



TrioMED

A plan for unexpected out-of-pocket costs associated with accidents, critical illnesses and accidental death

National General Accident and Health markets products underwritten and issued by National Health Insurance Company, Time Insurance Company, Integon National Insurance Company, and Integon Indemnity Corporation.

NGAH-TRIOMEDBRO

National General 
Accident & Health

Cover what matters most

Get three types of coverage in one plan

TrioMED provides benefits that help cover out-of-pocket costs associated with the things in life you can't plan for, like accidents, critical-illness diagnoses, and accidental death.

It helps you get well without worrying about medical bills piling up.

Choose one of three available, guaranteed-issue benefit levels: \$2,500; \$5,000 and \$10,000



- Get coverage for accident-related health care costs with Accident Medical Expense
- Receive lump-sum, cash benefits to help you pay for treatment after a covered, first critical-illness diagnosis.
- Stay prepared with accidental death benefits



THIS PLAN PROVIDES LIMITED BENEFITS.



Accident Medical Expense

Accident Medical Expense gives you the coverage you need to help pay the high out-of-pocket costs following an accident

Accident Medical Expense (AME) has a \$250 deductible. Following a covered accidental injury, this plan will help you cover accident-related medical expenses up to the benefit amount you choose.

ACCIDENT MEDICAL EXPENSE ADVANTAGES

- Helps you pay costs not covered by other insurance
- No limit on the number of covered accidents
- Benefits work to compliment your existing health coverage

¹ Average cost of a fractured hip according to the National Center for Biotechnology Information. Retrieved April 17, 2015, from www.ncbi.nlm.nih.gov/pubmed/23035626

How does Accident Medical Expense work? Let's do some math

The average cost of a fractured hip is \$12,923.¹ Now, let's assume you chose a \$5,000 benefit level, and have a primary medical plan with a \$5,000 deductible.

TREATMENT COST	\$12,923
PRIMARY MEDICAL PLAN DEDUCTIBLE	\$5,000
TRIOMED PAID	\$4,750
AME DEDUCTIBLE	\$250



In this example, TrioMED would pay 95% of your primary medical plan's deductible

Critical Illness coverage



TrioMED has you covered here, too

In the event of the first diagnosis of a critical illness, TrioMED will provide a lump-sum, cash benefit to help you pay your out-of-pocket expenses up to the benefit level you choose. If your medical bill is less than your chosen benefit level, you can use the leftover funds in any way you like.

This plan pays benefits for the first diagnosis of covered illnesses in three categories.² It pays one cash benefit per category, with three lump-sum payments available.

CRITICAL ILLNESS COVERAGE DETAILS

- Pays lump-sum benefit upon the first diagnosis of a covered critical illness
- No deductible to satisfy
- No network restrictions
- Amount payable of primary maximum benefit is 50% for a spouse and 25% for a child

² An insured person will only be allowed one payout per category

³ If any of the insureds are diagnosed with invasive cancer within the first 90 days of the policy effective date, the benefit amount is reduced to 10% of the maximum allowed benefit

⁴ If any of the insureds are diagnosed with cancer in situ within the first 90 days of the policy effective date, the benefit amount is reduced to 10% of the maximum allowed benefit

The maximum allowed benefit amount reduces by 50% at age 65 and coverage terminates at age 70.

COVERED EVENT	PERCENTAGE OF BENEFIT LEVEL
CATEGORY ONE	
Heart attack	100%
Stroke	100%
Major organ transplant (heart or combination transplant including heart)	100%
Coronary bypass surgery	25%
Heart valve replacement or repair surgery	25%
CATEGORY TWO	
Invasive cancer after 90 days ³	100%
Cancer in Situ after 90 days ⁴	25%
CATEGORY THREE	
End stage renal failure	100%
Major organ transplant (excluding those covered in Category One)	100%
Advanced Alzheimer's Disease	100%
Coma	100%
Motor Neuron Disease / ALS	100%
Paralysis	100%
Severe burns	100%



Accidental death and dismemberment

TrioMED helps you stay prepared

No one wants to think about the worst actually happening. But if it does, you want to make sure that you and the ones you love have the financial coverage needed to pay medical expenses.

