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Small Group Health Plans



Administered by:



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Underwritten by:

American Alternative Insurance Corporation
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- Premium Advantage Series
- No Deductible Plans
- HSA Qualified Plans
- Allied™ Cost Saver

The Finest and Most Flexible Health Plans for Small Groups

We know employers struggle with trying to balance health benefits and cost. That's why Allied developed the flexible, high quality Wellness Horizons® health plans. From the lowest cost limited benefit plan to the most comprehensive benefit plans, Allied can provide a cost/benefit combination that's right for your group.

It's difficult to find a plan that can meet everyone's needs, but now you can build it.

With our Cost Saver limited benefit plan, you'll find four great, low cost options with the essential benefits employees want and need the most, including an office visit copay and prescription drug benefit.

For comprehensive benefits, there is an array of plans available to fit your budget — now and in the future. Within these plans, you can choose from many levels of copays, coinsurance and deductibles to create a plan that easily fits your group's benefit and premium desires.

Participants in all major medical plans have access to the My Health Assistant program, which includes 24-hour nurse and doctor access via phone or Internet. The program is easy to use, and is provided at no additional cost to our major medical insureds.

Does this sound too good to be true? Let us convince you. A highly-rated insurance company, combined with professional service, quality benefit choices and the best local doctors and hospitals, is a formula for total satisfaction. Employees love the benefits and service, you enjoy the ease of administration, and everyone appreciates the value.

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It's Your Choice

Take a look at the chart on the next page. You can see and compare the plan alternatives we offer, from the lowest cost to the richest benefit plans.

Don't stop there, though. Consult with your Allied agent to help structure a plan to fit your group's health coverage and budget needs perfectly.

You don't have to choose just one plan either. You can sponsor two or more plan design choices (dual choice) or provide different benefit classes (dual class). Contact your Allied agent for complete details.



What type of coverage do you need?

Wellness Horizons® Health Plans	Cost/ Benefit	Plan Description	Page
Cost Saver	Lowest cost plan with first dollar benefits	For groups who want essential coverage, including office visits and prescription drugs, with premium savings up to 60%, there are four different limited benefit plan options from which to choose. Perfect for the employer who has been priced out of traditional comprehensive plans or is looking to offer medical benefits for the first time. There is no medical underwriting, and there are no health questionnaires or health loads with Cost Saver!	Page 4
Premium Advantage Series	Traditional deductible plans that range from low cost to richer benefit plans	Allied's Premium Advantage Series plans feature traditional PPO coverage with deductibles ranging from \$500 to \$10,000. These plans offer the ultimate in flexibility. You can choose from any number of benefit combinations including office visit copays, deductibles, coinsurances, out-of-pocket maximums and Rx drug cards. No single plan is perfect for every group — with the Premium Advantage Series, you can design a plan that's the perfect combination of benefit and cost.	Page 6
No Deductible Plans	Low to moderate cost, complete comprehensive benefit plan	Allied's unique No Deductible plans never charge a deductible and offer immediate benefits for employees through a modest copay and coinsurance. You can select a great plan that fits both budget and benefit needs. No Deductible plans are a terrific alternative to high-deductible plans.	Page 7
HSA Qualified Plans	Low cost, high deductible plan with tax advantages	Allied offers several high deductible health plans that are compatible with a Health Savings Account. These plans are ideal when establishing a tax-favored employee Health Savings Account funded by the employer, employee, or both.	Page 7



What is Allied™ Cost Saver?

Allied™ Cost Saver is a unique health plan alternative for employers of any size faced with the out of control costs of group health insurance.

Allied Cost Saver provides an option to employers faced with the prospect of dropping coverage altogether, or to employers who have never provided health insurance to their employees. And, with **no medical underwriting**, this limited benefit plan is easily accessible while providing the types of benefits employees request most—benefits like an office visit copay, emergency room coverage and a Prescription Drug Card.



Cost Saver is much more than an employee voluntary mini-med product that pays only minimal benefits. It is an employer-sponsored group plan based on a traditional PPO-style product. The PPO discounts provide additional value by reducing an insured's out-of-pocket costs.

