National General
Accident & Health

PENNSYLVANIA

Medicare Supplement Insurance

THIS PLAN PROVIDES LIMITED BENEFITS. THIS IS A LIMITED POLICY DESIGNED TO COVER ONLY THOSE EXPENSES WHICH MEDICARE APPROVES BUT DOES NOT COVER.

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

Neither National General nor its agents are connected with or endorsed by the United States government or the federal Medicare program.

When the going gets tough, this plan keeps you going

Protect your savings

Use our Medicare Supplement Insurance to help you manage your budget and your health care expenses. Unexpected medical costs can put a strain on your savings. But, a Medicare Supplemental plan offers you protection against out-of-pocket costs — for the expenses Medicare Parts A and B may not cover.

Customer service you can count on

- Get in touch with real people who are ready to listen and help.
- Personalized service and advice from industry professionals.
- Our dedicated team responds quickly to give you the best experience possible.

Active&Fit Direct™

You can choose from 10,000+ fitness centers and 800+ on-demand workout videos to use at home or on the go. There's no long-term contract to sign and you can change fitness centers to make sure you find the right fit.[1]

Focus on getting well

You can recover with confidence knowing your savings are safe from the out-of-pocket costs that often come with unexpected medical care.

1 The Active&Fit Direct program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Active&Fit Direct is a trademark of ASH and used with permission herein. This is a discount program and is not insurance. The Active&Fit Direct program is separate from any Medicare Supplement Insurance plan benefits. Registration and membership pricing subject to change. Fees apply.

Select the plan that best fits your needs

We offer Medicare Supplement Insurance plans A, B, F, HDF, G and N

(continued on next page)

Medicare Part A Hospital Coverage						
Provided service:	**Medicare pays:**	**Medicare Supplement Insurance Plan A pays:**	**Medicare Supplement Insurance Plan B pays:**	**Medicare Supplement Insurance Plan F / High Deductible Plan F* pays:**	**Medicare Supplement Insurance Plan G pays:**	**Medicare Supplement Insurance Plan N pays:**
Medicare Part A deductible	With Medicare, you have a $1,556 deductible that must be paid before Medicare pays benefits	Nothing	$1,556	$1,556	$1,556	$1,556
First 60 days of hospital confinement[1]	100% after deductible	Nothing	$1,556	$1,556	$1,556	$1,556
Days 61-90 of hospital confinement[1]	All but $389 a day	$389 per day	$389 per day	$389 per day	$389 per day	$389 per day
Days 91-150 of hospital confinement[1] *(One-time benefit)*	All but $778 a day	$778 per day	$778 per day	$778 per day	$778 per day	$778 per day
Extended hospital coverage[1] *(Up to an additional 365 days in your lifetime)*	Nothing	100% Medicare-eligible expenses	100% Medicare-eligible expenses	100% Medicare-eligible expenses	100% Medicare-eligible expenses	100% Medicare-eligible expenses
Blood	All but first three pints	First three pints	First three pints	First three pints	First three pints	First three pints
Hospice Care[2]						
	All but limited coinsurance/copayments for outpatient drugs and inpatient respite care	Medicare coinsurance/copayment	Medicare coinsurance/copayment	Medicare coinsurance/copayment	Medicare coinsurance/copayment	Medicare coinsurance/copayment

1 Does not include Nursing Home stays.

2 Must meet Medicare requirements for admission.

Hospital means a Hospital that is approved or eligible to be approved to receive payments from Medicare and is accredited by the Joint Commission on Accreditation of Hospitals. Premium amounts may vary plan and benefit selection.

* Plan F also has a high deductible Plan F. The high deductible plan pays the same benefits as Plan F after the member has paid a $2,490 calendar year deductible. Benefits from a high deductible Plan F will not begin until out-of-pocket expenses exceed $2,490. These expenses include Medicare deductibles for Part A and Part B. If you are eligible for Medicare on, or after, January 1, 2020, you are not eligible for Plan F or High Deductible Plan F.

Provided service:	Medicare pays:	Medicare Supplement Insurance Plan A pays:	Medicare Supplement Insurance Plan B pays:	Medicare Supplement Insurance Plan F / High Deductible Plan F* pays:	Medicare Supplement Insurance Plan G pays:	Medicare Supplement Insurance Plan N pays:
Skilled Nursing Facility Care[2]						
First 20 days	100% of Medicare-approved amounts	Nothing	Nothing	Nothing	Nothing	Nothing
Days 21-100 of admission	All but $194.50 per day	Nothing	Nothing	$194.50 per day	$194.50 per day	$194.50 per day
Medicare Part B Outpatient Medical Coverage						
Medicare Part B deductible	With Medicare, you have a $233 deductible that must be paid before Medicare pays benefits	Nothing	Nothing	The $233 Medicare Part B deductible	Nothing	Nothing
Medicare Part B Co-Insurance	80% of the approved charges after deductible	20% of Medicare approved charges after deductible	20% of Medicare approved charges	20% of Medicare approved charges	20% of Medicare approved charges after deductible	Remaining balance after you pay $20 copayment for office visits, $50 copay for emergency room visit**
Excess Charges (*Charges above Medicare approved charges*)	Nothing	Nothing	Nothing	Plan pays 100% of charges not covered by Medicare	Plan pays 100% of charges not covered by Medicare	Nothing
Benefit for Blood	First three pints: $0 Additional pints: 80% coinsurance after you pay $233 deductible	First three pints: 100% Additional pints: 20% coinsurance after deductible	First three pints: 100% Additional pints: 20% coinsurance after deductible	First three pints: 100% Additional pints: 20% coinsurance after deductible	First three pints: 100% Additional pints: 20% coinsurance after deductible	First three pints: 100% Additional pints: 20% coinsurance after deductible
Home Health Care[2]						
Medically necessary Skilled Care services and medical supplies	Medicare pays 100%	Nothing	Nothing	Nothing	Nothing	Nothing
Durable Medical Equipment	80% coinsurance after you pay $233 Part B deductible	20% coinsurance of Medicare approved charges after deductible	The $233 Part B deductible then 20% coinsurance for Medicare approved charges	The $233 Part B deductible then 20% coinsurance for Medicare approved charges	20% coinsurance of Medicare approved charges after deductible	20% coinsurance of Medicare approved charges after deductible
Additional Benefit						
Emergency Care received outside the U.S.	Medicare pays nothing	Nothing	Nothing	You pay first $250 (per calendar year) then the plan pays 80% of remaining costs to Lifetime Max of $50,000	You pay first $250 (per calendar year) then the plan pays 80% of remaining costs to Lifetime Max of $50,000	You pay first $250 (per calendar year) then the plan pays 80% of remaining costs to Lifetime Max of $50,000

