

# IBN

## COREVALUE

# Medical

*Guaranteed Issue Affordable Health Coverage for Individuals and Families*

**LIMITED BENEFIT MEDICAL PLANS SPONSORED  
BY THE NATIONAL CONGRESS OF EMPLOYERS**



**MEMBERS INSURANCE BENEFITS INCLUDE**

- DOCTOR'S OFFICE VISITS (INCLUDING CHIROPRACTORS)  
CHOOSE ANY DOCTOR OR NETWORK PROVIDER
- PREVENTIVE CARE (WELLNESS)
- LAB AND X-RAY
- INPATIENT HOSPITAL CONFINEMENT
- ICU/CCU
- ANESTHESIA
- SURGERY CHARGES UP TO 100% OF  
MEDICARE REIMBURSEMENT
- MATERNITY
- ACCIDENTS
- INPATIENT AND OUTPATIENT MENTAL HEALTH
- SUBSTANCE ABUSE

*Guaranteed Issue*

*No Lifetime Maximum Benefit Limit*

*HIPAA Compliant for Creditable Coverage*

*MultiPlan PPO Discounts*

*Prescription Drug Discounts*

*No Coordination of Benefits*





## WHAT IS NATIONAL CONGRESS OF EMPLOYERS (NCE)?

NCE is a national association dedicated to advocacy, education and offering accessible membership programs, some of which include limited medical insurance benefits and other membership features.

The NCE was established in 1996 to improve its member's quality of life through education to enhance their health, lifestyle, and overall well being.

NCE members join together in order to take advantage of "Group Buying". The NCE has offered members proven ways to save money on a variety of consumer goods and services. By putting the "Power in Large Numbers" philosophy into action, NCE uses the buying clout

of its entire membership to negotiate the best price available for each individual member.

NCE has recently partnered with Insurance Brokers Network, Inc. (IBN) to offer the CoreValue Medical plans, a series of Consumer oriented limited medical benefit plans that include valuable NCE consumer and lifestyle discounts as well as discounted medical plans!

NCE members will have the option of taking advantage of the competitive plan benefits and rates of the CoreValue Medical plans.

*We invite you to learn more about the association membership plan programs!*

## NCE MEMBERSHIP BENEFITS (NON-INSURANCE BENEFITS)

NATIONAL CONGRESS OF EMPLOYERS BENEFITS	COREVALUE 300	COREVALUE 500	COREVALUE 750	COREVALUE 1000	COREVALUE 1000 MAX
Prescription (Discount Rx)	✓	✓	✓	✓	✓
Prescription (4-Tiered Rx)*	✓	✓	✓	✓	✓
Tiered Dental	✓	✓	✓	✓	✓
Tiered Vision	✓	✓	✓	✓	✓
Car Rental Savings	✓	✓	✓	✓	✓
Floral Savings	✓	✓	✓	✓	✓
Magazine Subscription Savings	✓	✓	✓	✓	✓
Hotel Savings	✓	✓	✓	✓	✓
Amusement Park Savings	✓	✓	✓	✓	✓
Movie Ticket Savings	✓	✓	✓	✓	✓
Vacation Resort Savings	✓	✓	✓	✓	✓
Member E Shopping On-line Savings	✓	✓	✓	✓	✓
Auto Maintenance			✓	✓	✓
Moving and Storage Savings			✓	✓	✓
Gift Basket Savings			✓	✓	✓
Boca Java Savings			✓	✓	✓
Reebok Discounts			✓	✓	✓
We Care Credit Restoration Savings				✓	✓
Fitness				✓	✓
Diabetic Supply Savings				✓	✓
Medical Records Software				✓	✓
Holistic Care Discounts				✓	✓

\*Please see last page for details.

