

What services are not covered?

- Any services that are not medically necessary
- Eye exams, eyeglasses, hearing aids and surgery
- Dental or orthodontic services
- Treatment of feet conditions
- Conditions resulting from an act of war, suicide attempt or high-risk sports
- Maternity and newborn treatment prior to discharge, any infertility treatments or sterilization treatments
- Spinal manipulation or adjustment
- Services performed by family members or for which a charge would otherwise not be insured
- Medical care received outside of the United States
- Services payable by Medicare or Worker's Compensation coverage
- Cosmetic surgery
- Transplant services to the transplant donor
- Routine physical exams and tests, preventive care and immunizations unless specifically covered
- Experimental or investigational services
- Learning disorders, attention deficit disorder, hyperactivity or autism
- Mental or nervous disorders, depression or suicide attempt
- Alcohol or drug dependency and disorders
- Obesity treatments
- Sleep disorders
- Over-the-counter medications
- Prescription drugs (Discounts available for outpatient prescription drugs through the CFA STM Enhancement Series)
- Participation in school or organized competitive sports or any high risk sport
- Certain surgeries during the first six months

The limitations and exclusions may vary by state. Please see the policy for detailed information about these and other plan limitations and exclusions.

What is the STM Enhancement Series discount program?

Included with your purchase of TempMed is Communicating for America's (CFA) STM Enhancement Series*, which provides members with discounts for the following services and/or purchases:

- Prescription drugs - up to 40% off on generic or name-brand drugs at over 55,000 pharmacies nationwide;
- Vision eyewear care - up to 60% off eyeglasses, contact lenses and non-prescription sunglasses through a network of more than 10,000 retail optical locations, including Pearle Vision, JC Penney's, Wal-Mart and Lens Crafters;
- Dental services - save an average of 28% and up to 50% on dental expenses from 53,000 dentists in Aetna Dental Access**;
- Chiropractic services - 30%-50% off at more than 3,000 private chiropractors;
- Nurse-on-call - access to a registered nurse 24 hours a day, seven days a week;
- Vitamins, herbs and nutritional supplements - 10% off already low prices;
- Low rate home mortgages - up to \$500 credit at closing, competitive interest rates, and extended lock rate option;
- Low rate student loans - Federal Stafford and alternative loan options at some of the lowest rates in the industry.

*The Communicating for America (CFA) STM Enhancement Series is not an insurance benefit, nor is it affiliated with Standard Security Life Insurance Company of New York or a part of the STM insurance plan.

**Anticipated national average dental charges for the 2004 calendar year based on the comparison of provider negotiated fees to national average charges. The actual costs and savings vary by geographical area according to Aetna Provider Database as of 7/1/04.



Insured by Standard Security Life Insurance Company of New York

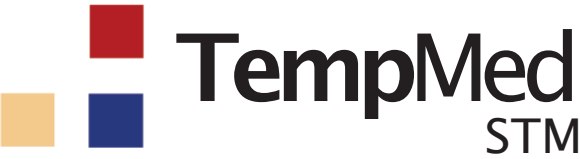
Administered by Health Plan Administrators, Inc.

Marketed by Insurers Administrative Corporation

800-IAC-0843

www.iacusa.com

This brochure provides a brief description of the benefits, exclusions and other provisions of the policy Form SSL-STMP-1104. For complete listing, see the Policy/Certificate of Insurance. Benefits may vary by state. TempMed STM is not available in all states. Association membership may be required in some jurisdictions.



*Short Term Major Medical Insurance
for Individuals and Families*

Special features

- Coverage for 1-6 or 12 months
- Single payment discount
- Unlimited re-applies
- Freedom to choose any doctor or hospital
- \$2 million maximum per covered person
- Includes an ancillary benefits discount program

Perfect for:

- Those between health insurance plans
- College students and graduates
- Part-time or temporary employees
- Those unemployed or laid-off



What is TempMed?

Just because you don't have health insurance right now doesn't mean you won't have health problems. TempMed allows you and your family to purchase affordable major medical coverage for physician services, surgery, outpatient and inpatient care for a temporary, short-term period.

Who qualifies for TempMed?

TempMed is available to you, your spouse through the age of 64 years old, and dependent children under age 19 (or under 25 if a full-time student) who can answer "No" to seven health questions on the application. Children age 19 and over should apply separately. Child-only coverage is available for ages 2 through 18 (See the TempMed rate chart for instructions).

Is there a satisfaction guarantee?