Who Will Benefit From this Type of Plan?

Any employer who has been unable to afford or can no longer afford to provide a traditional health insurance plan should consider Allied Cost Saver.

The cost of health insurance is rising at an alarming rate every year. This has left many companies unable to afford health insurance for their employees.

“Making health care more affordable is a top concern of small business owners, who say that health care costs are the primary issue confronting their businesses. More than one in three small business owners (36 percent) say that rising costs are likely to cause them to cut some portion of health insurance benefits for their employees”, according to *America's Small Business Owners and Health Reform*.

Allied Cost Saver addresses the high cost of health insurance and provides important essential benefits to groups, while keeping premium costs down. This is the perfect plan for groups who can't afford to provide traditional health benefits to employees.

Why Should an Employer Purchase Cost Saver?

Allied Cost Saver addresses the employer's need to offer health benefits to its employees. Employee benefit plans are a key way for an employer to attract and retain quality employees. Allied Cost Saver provides an affordable, cost-effective way to provide benefits.

Allied Cost Saver is the perfect way for an employer to start a benefit plan, or retain one, in the face of ever increasing insurance costs. Also, purchasing employee health benefits has tax advantages for both the employer and the employee. Unlike wages, health benefits are not subject to income or payroll taxes.

Typical purchasers include convenience stores, construction trades, truckers, and health care professions like nursing homes and home health care providers.

Cost Saver Benefits

Cost Saver is a limited benefit plan that pays billed charges up to a maximum benefit for all covered services. Premiums are reduced by limiting catastrophic coverage and focusing on the first dollar benefits many employees desire.

Deductible	\$250 or \$500 per person per year as selected by the employer (waived for office visits)
Coinsurance	Office visits 100% in-network. Out-of-network office visits subject to deductible and co-insurance.
	All other services except office visits 80% in-network and 50% out-of-network

Outpatient and Physician Benefits*		Maximum Benefit			
Benefit Category	Copay	Plan 500 Value	Plan 750 Basic	Plan 1000 Standard	Plan 1500 Superior
Office Visits	\$20 copay per visit				
All other physician, outpatient and outpatient facility services	\$50 copay per bill except outpatient surgical center \$250 surgical center copay (per surgery)	\$1,500 per calendar year	\$2,500 per calendar year	\$4,000 per calendar year	\$6,000 per calendar year

Inpatient Facility Benefit* \$250 Copay per admission	Maximum Benefit			
Critical Care	\$500 daily	\$750 daily	\$1,000 daily	\$1,500 daily
Intermediate or Step-Down Care	\$375 daily	\$500 daily	\$750 daily	\$1,250 daily
Standard Care	\$250 daily	\$350 daily	\$500 daily	\$1,000 daily
Skilled Nursing or Rehab	\$125 daily	\$175 daily	\$250 daily	\$500 daily
Maximum Inpatient benefit in any 12 consecutive months is the lesser of 75 days or	\$35,000	\$50,000	\$75,000	\$100,000

Accident Benefit*	Maximum Benefit
Doctor's office, urgent care clinic or emergency room charges paid at 100% (deductible and coinsurance waived) for accidental injury	\$1,000 per calendar year

Lifetime maximum for all benefits combined	\$500,000
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*Please refer to the exclusions and limitations in the plan disclosure for additional information.

Outpatient Prescription Drug Options

Generic Only Option

Generic prescription drugs (Brand name provided at Allied's contracted discount)	\$15 copay per prescription	No Annual Limit
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Formulary Plan Options

Tier	Description	Copay	Formulary \$75/\$500		Formulary \$150/\$1,500	
			Deductible	Maximum Benefit	Deductible	Maximum Benefit
0	Prescribed over the counter (Claritin, Zyrtec and Prilosec)	\$3	\$0	No Limit	\$0	No Limit
1	Generic	\$10				
2	Brand-name Formulary	\$30	\$75	\$500 per calendar year	\$150	\$1,500 per calendar year
3	Brand-name Non-Formulary	\$50				
4	Specialty Pharmacy**	50% Coinsurance				

**Specialty Pharmacy includes, but is not limited to, select drugs for treating enzyme deficiency, hemophilia and multiple sclerosis, as well as select types of drugs like blood modifiers (e.g. Epogen, Procrit), growth hormones, IGIV and Interferons. For more formulary information, visit online at www.alliednational.com.