American Medical & Life Insurance Co. <b>BENEFITS</b> (maximums are annual)	<b>COREVALUE 300</b>	<b>COREVALUE 500</b>	<b>COREVALUE 750</b>	<b>COREVALUE 1000</b>	<b>COREVALUE 1000 MAX</b>
<b>Doctors Office Visits</b> The carrier will pay the benefit shown if you incur charges for and require a Doctor's office visit due to injuries received in a Covered Accident or due to a Covered Sickness.	\$50 per visit, 3 maximum visits	\$50 per visit, 3 maximum visits	\$50 per visit, 3 maximum visits	\$75 per visit, 3 maximum visits	\$75 per visit, 5 maximum visits
<b>Preventive Care Test Benefit (Wellness Care)</b> The carrier will pay the benefit amount shown if you incur charges for and have one of the preventive care tests listed in the policy's Certificate Schedule.	\$50 per visit, 1 maximum visit	\$50 per visit, 1 maximum visit	\$100 per visit, 1 maximum visit	\$150 per visit, 1 maximum visit	\$150 per visit, 1 maximum visit
<b>Diagnostic Lab and X-ray</b> The Carrier will pay the benefit shown if you incur charges for diagnostic, x-ray and/or laboratory testing caused by a Covered Accident or Sickness.	N/A	\$50 per day, 2 maximum days	\$50 per day, 3 maximum days	\$75 per day, 3 maximum days	\$75 per day, 5 maximum days
<b>Inpatient Hospital Confinement</b> The Carrier will pay the benefit shown if you incur charges for and are confined in a Hospital due to injuries received in a Covered Accident or due to a Covered Sickness.	\$300 per day, maximum of 30 days	\$500 per day, maximum of 30 days	\$750 per day, maximum of 30 days	\$1000 per day, maximum of 30 days	\$1000 per day, maximum of 30 days
<b>ICU/CCU</b>	\$500 per day, maximum of 10 days	\$750 per day, maximum of 10 days	N/A	N/A	\$1000 per day, maximum of 5 days
<b>Surgery</b> The carrier will pay the benefit shown if you undergo a surgical procedure due to a Covered Accident or Sickness. The procedure must be performed by a Physician and require anesthesia administered by a licensed anesthesiologist or certified registered nurse anesthetist (CRNA). Reimbursements are based on the Medicare/RBRVS benefit schedule.*	50% of RBRVS, Unlimited Annual Max <i>(not to exceed the amount of the charge incurred)</i>	70% of RBRVS, Unlimited Annual Max <i>(not to exceed the amount of the charge incurred)</i>	80% of RBRVS, Unlimited Annual Max <i>(not to exceed the amount of the charge incurred)</i>	80% of RBRVS, Unlimited Annual Max <i>(not to exceed the amount of the charge incurred)</i>	100% of RBRVS, Unlimited Annual Max <i>(not to exceed the amount of the charge incurred)</i>
<b>Anesthesia</b>	20% of surgery benefit	20% of surgery benefit	20% of surgery benefit	20% of surgery benefit	20% of surgery benefit
<b>Accident (Unforeseen Incident)</b> The carrier will pay the benefit shown if you incur charges due to injuries received in a Covered Accident.	\$100 annual deductible	\$100 annual deductible	\$100 annual deductible	\$100 annual deductible	\$100 annual deductible
	80% coinsurance	80% coinsurance	80% coinsurance	80% coinsurance	80% coinsurance
	\$1,000 annual maximum	\$2,500 annual maximum	\$2,500 annual maximum	\$5,000 annual maximum	\$5,000 annual maximum
<b>Inpatient Mental Health</b> The carrier will pay the benefit shown for each day of confinement, to a maximum of 60 days, if you are confined to a Hospital or licensed institution to provide treatment for Mental Illness.	\$150 per day, maximum of 60 days	\$250 per day, maximum of 60 days	\$375 per day, maximum of 60 days	\$500 per day, maximum of 60 days	\$500 per day, maximum of 60 days
<b>Outpatient Mental Health</b> The carrier will pay the benefit shown if you receive treatment as a result of Mental Illness to a maximum shown.	\$25 per visit, maximum of 20 visits	\$25 per visit, maximum of 20 visits	\$25 per visit, maximum of 20 visits	\$25 per visit, maximum of 20 visits	\$25 per visit, maximum of 20 visits
<b>Inpatient Substance Abuse</b> The carrier will pay the benefit shown for each day of confinement, to a maximum shown, if you are confined to a Hospital or licensed institution to provide treatment for Substance Abuse.	\$150 per day, maximum of 60 days	\$250 per day, maximum of 60 days	\$375 per day, maximum of 60 days	\$500 per day, maximum of 60 days	\$500 per day, maximum of 60 days
<b>Outpatient Substance Abuse</b> The carrier will pay the benefit shown if you receive treatment as a result of Substance Abuse to a maximum shown.	\$25 per day, maximum of 20 days	\$25 per day, maximum of 20 days	\$25 per day, maximum of 20 days	\$25 per day, maximum of 20 days	\$25 per day, maximum of 20 days
<b>MEMBER RATE**</b>	<b>\$159.93</b>	<b>\$203.71</b>	<b>\$215.01</b>	<b>\$255.72</b>	<b>\$296.34</b>
<b>MEMBER &amp; SPOUSE RATE**</b>	<b>\$253.93</b>	<b>\$341.51</b>	<b>\$364.09</b>	<b>\$445.51</b>	<b>\$526.76</b>
<b>MEMBER &amp; CHILDREN RATE**</b>	<b>\$235.13</b>	<b>\$313.94</b>	<b>\$334.28</b>	<b>\$407.55</b>	<b>\$480.66</b>
<b>FAMILY RATE**</b>	<b>\$319.73</b>	<b>\$437.96</b>	<b>\$468.45</b>	<b>\$578.36</b>	<b>\$688.04</b>

\*RBRVS is the methodology used by the Federal Government to determine benefits payable under Medicare.

