

A man and a woman are walking a large white dog in a park during sunset. The man is on the left, wearing a light-colored sweater and jeans, holding the dog's leash. The woman is on the right, wearing a brown leather jacket and a grey knit dress, holding the man's hand. The background is filled with trees with golden autumn leaves, and the sun is low on the horizon, creating a warm, golden glow.

Short-Term Plus Medical Insurance

A stylized white logo consisting of three curved lines that form a partial circle or a decorative flourish.

COX HEALTH PLANS
CoxHealth

THINKING HEALTH FORWARD



**IMPORTANT: This is a short-term, limited-duration policy,
NOT comprehensive health coverage**

This is a temporary limited policy that has fewer benefits and Federal protections than other types of health insurance options, like those on HealthCare.gov.

| This policy | Insurance on HealthCare.gov |
|--|--|
| Might not cover you due to preexisting health conditions like diabetes, cancer, stroke, arthritis, heart disease, mental health & substance use disorders | Can't deny you coverage due to preexisting health conditions |
| Might not cover things like prescription drugs, preventive screenings, maternity care, emergency services, hospitalization, pediatric care, physical therapy & more | Covers all essential health benefits |
| Might have no limit on what you pay out-of-pocket for care | Protects you with limits on what you pay each year out-of-pocket for essential health benefits |
| You won't qualify for Federal financial help to pay premiums & out-of-pocket costs | Many people qualify for Federal financial help |
| Doesn't have to meet Federal standards for comprehensive health coverage | All plans must meet Federal standards |

Looking for comprehensive health insurance?

- **Visit HealthCare.gov** or call **1-800-318-2596** (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."



Stay Protected

Quality health care coverage for yourself and your family isn't just a luxury, but a necessity. That's why you need Cox HealthPlans—the only locally-based health insurance company in the Ozarks. Cox HealthPlans specializes in providing coverage to individuals and families, with friendly service and decades of experience in creating effective products for people just like you.

Our **Short-Term Plus Medical Insurance** provides you with a package of health care benefits to cover hospital, physician and emergency services, as well as many specialized services. This coverage provides the financial protection you need during times of change.



How Long Can a Short-Term Plus Medical Plan Cover Me?

We understand you might need short-term medical coverage for a temporary period of time or for a longer extension over multiple months. You select the term from 30 days up to 4 months with duration no longer than 4 months total in a 12-month period.

Short-Term Plus Medical Insurance is Right For:



Individuals & families looking for an affordable alternative to traditional insurance



Individuals & families who need coverage until the next Open Enrollment Period and are looking for an alternative to the ACA Exchanges