In the unfortunate event that an insured person suffers a dismembered limb or passes away due to a covered accident, TrioMED will pay the elected benefit amount based on the schedule of benefits.⁵



ACCIDENTAL DEATH AND DISMEMBERMENT FEATURES

- Provides a benefit payout (percentage of the face amount) in the event of Accidental Dismemberment⁶
- Provides a benefit payout for a death resulting directly from a covered accidental injury
- Lump-sum benefit not restricted to medical expenses — use it for a wide variety of out-of-pocket costs

⁵ The benefit payout for a death resulting directly from a covered accidental injury, independent of any other causes, is subject to the schedule of benefits (100% benefit to the insured; 100% benefit to a covered spouse; 50% benefit to any covered children) and the death must occur within 30 days of the covered accident. The claim must be submitted within 180 days of the covered accident. The benefit amount is paid to the listed beneficiary.

⁶ The benefit amount for covered injuries will be a percentage (ranging from 25%-100%), depending on the specific injury.

L.I.F.E. membership benefits

This plan includes a membership with L.I.F.E. Association. L.I.F.E. Association is a non-profit, members-only organization which provides lifestyle-related benefits and discounts to its members.*

Your L.I.F.E. Membership can get you convenient services and discounts on:



Automobiles



Member travel advantages



ID-theft program



Fitness programs



Telemedicine services – unlimited consults at no extra cost



* Association benefits increase when you purchase this plan with a National General Accident & Health Short Term Medical plan.

Lifestyle and wellness benefits and discounts are not insurance. Your agent and National General Insurance may receive financial compensation in connection with membership fees.

Limitations and Exclusions

ACCIDENT MEDICAL EXPENSE

The Policy does not cover any loss caused in whole or in part by, or resulting in whole or in part from, the following:

- Intentionally self-inflicted Injury, suicide or any attempt thereof while sane or insane;
- Committing or attempting to commit a felony or civil insurrection or while involved in an illegal occupation;
- Acts of war, whether declared or not;
- Traveling by air, except as a fare-paying passenger and not as a pilot or crew member, on a regularly scheduled commercial airline, unless specifically provided in the Certificate;
- Injuries covered by Worker's Compensation, Employer Liability Law, or Occupational Disease Act or Law;
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state or jurisdiction in which the loss occurs;
- Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Physician;
- While a Covered Person is on active duty service in any armed forces. Reserve or National Guard active duty for training is to the extent it extends beyond 31 days;
- While flying in an ultra-light plane, hang gliding, parachuting or bungee jumping, by flight in a space craft or any craft designed for navigation above or beyond the earth's atmosphere;
- While driving or riding on vehicles for off-road use including but not limited to all-terrain vehicles (ATVs);
- Injuries sustained where a Covered Person is the operator of a motor vehicle and does not possess a current and valid motor vehicle operator's license;
- Competing in motor sports races or competitions;
- Testing cars or trucks on any racetrack or speedway;
- Handling, storing or transporting explosives;
- Participating in a rodeo; or
- Illness or disease, regardless of how contracted; medical or surgical treatment of illness or disease; or complications following the surgical treatment of illness or disease; except bacterial infection due to an accidental cut or wound, botulism or ptomaine poisoning.

- With respect to any period of time a Covered Person is traveling on an air conveyance, this coverage applies only with respect to Covered Injuries sustained by the person:
 - » While riding as a Passenger in or on (including getting in or out of, or on or off of);
 - » Any scheduled commercial airline;
 - » Any military air transport aircraft

For the Accident Medical Benefit only, the Policy does not cover any loss caused in whole or in part by, or resulting in whole or in part from, the following:

- Intentionally self-inflicted Injury, suicide or any attempt thereof while sane or insane;
- Committing or attempting to commit a felony or civil insurrection or while involved in an illegal occupation;
- Acts of war, whether declared or not;
- Treatment by persons employed or retained by the Policyholder, or by any Immediate Family Member or member of the Covered Person's household;
- Treatment of hernia, Osgood-Schlatter's Disease, osteochondritis, appendicitis, osteomyelitis, cardiac disease or conditions, Pathological Fractures, congenital weakness, detached retina unless caused by a Covered Injury or Mental Disorder or psychological or psychiatric care/ counseling or treatment (except as provided in the Policy), whether or not caused by a Covered Accident;
- Pregnancy, childbirth, miscarriage, abortion or any complication of childbirth, miscarriage or abortion unless due to a Covered Injury;
- Mental and Nervous Disorder (except as provided in the Policy);
- Charges incurred for treatment of temporomandibular or craniomandibular joint dysfunction and associated myofascial pain (except as provided by the Policy);
- Charges for injuries caused while riding in or on, entering into or alighting from, or being struck by a 2 or 3-wheeled motor vehicle or a motor vehicle not designed primarily for use on public streets or highways;
- Participation in or practice for interscholastic tackle football, intercollegiate sports, semiprofessional sports or professional sports (unless specifically covered under the Policy);
- Charges for which the Covered Person would not be responsible for in the absence of the Policy, except for Medicaid;
- Conditions that are not caused by a Covered Accident;
- Any elective treatment, surgery, health treatment or examination, (including any service, treatment or supplies);