Yes, if you have not filed a claim, you may return the Certificate of Insurance for any reason within 10 days and receive a premium refund, minus any non-refundable administrative fees.

How does the plan work?

TempMed pays benefits for **each covered person** in the following manner:

- 1 You are responsible for eligible expenses until the deductible is satisfied. Choose from four options: \$250, \$500, \$1,000, or \$2,500. (Maximum 3 deductibles per family)
- 2 TempMed then pays 80% or 50% of the next \$5,000 of covered expenses.
- 3 After this, TempMed pays 100% of covered expenses up to your maximum of \$2 million.



What medical expenses are covered?

After you've met your selected deductible amount, TempMed will pay the coinsurance you selected for eligible expenses, up to a maximum of \$2 million per insured person per coverage period.*

Benefits are limited to the usual, reasonable, and customary charge for a covered expense in addition to any specific limits.

- Physician Services** for treatment and diagnosis
- Mammography, pap smear and screens**
- Outpatient Hospital or Ambulatory Surgical Center Charges**
- Hospital Charges** for average semi-private room rate, medical care and treatment
- Intensive Care** up to 3 times the average semi-private room rate
- Surgeon Services** in the hospital or ambulatory surgical center
- Assistant Surgeon Services** up to 20% of the surgeon's benefits
- Anesthesia Services:** up to 20% of the surgeon's benefits
- X-ray Exams, Laboratory Tests and Analysis**
- X-ray and Radioactive** isotope therapy, anesthesia, oxygen, casts, splints, crutches, braces, surgical dressings, artificial limbs or eyes, rental of medical supplies
- Blood** or blood derivatives and their administration
- Organ Transplants:** \$150,000 lifetime maximum
- Acquired Immune Deficiency Syndrome (AIDS):** \$10,000 lifetime maximum
- Ambulance services** \$250 per emergency

*Benefits for gallbladder surgery are limited to a \$2,500 lifetime maximum per insured person. Benefits for injury or disorders of the knees are limited to a \$2,500 lifetime maximum per insured person. Benefits may vary by state. Please refer to your coverage document for specific terms and conditions.

When does my coverage start?

Coverage begins as early as the day following the U.S. postmark on your envelope or on the day following an application received via the internet. You can request a later effective date, but no more than 60 days after the application date. All coverage is subject to approval of your application and payment of the first premium.

How long will coverage last?

TempMed is specifically designed to fill temporary insurance needs and coverage stops at the end of the period applied for. You may select a coverage period from 30 to 180 days or 1 to 12 months. *(The 12 month coverage option is not available in all states. In those states, 6 months is the maximum coverage period allowed.)*

What are my payment options?

You can pay for coverage in **monthly** payments for up to 6 or 12 months at a time.* We accept monthly payments by check, money order, credit card or automatic bank withdrawal. If you select the monthly pay option, and your need for insurance ends before your coverage period ends, you can stop your coverage by not making any further monthly payments.

A **single** payment option is ideal if you know the exact number of day's coverage is needed. This option has a special reduced rate and you only pay for the coverage you need in one single payment, from a minimum of 30 days to a maximum of 180 days of coverage.

Do I need precertification?

Pre-admission certification is required prior to an inpatient hospitalization or surgery by the covered individual within 48 hours. This is not a guarantee of benefits. Failure to precertify will result in a benefit reduction of 50 percent. Call 1-800-367-9938 for precertification.

What is a usual, reasonable, and customary charge?

A usual, reasonable, and customary charge is the fee typically charged by physicians or suppliers of medical services, medicines and supplies within a specific area.

Is there a pre-existing condition limitation?

Pre-existing conditions are not covered. This includes any conditions or complications that were treated or produced symptoms five years prior to your TempMed effective date. The pre-existing condition limitation may vary by state.

Can I continue coverage?

Coverage is not renewable. However, you can apply for another TempMed plan at the end of your initial coverage. Your application is subject to eligibility, underwriting requirements and state availability of the plan. Any condition incurred during the last coverage period will be excluded as a pre-existing condition.

When does coverage terminate?

Coverage ends when the premium is not paid when due; you enter full-time active duty in the Armed Forces; you become eligible for Medicare; the elected coverage period expires; Standard Security Life Insurance Co. determines fraud or misrepresentation has been made in filing a claim for benefits; a dependent ceases to be eligible; you cease to be a member of the association*; or the group master policy terminates.

*This applies in states where association membership is required.