Temporarily unemployed



Looking for COBRA alternative



Adult children losing coverage from a parent's plan when they turn 26 years old



Recent graduates who do not have coverage under a parent's plan



Employees without group health insurance coverage



Waiting for employer benefits to start

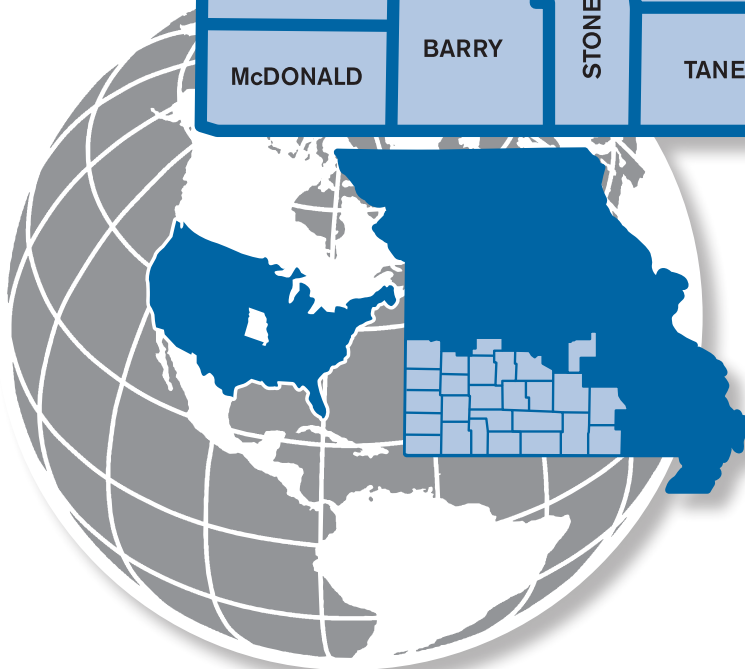
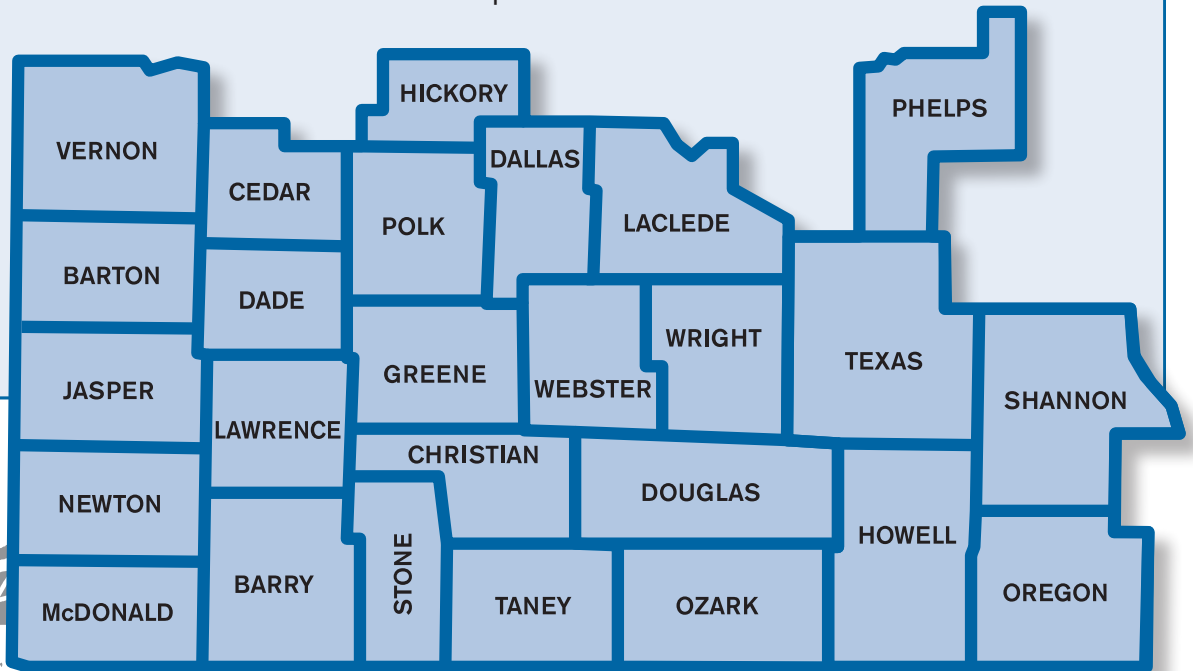


Network Advantages

As one of Missouri's leading health insurance providers, our goal is to help you take better care of yourself and your family. As an affiliate of CoxHealth, you'll have access to one of the region's largest local provider organizations. Our network encompasses dozens of hospitals and clinics, staffed by outstanding physicians and specialists.

Preferred Provider Organization (PPO) Network

To keep you covered, Cox HealthPlans is pleased to partner with First Health® for health services outside of our primary network area. First Health is one of the leading PPO networks in the country, with a network of providers and hospitals in urban, suburban, and rural areas throughout the United States. Our PPO plans have both In- and Out-of-Network benefits, but the broadest benefits are provided for services obtained from a network provider.



■ 26 County CHP Service Area





Covered Expense Highlights

This is only a brief summary of benefits, which is not intended to be comprehensive. Your Individual PPO Short-Term Medical Expense Policy is the governing document for benefit information.

| Plan Features | | In-Network Member is responsible for: | Out-of-Network Member is responsible for: |
|--|--------------------------------|---|--|
| Lifetime Maximum Benefit | | \$1,000,000 | |
| Deductible | | | |
| Per Covered Person | | \$1,000, \$2,500 or \$5,000 | 2x In-Network |
| Per Family | | 3x Individual Deductible | 2x In-Network |
| Co-insurance Out-of-Pocket Maximum (not including Deductible) | | | |
| Per Covered Person | | \$3,000 | 2x In-Network |
| Per Family | | \$6,000 | 2x In-Network |
| Accident Benefit Services | | \$1,500 paid at 100% for eligible accident expenses up to the maximum benefit within the first 30 days following an accidental injury | |
| Inpatient Hospitalization & Outpatient Hospital Services | | 20% | 50% U&C |
| Physician Services | | | |
| Primary Care Physician (PCP) | Specialty Care Physician (SCP) | \$30 Co-pay (First 3 visits, then deductible/coinsurance applies) | 50% U&C |
| Physician Telehealth Visits | | \$10 Co-pay | 50% U&C |
| Physician Services not received in an office setting | | 20% | 50% U&C |
| Select Preventive Health Services | | \$0 | 50% U&C |
| Outpatient Services | | | |
| Emergency Ambulance Services | | 20% | 20% |
| Emergency Services | | 20% | 20% |
| Urgent Care Services | | 20% | 50% U&C |
| Chiropractic Services | | 20% | 50% U&C |
| Diagnostic Laboratory, Imaging and Radiology | | 20% | 50% U&C |
| Outpatient Prescription Drugs | | | |
| | | Retail (30 day supply) | Mail Order |
| Deductible | | \$1,000 (Tier 2-4) | |
| Tier 1 - Preferred Generics | | \$10 Co-pay | 2.5x Retail Co-pay |
| Tier 2 - Preferred Brand | | \$35 Co-pay | 2.5x Retail Co-pay |
| Tier 3 - Non-Preferred Brand | | \$75 Co-pay | 2.5x Retail Co-pay |
| Tier 4 - Specialty Formulary Brand | | \$100 Co-pay | Not Available |
| Tier 5 - Preventive | | \$0 Co-pay | Not Available |
| | | | Out-of-Network |