- Charges payable by any automobile insurance Policy without regard to fault (This exclusion does not apply in any state where prohibited);
- Treatment of injuries that result over a period of time (such as blisters, tennis elbow, etc.);
- Blood, blood plasma or blood storage except charges by a Hospital for processing or administration of blood;
- Cosmetic, plastic or restorative surgery except needed as a result of the Covered Injury;
- Any treatment, service or supply not specifically covered by the Policy;
- Personal comfort or convenience items, such as but not limited to Hospital telephone charges, television rental or guest meals;
- Routine physical examinations and related medical services, elective treatment or surgery or investigative treatments of procedures;
- A Medical Repatriation;
- Charges for rest cures or custodial care;
- Treatment in any Veteran's Administration, Federal or state facility, unless there is a legal obligation to pay; or
- Services or treatment provided by an infirmary operated by the Policyholder

CRITICAL ILLNESS

We will not pay the Benefit Amount for a Covered Condition if such Covered Condition is caused by, occurs during or results from:

- Intentional and self-inflicted injuries;
- Suicide or any attempt at suicide, while sane or insane;
- Participation in the commission or attempted commission of a felony;
- Participation in a riot or insurrection;
- Alcoholism or drug addiction, or;
- Being intoxicated or under the influence of alcohol, drugs, or any narcotic (including overdose) unless administered on the advice of a Physician and taken according to the Physician's instructions. The term "intoxicated" refers to that condition as defined by law and decisions of the jurisdiction in which the accident, cause of loss or loss has occurred.

We will not pay the Benefit Amount for a Covered Condition if:

- Such Covered Condition is not covered under the Policy;
- Such Covered Condition first occurred while the Policy was not in force;
- Such Covered Condition was diagnosed by a person who is not a Physician;

Limitations and Exclusions, cont.

- Such Covered Condition was diagnosed outside the United States, unless the Diagnosis is confirmed in the United States;
- Such Covered Condition or surgical procedure was performed outside the United States, unless on a United States military base or facility, or within another U.S. military or government building or facility; or
- The Covered Person's date of birth, age or sex was misstated on the Application and at the correct date of birth, age or sex, the Certificate or coverage under the Policy would not have become effective or would have terminated.

This brochure provides a summary of benefits, limitations and exclusions. In certain states, an outline of coverage is available from the agent or the insurer. Please refer to the outline of coverage for a description of the important features of the health benefit plan. Please read the coverage documents carefully for a complete listing of benefits, limitations and exclusions. Benefits vary by state.

Coverage is renewable to age 65 (for Accident Medical Expense) or age 70 (for Critical Illness coverage) provided there is compliance with plan provisions, including dependent eligibility requirements.

We have the right to change premium rates upon providing appropriate notice.

Accident Medical Expense plans are designed to provide extra benefits in the event of an accident and do not provide comprehensive health (major medical) insurance or satisfy the government's requirements for minimum essential coverage.

Insurance benefit payments are subject to definitions, limitations, exclusions and other provisions within the Certificate(s). May not be available in all states. Based on the state of issue, the policy will be underwritten by National Health Insurance Company, Integon National Insurance Company or Integon Indemnity Corporation. Applications issued between the 26th through the 9th will have a 15th effective date. Applications issued between the 10th through the 25th will have a 1st effective date. For full details, limitations, exclusions, age limits, state availability, and definitions please refer to your benefit policy package or contact your Insurance Agent.



National General Holdings Corp. (NGHC) is a publicly traded company with approximately \$2.5 billion in annual revenue. The companies held by NGHC provide personal and commercial automobile insurance, recreational vehicle and motorcycle insurance, homeowner and flood insurance, self-funded business products, life, supplemental health insurance products, Short Term Medical, and other niche insurance products.

National General Accident & Health, a division of NGHC, is focused on providing supplemental and short-term coverage options to individuals, associations and groups. Products are underwritten by Time Insurance Company (est. in 1892), National Health Insurance Company (incorporated in 1965), Integon National Insurance Company (incorporated in 1987) and Integon Indemnity Corporation (incorporated in 1946). These four companies, together, are authorized to provide health insurance in all 50 states and the District of Columbia. National Health Insurance Company, Integon National Insurance Company and Integon Indemnity Corporation have been rated as A- (Excellent) by A.M. Best. Each underwriting company is financially responsible for its respective products.