

Schedule of Benefits

Plan for Class 1

Hospital Confinement

\$500/day confined;
up to 100 days/Plan Year

ICU

Additional \$500/day confined;
up to 30 days/Plan Year

Mental Nervous or
Substance Abuse

\$250/day confined;
up to 30 days/Plan Year

Skilled Nursing
Facility

\$250/day confined;
up to 60 days/Plan Year

Other Plan Features

- 6 month pre-ex on hospital & surgery benefits only
- Plans are compliant with HIPAA privacy regulations and are not subject to creditable coverage certificate requirements
- Guaranteed issue coverage with no medical evidence required
- COBRA benefits administered by AGU

Surgery

Inpatient

\$2,000 for 1/Plan Year

Outpatient

\$800 for 1/Plan Year

ER (Injury or Sickness)

\$300/visit; 1 each/Plan Year

Voluntary Monthly Rates

Participant pays 100% of the premium

Attained Age	Participant / Spouse	<u>1 Child</u>	<u>2+ Children</u>
0-25	\$ 39.00	\$25.00	\$63.00
26-35	\$ 43.00		
36-45	\$ 57.00		
46-55	\$ 76.00		
56-64	\$124.00		
65+	\$210.00		

For dependent only groups, the 36-45 age band may be used for adult rates.