\*\* Monthly Rates are inclusive of administration and association fees. Rates do not include a one time \$75 enrollment fee.

The limitations are disclosed in the certificate of coverage which is a part of the applicant kits which are made available shortly after completion of enrollment.

Should you wish to join the association and purchase a NCE benefits package that does not include the Limited Medical Benefits, please call 866-928-1536.

## MULTIPLAN DISCOUNT PROVIDER NETWORK

In Addition to our great defined benefit coverage, we also utilize America's largest PPO network, the MultiPlan network. By utilizing the MultiPlan PPO Network, you will enjoy significant savings for hospital and physician services. The MultiPlan Network is a national PPO network. It provides plan participants a choice of providers at discounted rates. Since 1980, MultiPlan has been making participating providers available to plan members with some 4,300 acute-care hospitals, 103,000 ancillary facilities, and 550,000 practitioners participating from all states.

## PRESCRIPTION DISCOUNTS

This plan is accepted at over 50,000 participating pharmacies nationwide. Simply visit a participating pharmacy, present your membership card and pay the pharmacy directly.

- Tier 1: Drugs at up to a \$10.00 maximum cost
- Tier 2: Drugs at up to a \$20.00 maximum cost
- Tier 3: Drugs at up to a \$50.00 maximum cost
- Tier 4: All other drugs are available for your benefit at negotiated rates.

To learn more about the Prescription, Dental and Vision NCE benefits, please visit the CoreValue Medical web site at [www.corevaluemedical.com](http://www.corevaluemedical.com).

## GENERAL INFORMATION

- Available effective dates are the 1st of a month contingent on receipt of enrollment application by the 20th of the preceding month, or the 15th of the month effective dates contingent on receipt of enrollment by the 5th of the preceding month and initial premium payment.
- 30-day right to examine provision.

## COREVALUE MEDICAL ELIGIBILITY

- 1) NCE dues paying members between ages 18 and 64 (if applying as a couple, both you and your spouse must be under 65) and dependent children under the age of 19.
- 2) Member's unmarried dependent children with proof of full time student status between the ages of 19 and 25.
- 3) Members not in full-time service of the Armed Forces (military).
- 4) Members not eligible for Medicare.
- 5) Members that are legal residents of United States.
- 6) Members not receiving disability benefits or Worker's Compensation.

## PROVISIONS

The CoreValue Medical plans are HIPAA Compliant.

**Persons who leave the plan will receive a HIPAA Certificate of Creditable Coverage. Those who enter the plan presenting a Certificate of Creditable Coverage will receive credit toward this plan's preexisting conditions limitation.**

There is no coverage for a pre-existing condition for a continuous period of 12 months following the effective date of coverage under the Policy. This limitation does not apply to: genetic information in the absence of a diagnosis of the condition related to such information; a newborn child who is enrolled in the plan within 31 days after birth; nor to a child who is adopted or placed for adoption before attaining 18 years of age; and as of the last day of the 31-day period beginning on the date of birth, adoption or placement of adoption, is covered under creditable coverage; pregnancy; and an individual, and any dependent of such individual, who is eligible for a federal tax credit under the Federal Trade Adjustment Assistance Reform Act of 2002 and who has three months or more of creditable coverage.

The AMLI Limited Benefits Medical is a group insurance benefit program. The group insurance benefits vary depending on the plan selected. These benefits are provided under a group insurance policy underwritten by the American Medical and Life Insurance Company and are subject to the company's underwriting guidelines, exclusions, limitations, terms and conditions of coverage as set forth in the insurance policy and certificate issued which includes a pre-existing limitation and other restrictions. The insurance is not basic health insurance or major medical coverage and is not designated as a substitute for basic health insurance or major medical coverage. This is a limited medical plan that provides for limitations to the coverage for each benefit. The limitations are disclosed in the certificate of coverage which is a part of the applicant kits made available at the time of enrollment

This is a limited medical plan that provides for limitations to the coverage of each benefit. The limitations are disclosed in the certificate of coverage which is part of the applicant kits which are made available shortly after completion of enrollment.

Certain provisions of the CoreValue Medical plans may vary by state.



National Program Manager

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**Enrollment Website:**  
[www.corevaluemedical.com](http://www.corevaluemedical.com)