

Our unique affordable limited benefit plans were designed to be flexible and can change as your health conditions change. We don't want you to pay for medical services that you will not use like Men paying for Women checkups or Women paying for the Male medical conditions. These plans offer you access from telemedicine to visits with Board Certified physicians/specialists, hospitals, pharmacy discounts, and more for Residents and Non-Residents.



Add Your Whole Family, Parents & In-Laws



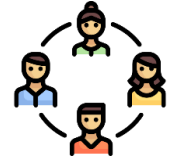
Sign Up Any Time of Year



Pre-Existing Conditions Accepted



Resident & Non-Residents



Employer Plan Options Available

BENEFITS	LIMITED BENEFIT PLANS			
	Gold 1 Male	Gold 2 Female	Gold 3 Disease Management	Gold 4 Prenatal
ACA PREVENTATIVE BENEFITS 63 ITEMS	100%	100%	100%	100%
TELEMEDICINE by REMEDY.ME	100%	100%	100%	100%
RELIASHIELD ESSENTIAL INDIVIDUAL PLAN	100%	100%	100%	100%
ACA - MANDATED GENERIC TIER 1	100%	100%	100%	100%
ACA - OPTIONAL GENERIC TIER 2	100%	100%	100%	100%
OFFICE VISITS CO-PAY APPLIES TO ALL PLANS	4/YR \$15 CO-PAY <sup>3</sup>	5/YR \$15 CO-PAY <sup>3</sup>	6/YR \$15 CO-PAY <sup>3</sup>	8/YR \$15 CO-PAY <sup>3</sup>
SPECIALIST VISITS CO-PAY APPLIES TO ALL PLANS	4/YR \$35 CO-PAY <sup>3</sup>	5/YR \$35 CO-PAY <sup>3</sup>	6/YR \$35 CO-PAY <sup>3</sup>	8/YR \$35 CO-PAY <sup>3</sup>
URGENT CARE LIMITED BENEFITS	\$250 CO-PAY <sup>3</sup>	\$250 CO-PAY <sup>3</sup>	\$250 CO-PAY <sup>3</sup>	\$250 CO-PAY <sup>3</sup>
DAILY IN-HOSPITAL STAY [HI] PER CONFINEMENT*4	\$300/DAY UP TO 14 DAYS <sup>4</sup>	\$300/DAY UP TO 14 DAYS <sup>4</sup>	\$300/DAY UP TO 14 DAYS <sup>4</sup>	\$400/DAY UP TO 14 DAYS <sup>4</sup>
HOSPITAL ADMISSION [HI]	\$2,000/ADMISSION ONCE A YEAR <sup>4</sup>	\$2,000/ADMISSION ONCE A YEAR <sup>4</sup>	\$2,000/ADMISSION ONCE A YEAR <sup>4</sup>	\$2,000/ADMISSION ONCE A YEAR <sup>4</sup>
CRITICAL ILLNESS [CI]	\$10,000/CARE OR ILLNESS ONCE A YEAR <sup>4</sup>	\$10,000/CARE OR ILLNESS ONCE A YEAR <sup>4</sup>	\$15,000/CARE OR ILLNESS ONCE A YEAR <sup>4</sup>	\$15,000/CARE OR ILLNESS ONCE A YEAR <sup>4</sup>
EMERGENCY ROOM FOR INJURIES [HI]	\$500/INJURY <sup>4</sup>	\$500/INJURY <sup>4</sup>	\$500/INJURY <sup>4</sup>	\$500/INJURY <sup>4</sup>
INTENSIVE CARE INDEMNITY [HI]	NA	NA	NA	NA
INDIVIDUAL	\$295	\$325	\$382	\$448
INDIVIDUAL + SPOUSE OR 1 CHILD	\$340	\$370	\$427	\$493
INDIVIDUAL + SPOUSE + 1 CHILD	\$385	\$415	\$472	\$538
INDIVIDUAL + SPOUSE + 2 CHILDREN FAMILY PLAN**	\$430	\$460	\$517	\$583

Get Your Plans Today! <https://www.GoAskJay.com/InzuriaHealth>

Our ERISA based health care benefits are exclusively structured for the members of The Medical Access Network Association<sup>1</sup>

Telemedicine by REMEDY.ME available in USA, Canada and Latin America LBP plans available in USA and Puerto Rico

- 1 - Must be a member of The Medical Access Network Association; \$35 annual membership fee. Discounts apply for groups of large numbers
- 2 - Optional service with additional \$50 cost per member
- 3 - Member Responsibility
- 4 - Plan Contribution

\*\* Member Family pricing covers up to 4 participants; \$40 extra for each additional family member; \$50 for each additional senior +65 of age

\* Exceptions apply, see Statement of Benefits

[HI] HOSPITALITY ADMISION [CI] CRITICAL ILLNESS