Premium Advantage Series Plans

The Premium Advantage Series features traditional PPO health insurance plans with a wide variety of benefit options. You can custom-build a plan to fit your needs from a wide choice of copays, deductibles, coinsurance and out-of-pocket maximums. With deductibles from \$500 to \$15,000, you can select the benefit and premium that's right for your group.

If affordability is key, our higher deductible plans provide significant discounts plus comprehensive coverage that is there when needed. Combined with the optional office visit copay, prescription drug card and \$500 Supplemental Accident Benefit, a high deductible plan still provides the essential benefits that you use the most and gives you great

premium savings with a quality health care plan.

Higher deductible plans can free you from financing expensive first dollar health care for employees while still protecting them from major expenditures when it counts. Or, it can be used as inexpensive insurance protection against high medical costs when used in conjunction with a Health Reimbursement Account (HRA).

You can even design multiple benefit plans (e.g., a high and low benefit option) and allow your employees to select the one they prefer. Significant employer savings result from sponsoring (funding) a lower cost benefit option and offering employees the option of selecting a more expensive, buy-up option.

Choose an Office Visit Copay:*

- None • \$30 • \$35 • \$40

Office visit benefit is payable at 100% for qualifying in-network services. Select unlimited visits or two or four visit per year limit to reduce premiums. Out-of-network services subject to deductible and coinsurance. For plans with four annual office visits or two annual office visits limits, additional visits are subject to deductible and coinsurance

Choose a Deductible:

- \$500 • \$750 • \$1,000
- \$1,500 • \$2,000 • \$2,500
- \$3,000 • \$3,500 • \$4,000
- \$5,000 • \$7,500 • \$10,000
- \$15,000

Family limit for in-network deductibles is two times the individual limit. Out-of-network deductible is two times the in-network deductible. There is NO family limit for out-of-network deductibles.

* Office visit copays do not apply to applicable deductibles or out-of-pocket maximums.

Choose a Coinsurance:

- 100% / 70% • 80% / 50%
- 70% / 50% • 50% / 50%

Percentages listed as in-network/ out-of-network coinsurance.

Choose an Out-of-Pocket Maximum:

- \$0/\$3,000** • \$2,500/\$5,000
- \$0/\$6,000** • \$3,000/\$6,000
- \$1,500/\$3,000 • \$4,000/\$8,000
- \$2,000/\$4,000 • \$5,000/\$10,000
- \$7,500/\$15,000 • \$10,000/\$20,000

Dollar amounts listed as in-network/out-of-network maximums. Deductibles do not count toward out-of-pocket maximum. Family limit for out-of-pocket maximum for in-network and out-of-network services is two times the individual limit.

** Available with 100%/70% coinsurance only.

Not all benefit combinations are available. See Allied proposals for details.

See your Certificate of Insurance for complete plan details.

No Deductible Plans

The No Deductible plan option is an increasingly popular alternative that provides your employees with attractive immediate benefits without first facing a huge deductible.

You don't have to accumulate thousands of dollars in medical bills before receiving an insurance benefit. You simply pay a copay, then coinsurance when applicable, and your benefits go to work.

For example, if you see your doctor for a medically necessary visit, you simply pay a copay at the time of the visit. After that, your insurance benefits start right away, paying the balance of the covered charges at your elected coinsurance level.

Choose a No Deductible Plan:

Copay	Plan 25	Plan 40
Office Visit*	\$25	\$40
Other Outpatient		
Services	\$100	\$160
Surgery	\$400	\$480
In-Patient	\$800	\$1,000

All out-of-network copays are two times in-network copays.

Coinsurance: 80%/50% 80%/50%
Percentages listed as in-network/out-of-network coinsurance.

Out-of-Pocket

Maximum: \$3,000 \$4,000 \$5,000

In-network maximum shown above. Out-of-network maximum is two times the in-network maximum.