* Plan F also has a high deductible Plan F. The high deductible plan pays the same benefits as Plan F after the member has paid a $2,490 calendar year deductible. Benefits from a high deductible Plan F will not begin until out-of-pocket expenses exceed $2,490. These expenses include Medicare deductibles for Part A and Part B. If you are eligible for Medicare on, or after, January 1, 2020, you are not eligible for Plan F or High Deductible Plan F.

** Waived if admitted.

2 Must meet Medicare requirements for admission.

Important details

With Medicare Supplement Insurance, members get:

- **The flexibility to see any doctor or go to any hospital that accepts Medicare patients:** No network restrictions and no referrals required for specialists.
- **A household premium discount:** A 7% household discount is available if you are 65 or older, married and residing with your spouse; or for the past 12 months, resided in the same house with someone who has or is applying for a National Health Insurance Company Policy.
- **A 30-day free look:** If you are not completely satisfied with your Medicare Supplement Insurance policy, return your policy within 30 days and we will refund any premiums paid.
- **Guaranteed renewable plans:** This policy automatically renews as long as you pay the premium on time. Your coverage will automatically increase as Medicare deductibles and coinsurances increase. Premiums may be modified to correspond with coverage changes.
- **No waiting period:** You're eligible for benefits at the time your policy is in force.
- **No paperwork to file:** Present your ID card at time of service, and benefits are paid directly to your doctor or hospital.

Know your plan. Medicare Supplement Insurance:

- Does not provide "stand-alone" coverage, requires enrollment in Medicare Part A and Part B.
- Does not provide prescription drug benefits.
- Does not provide benefits for vision, dental care, hearing aids, eyeglasses, and private duty nursing.
- Does not duplicate a benefit paid by Medicare.

Rate Guarantee

Members get a 12-month rate guarantee for the first year. After the first year, your premium may increase each year, but we will never change premiums unless we do so for all policies like yours in your state on a class basis. We will notify you in advance of any change in premium as required by state law.

Terms and conditions:

- A benefit period starts the day you go to a hospital or skilled nursing facility and ends when you have not received hospital or skilled nursing facility care for 60 consecutive days.
- Eligible expenses are costs that are deemed medically necessary by Medicare and covered expenses under your plan.
- Medicare-approved amount is the amount that a physician who accepts assignment can be paid, including what Medicare pays and any other deductibles, coinsurance, or copayments with your original Medicare plan.

Limitations and Exclusions

- Expenses incurred while coverage is not in force except as provided as an extension of benefits
- Hospital or skilled nursing facility confinement incurred during a Medicare Part A Benefit Period that begins while coverage is not in force
- That portion of any expense incurred which is paid for by Medicare
- Services for non-Medicare eligible expenses unless specifically covered under the policy, including, but not limited to, routine exams, take-home drugs and eye refractions
- Services for which a charge is not normally made in the absence of insurance; or,
- Loss or expense that is payable under any other Medicare Supplement insurance policy or certificate.

NOTE TO APPLICANTS UNDER AGE 65: In PA all Medicare supplement standardized plans are offered to qualified individuals under the age of 65.

With all plan selections, you have unlimited lifetime benefits and your coverage keeps up with the changing deductibles and coinsurance amounts whenever Medicare changes – it's automatic. Your Outline of Coverage will describe each additional benefit in the plan you select.

This brochure provides a summary of benefits

This is a brief description of your coverage. Policies have exceptions and limitations that may limit coverage. For a complete description of benefits, exceptions and limitations, please read your Outline of Coverage and your policy. The premium rate may vary between plans. Coverage ceases upon termination of the policy.

An advertisement originating outside this Commonwealth, which may reasonably be expected to be seen or heard in this Commonwealth shall comply with this chapter or prominently set forth the following disclaimer: "This offer is not available to residents of Pennsylvania."

National General
Accident & Health

National General Holdings Corp. (NGHC), headquartered in New York City, is a specialty personal lines insurance holding company. National General traces its roots to 1939, has a financial strength rating of A- (excellent) from A.M. Best, and provides personal and commercial automobile, homeowners, umbrella, recreational vehicle, motorcycle, lender-placed, supplemental health 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 National Health Insurance Company (incorporated in 1965), Integon National Insurance Company (incorporated in 2337) and Integon Indemnity Corporation (incorporated in 1946). These three companies, together, are authorized to provide health insurance in all 50 states and the District of Columbia. National Health Insurance Company has been rated as A- (Excellent) by A.M. Best. National Health Insurance Company is financially responsible for its respective products.

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For use in Pennsylvania
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