Limitations & Exclusions

The following is a partial list of services or charges not covered. Please refer to the Individual PPO Short-Term Medical Expense Policy for a complete list and detailed information about the plan's limitations and exclusions.

- *Alternative Treatments*
- *Dental Services*
- *Experimental, Investigational or Unproven Services*
- *Foot Care*
- *Orthomolecular Therapy and/or nutrients, vitamins, and food supplements except for supplements intended for specific deficiencies (i.e. B-12 deficiency anemia or other specified anemias)*
- *Lifestyle improvements, personal hygiene, environmental control, or convenience items*
- *Service, surgery, and supplies for cosmetic purposes or to improve appearance*
- *Preexisting conditions, and complications resulting from a preexisting condition, will not be covered under this Policy*
- *Pregnancy. Benefits will not be provided for a normal pregnancy or childbirth; routine well-baby care including hospital nursery charges at birth; or abortion, except as provided in the complications arising from pregnancy provision in the Benefits section.*
- *Reproduction and Sexual Procedures*
- *Private Duty Nursing*
- *Genetic testing or counseling including, but not limited to, amniocentesis and chorionic villi testing*
- *The purchase, examination, and supplies for Prescription and Prosthetic devices, eye glasses, contact lenses, or, except for soft lenses or sclera shells intended for use in the treatment of a disease or Injury*
- *Vision Therapy*
- *Injury or Illness sustained or contracted in consequence of being intoxicated or under the influence of any narcotic unless administered on the advice of a physician, including, but not limited to, driving with a blood alcohol content in excess of the legal limit whether or not you are charged, plead guilty or found not guilty*
- *Disposable medical equipment or for its fitting, implantation, adjustment, or removal, or for complications therefrom, except as expressly provided for by this Policy*
- *Over the counter Disposable supplies and medicines that are self-administered for care of minor problems not requiring a Prescription*
- *All artificial aids, corrective appliances, and other Prosthetic devices not specifically listed as a Covered Service in this Policy*
- *Fabric compression garments available for over the counter purchase including but not limited to leotards, pressure leotards, elastic bandages, support hose, fabric supports and surgical leggings. This Exclusion does not apply to custom fitted fabric compression garments, not available for purchase over the counter*
- *Growth hormones, with the exception of approval by Preauthorization and clinical review*
- *Complications as the result of Non-Covered Service/Surgery are not covered by the Policy*
- *Marriage, family, educational, or training services including group counseling unless Medically Necessary and clinically appropriate*
- *Any examination, procedure, or supplies associated with cochlear implant*



Secure Your Coverage

Single Pay

If you know how long you'll need coverage and you have the ability to pay up front, the single payment option is your best solution. We accept single payments by check or cash.

Monthly Pay

You can choose the monthly payment option if you aren't sure how long you'll need temporary medical coverage, or want the flexibility of spreading out your payments. We accept monthly payments by credit card, check, cash or bank draft.

Policy Term and Non-Renewability

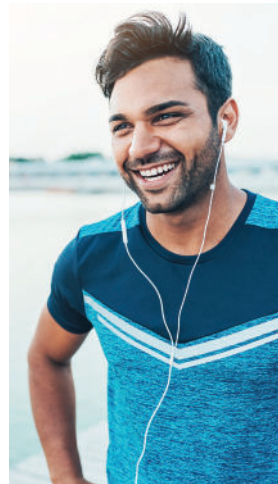
Upon timely payment of premiums, this policy will remain in effect until the length of your policy term ends, subject to the terms of your policy. The policy term will begin at 12:01 a.m. Central Time, and will generally end on the last day of the billing period in which we receive your notice of termination. This policy cannot be renewed beyond the policy term.

Free-Look Period

If you are not satisfied, you may cancel within 10 days after you receive coverage. All premiums paid will be refunded, minus the non-refundable application fee. This policy will then be void from its start as if no contract had been issued.

Coverage Effective Date

If coverage is approved, coverage becomes effective at 12:01 a.m. on the requested effective date, or the first day of the month following the date we receive your completed enrollment form, non-refundable application fee, and initial premium.



IMPORTANT NOTE


This is an outline only and is not intended to serve as a legal interpretation of benefits. Reasonable effort has been made to have this outline represent the intent of contract language. However, the contract language stands alone and the complete terms of the coverage will be determined by the policy.



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