Family limit for out-of-pocket maximum for in-network and out-of-network services is two times the individual limit.

* Office visit and Rx copays do not count toward out-of-pocket maximum. All other copays apply to out-of-pocket maximum.

See your Certificate of Insurance for plan details.

HSA Qualified Plans

Allied provides comprehensive insurance solutions using the triple tax savings of Health Savings Accounts (HSAs) and our quality insurance plans. HSAs work with high deductible health plans (HDHPs) to provide a great alternative to traditional health insurance plans.

HSAs make sense for a lot of people, particularly small business owners. The premium savings of an HDHP can be used to provide the funding for a tax-favored HSA. HSA contributions are tax-deductible, the earnings in the savings account are allowed to grow tax-free, and any money spent on qualified medical expenses is tax-free, providing you with powerful triple tax savings to help you with your medical costs.

For more information on Allied's HSA Qualified Plans and how an HSA can work for you, visit us online at www.alliednational.com/hsa_agt.htm.

Choose a Deductible:

- \$1,500
- \$2,000
- \$2,500
- \$3,000
- \$3,500
- \$4,000
- \$5,000

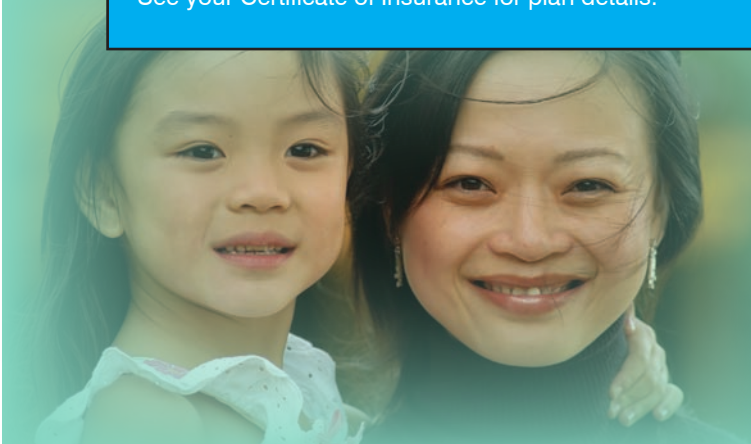
Family in-network deductible is two times the individual deductible. Entire Family deductible must be met before a benefit is paid on any family member. Out-of-network deductible is two times the individual deductible. There is no family limit associated with the out-of-network deductible maximum.

Choose aggregate or embedded deductible starting at \$2,500.

Choose a coinsurance and Out-of-Pocket Maximum:

100% / 70%	\$0/\$3,000
	\$0/\$6,000
80% / 50%	\$1,500/\$3,000
	\$2,000/\$4,000
	\$2,500/\$5,000
	\$3,000/\$6,000

Family out-of-network maximum is two times the individual maximum. Due to HSA regulations, an individual's maximum out-of-pocket expense (including deductibles and copays) can not exceed federally set maximums that can change annually. Therefore, individual in-network deductible and out-of-pocket maximum combinations chosen can not exceed current allowable maximums.



Additional Coverage Options

- **Pregnancy Coverage:** Available to any group initially insuring five (5) or more employees on the health plan. The Pregnancy Benefit is also available to smaller groups in a state that has mandated that benefit. (OH-4 or more; OK and TX-2 or more; CA-included for all size groups.)
- **Occupational Coverage:** Owners, partners and corporate officers not covered by Workers' Compensation may elect to be covered on a 24-hour basis under this plan. If elected, all eligible owners, partners and corporate officers must take this coverage. (Not available with Cost Saver.)
- **\$500 Supplemental Accident Benefit:** Pays 100% of charges incurred due to an accident, up to a \$500 benefit. (Available with Premium Advantage Series plans only.)
- **Life Extra Coverage:** Available on all health plans in units of \$10,000 to \$50,000. Life Extra Coverage options vary by plan. Check with Allied for details. Life insurance benefits provided by Guarantee Trust Life Insurance Company, Glenview, IL.

