
  - \$2,850 applied to coinsurance
  - \$24,150 paid to medical providers
- } **\$6,850** maximum out-of-pocket



# HealthMAP Plan Highlights

Select from numerous benefit options that will complement the group major medical deductible and coinsurance out-of-pocket limits.

## Inpatient Amounts

- \$2,000
- \$2,500
- \$3,000
- \$4,000
- \$5,000
- \$6,000
- \$6,350
- \$6,850

Up to 10,000

## Outpatient Amounts

- \$500
- \$1,000
- \$1,400
- \$1,800
- \$2,200
- \$2,500
- \$3,000
- \$3,500

Up to 4,000

## GAP Deductibles

- \$250
- \$500
- \$750
- \$1,000
- \$1,300
- \$1,500
- \$2,000
- \$2,500

Up to 3,000

## Plan Features

- Employer paid or voluntary
- Self-funded and HSA-compatible
- No claim form required
- Electronic claims filing
- Claims paid to providers
- HR/benefit management technology
- Optional coverage for mental health
- Annual coinsurance available
- Composite rates for groups with 20+ enrolled

# HealthMAP HSA Plans

If your group major medical coverage includes a high-deductible plan qualified for use with a health savings account (HSA), then consider one of the following options.

## Sample HSA-Compatible Plan Design

- Deductibles: \$1,300 inpatient and \$1,300 outpatient
- Coinsurance: 100%
- Inpatient maximum benefit: \$6,500
- Outpatient maximum benefit: \$3,500

## Sample HSA-Compatible Plan Design

- Deductibles: \$1,500 inpatient and \$1,500 outpatient
- Coinsurance: 70%
- Inpatient maximum benefit: \$4,000
- Outpatient maximum benefit: \$3,000

## Sample HSA-Compatible Plan Design

- Deductibles: \$1,500 inpatient and \$1,500 outpatient
- Coinsurance: 100%
- Inpatient maximum benefit: \$6,000
- Outpatient maximum benefit: \$3,500

## Sample HSA-Compatible Plan Design

- Deductibles: \$1,300 inpatient and \$1,300 outpatient
- Coinsurance: 50%
- Inpatient maximum benefit: \$3,000
- Outpatient maximum benefit: \$2,500

\* Additional benefit options are available; please contact your HealthMAP representative for complete plan details.

## Covered Expenses

**Medical treatment, services or supplies must be covered by the major medical plan in order to be considered a covered expense by the HealthMAP plan.** Items specifically excluded by this policy or the major medical plan will not be considered covered charges. All benefits are subject to satisfaction of the deductible, if applicable, and limited to the coinsurance percentage and maximum benefit amount. The HealthMAP plan is not designed to pay 100 percent of all out-of-pocket costs. Covered expenses include:

- Surgeries
- Emergency Room (Accident or Sickness)
- Urgent Care Treatment
- X-rays
- Durable Medical Equipment
- Lab Tests
- MRIs
- Ambulance
- Physical Therapy
- Chemo/Radiation

## Exclusions

Expenses excluded under the insured person's ACA-qualified major medical plan; professional fee of a Physician (office visit charge); benefits provided under: (a) Medicare or other governmental program, except Medicaid; (b) state or federal worker's compensation; or (c) employer's liability or occupational disease law. inpatient or outpatient mental illness or substance use disorders treatment; service in the armed forces or units auxiliary to it; services rendered by employees of hospitals, laboratories or other institutions; services performed by a member of the insured person's immediate family; services for which no charge is normally made in the absence of insurance or charges for preventive care not subject to cost-sharing; war or act of war, whether declared or undeclared; Illegal activities, limited to losses related directly to the insured's voluntary participation; alcoholism and drug addictions; intoxication or under the influence of illegal drugs; voluntary abortion; except if the life of the mother would be in danger if the fetus were carried to term, or for complications of a voluntary abortion; counseling and therapy services unless specifically covered; acupuncture; paring or removal of corns, calluses, bunions or toenails (other than partial or complete removal of nail roots); participation in a contest of speed or any hazardous sports activity for exhibition purposes; custodial care; hospice or home health care; pregnancy except complications of pregnancy; territorial limitations outside the United States; dental or vision care or treatment unless a result of an injury or congenital disease or anomaly of a dependent newborn child; administrative charges for completing insurance forms, duplication services, interest, finance charges, or other administrative charges, unless otherwise required by law; and outpatient prescription medications.