Lab Card® Benefits

Wellness Horizons® health plans extend an additional benefit to insureds by automatically enrolling them in the Lab Card® Program. This program provides outpatient lab testing at no charge when done at a Quest Diagnostics facility or at a doctor's office that sends the tests to a Quest Diagnostics facility. It is a voluntary program, meaning that insureds can choose not to have their testing done using their Lab Card; however, the insured will be responsible for their coinsurance or copay for laboratory charges.

HSA High Deductible Health plans are enrolled in the Lab Card program. Insureds can receive and pay for **discounted** lab services that will be automatically applied to their HSA deductible. Once an insured's deductible is satisfied, their Lab Card benefits revert to being paid at 100 percent by Allied just as is available on Allied's other Wellness Horizons health plans.

Wellness Benefit

State mandated benefits included with all Wellness Horizons major medical plans are routine preventive care coverage for mammograms, pap smears, PSA testing and child immunizations under the office visit benefit.

In addition, these plans feature an Annual Wellness Benefit, which provides an annual wellness exam. The wellness exam is subject to the office visit copay, pays up to \$250 in benefits and covers routine exams and testing (hearing, heart, etc.), X-rays and laboratory tests used for the early detection of diseases.

On plans without an office visit benefit, (HSA and Premium Advantage) routine preventive care coverage and the Annual Wellness Benefit are subject to a \$40 Copay.

My Health Assistant

Participants in our major medical plans have access to the My Health Assistant program. My Health Assistant helps manage health care needs by giving you access to an array of cost effective services.

With the My Health Assistant membership, participants receive:

- 24-Hour Nurse Hotline
- Online Physician Access
- 24-Hour Physician Telephone Consultation
- Patient Advocacy
- Online Health Information Library

The program is easy to use, and is provided at no additional cost to our major medical insureds.

BridgeHealth Benefit

Allied's Wellness Horizons Major Medical Plans and the Allied Cost Saver plan have been enhanced to offer you unprecedented access to some of the best surgeons and centers of excellence in the U.S. through the BridgeHealth World-Class Provider Network.™ This enhancement not only gives you access to high quality specialist care, it also allows you to view quality reports to compare hospitals and doctors in the BridgeHealth Network with your local providers. BridgeHealth also provides a Travel Benefit providing financial assistance to help offset your out-of-pocket costs, such as co-pays, deductibles and co-insurance to those who qualify. For more information, please visit www.bridgehealthmedical.com/allied.

Outpatient Prescription Drug Options

The following outpatient prescription drug options are available with the **Wellness Horizons®** health plans:

- **Discount Only:**
No outpatient prescription drug coverage.
- **Generic Only:**
Generic: \$15 copay per prescription. No limit on number of prescriptions. No Annual Maximum Benefit per calendar year. Brand name: Provided at Allied's contracted discount.
- **Deductible Integrated Benefit Options:**
Outpatient drug benefits subject to the plan's major medical deductible. After the deductible, prescription benefits are covered under the formulary plan. Option one subject to normal co-pays, option two co-pays are waived for tiers 0, 1 and 2.
- **Formulary Plan:**
The base formulary plan is as shown below. The formulary plan is available with a variety of deductible and maximum benefit options based on other plan benefits being selected.

Note: Total Rx benefits are subject to major medical calendar year and lifetime maximum benefit limits.

Formulary Plan Copays		
Tier	Description	Patient Pays
0	Prescribed Over the Counter	\$3 Copay
1	Generic	\$10 Copay
2	Brand-name Formulary	\$30 Copay
3	Brand-name Non-Formulary	\$50 Copay
4	Specialty Pharmacy*	50% Coinsurance

*Specialty Pharmacy includes, but is not limited to, select drugs for treating enzyme deficiency, hemophilia and multiple sclerosis, as well as select types of drugs like blood modifiers (e.g. Epogen, Procrit), growth hormones, IGIV and Interferons.

For more formulary information, visit us online at:
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Plans administered by:



The family of Wellness Horizons® and Allied™ products includes group and individual insurance plans for Health, Dental, Life and Disability benefits.