## **Eligibility**

### **Employer groups**

A business with at least two full-time employees is eligible for a HealthMAP plan. Groups with less than 10 eligible employees must have 100 percent participation. The group must have an ACA-qualified major medical plan. Employees not covered by the group ACA-qualified plan are not eligible for the HealthMAP plan. The ACA-qualified major medical plan (health benefit plan) may be any comprehensive plan, including self-funded plans. A limited-benefit program, Medicare, Medicaid, CHAMPUS or TRICARE is not compatible with a HealthMAP plan.

### **Employees**

An adult employee must be 18-99 years old and considered a full-time employee by the employer to be eligible for the HealthMAP plan. The employee must be covered by the group's major medical plan.

### **Dependents**

A spouse under the age of 99 and dependent children under age 26 are eligible for coverage. Eligible dependents must be covered under the same ACA-qualified group major medical plan as the eligible employee.

## **Enrollment**

### **Open enrollment**

After initial enrollment, employees or dependents may enroll for coverage or change benefit options only during the annual time period determined by the plan's effective date.

### **Special enrollee**

An employee or dependent may enroll for HealthMAP coverage if he/she did not enroll when first eligible because of major medical coverage under another health insurance policy but has since lost coverage due to: dependent termination of employment or eligibility; termination of the other policy's coverage; death of a spouse; legal separation or divorce; or termination of the employer's contribution toward coverage. Also, a special enrollment period is available when a person becomes a spouse or dependent of the employee through marriage, birth, adoption or placement for adoption. Application for coverage must take place within 31 days of the loss of coverage or family event.

### **Late enrollee**

If an employee or dependent does not enroll for coverage when first eligible and cannot be considered a special enrollee, he/she must wait until the following open enrollment period. A 30-day waiting period will apply for before inpatient benefits are available.

## **Claims payment**

The plan administrator will utilize an Explanation of Benefits (EOB) from the major medical insurance carrier to determine benefits covered under your HealthMAP plan.

### **About Tandem Medical Solutions**

With over 100 years of combined experience, Tandem Medical Solutions has the knowledge, connections, adaptability and focus to bring new products into the marketplace. We are committed to providing high quality supplemental health products to our distribution partners. Our suite of products exists to provide the latest and most innovative solutions designed to reduce employer's costs and employee's out of pocket expenses. For more information and a complete list of products, please visit [www.tandemmedicalsolutions.com](http://www.tandemmedicalsolutions.com) or call 800-849-5542.

### **About Madison National Life Insurance Company, Inc.**

Madison National Life Insurance Company, Inc. was founded in 1961 and is domiciled in Wisconsin and licensed to sell insurance products in 49 states, the District of Columbia, Guam, American Samoa and the U.S. Virgin Islands. Its core products and services are group life and disability income and specialty health insurance. It is rated A- (Excellent) for financial strength by A.M. Best Company, a widely recognized rating agency that rates insurance companies on their relative financial strength and ability to meet policyholder obligations (an A++ rating from A.M. Best is its highest rating).

### **Important Information**

This brochure provides a brief description of the benefits, exclusions and other provisions of the Certificate of Coverage (form MNL LSME CERT 1215 – may vary by state). For complete listings, see the Certificate of Coverage.

This is a limited supplemental medical expense policy that is not intended to qualify as Minimal Essential Coverage as required by the Affordable Care Act (ACA). This is not an ACA-qualified major medical expense policy. This policy is not intended to cover all medical expenses.

