

Enrollment checklist:

- Answer all application questions
- Select deductible and coinsurance
- Select payment mode (monthly or enter specific number of days)
- Enclose your check payable to FSG Simple STM or provide your credit card/checking account information

Thank you!

Mail or fax notice to:
 FSG Simple STM
 PO Box 1086
 Janesville, WI 53547-1086
 FAX 608-755-7955



PLACE
STAMP
HERE

Four vertical lines for stamp placement.

Simple Short Term Medical

Temporary Health Insurance for People Who Are:

- Between Jobs • Recent College Graduates
- Looking for an affordable COBRA alternative
- Temporary or Seasonal Employees



Plan Features:

- 1 – 12 months coverage • Next day coverage
- Choose any doctor or hospital
- \$1 Million Lifetime Maximum

Offered by:

Fairmont Specialty
a division of Crum Forster

STM06

Protect yourself and your family from unexpected illnesses or accidents.

A simple accident like a broken bone or torn muscle can cost thousands of dollars. The *unexpected does happen* and if it does you will be thankful that you purchased Simple STM. *Don't be without health insurance!*

Short Term Medical insurance is designed for people who need temporary health insurance coverage for up to 12 months. It has never been easier or faster to get health insurance. So whether you are:

- Between jobs
- Looking for an affordable COBRA insurance alternative
- Recent college graduate
- Temporary or seasonal employee
- Unemployed or laid-off
- Waiting for other health insurance
- Any temporary need of health coverage

In 3 simple steps you can have affordable health insurance coverage as soon as tomorrow!



- 1) Select a plan/rate that meets your needs and budget.
- 2) Complete a simple 7 question application.
- 3) Send in your payment and application. Coverage can be issued as soon as tomorrow!

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Plan Highlights:

- Freedom to choose your own doctors and hospitals
- \$1 Million Lifetime Maximum Coverage
- In-Hospital and Out-patient benefits
- Physician Services - diagnosis and treatment
- Surgery in a Hospital or Ambulatory Surgical Center
- Intensive Care
- X-Ray and Laboratory
- Ambulance Services
- Spinal Manipulation/Adjustment
- Mammography, Pap smear and screens

* Benefits vary by state. Refer to your coverage document for specific terms and conditions.

Here's How Short Term Medical Works:

Choose the plan that best fits your needs and budget:

- Deductible options: \$250, \$500, \$1,000, or \$2,500
- Coinsurance options: 80/20 to \$5,000 or 50/50 to \$5,000
- Length of Coverage options: 1 – 12 months of coverage

Benefits are paid as follows:

FIRST	You satisfy your deductible: \$250, \$500, \$1,000, \$2,500
THEN	We pay 80% or 50% of the next \$5,000 of covered expenses
100%	We pay 100% of remaining covered expenses up to the \$1 Million Lifetime Maximum

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Who's Eligible for Short Term Medical?

You and your spouse under age 65 (and not eligible for Medicare) and you and your spouse's unmarried dependent children under age 19 (or under age 25 if a full-time student) who have a social security number and can answer "No" to the seven health questions on the application.

Child Only Directions

Children age 19 and over should apply separately. Child-only coverage is available for ages 2 through 18. The application must be completed and signed by the parent or legal guardian.

Child(ren) alone can apply and are to use the 0-24 premium rate (male or female, based on their gender) for the youngest child; and the per child rate for each of the child siblings to be insured. The minimum age for a child only coverage is 2 years old. The application must be completed and signed by the parent or legal guardian.

Exclusions & Limitations

This Short Term Medical insurance is a temporary plan for up to 12 months (6 months in IN, LA, MI, NH and OH) and it does not cover: preexisting conditions; any services that are elective or not medically necessary; eye exams and related surgeries, eyeglasses, hearing aids; dental or orthodontic services; treatment of feet conditions; Conditions resulting from an act of war, suicide attempt or high-risk sports; maternity and newborn treatment prior to discharge, any infertility treatments or sterilization treatments; services performed by family members or for which a charge would otherwise not be incurred; services payable by Medicare or Worker's Compensation coverage; cosmetic surgery; services for mental, nervous, alcohol or drug treatment; Routine physical exams and tests, preventive care and immunizations for children over age 16; experimental or investigational services; obesity treatments; sleep disorders; prescription drugs and over-the-counter medications; certain surgeries during the first six months, expenses incurred while engaging in an illegal act or occupation or during the commission, or the attempted commission, of a felony or assault; Charges for voluntary termination of normal pregnancy, normal childbirth or elective Cesarean section. The cost of any drug, including birth control pills, supply, treatment or procedure that prevents conception or childbirth; Expenses incurred for the treatment of Injury

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or Sickness occurring while intoxicated or under the influence of illegal drugs or hallucinogenics, except as specifically covered. "Intoxicated" will have the meaning determined by the laws in the jurisdiction of the geographical area where either the loss or its cause occurs except as state mandated; Expenses incurred in the treatment by any method for jaw joint problems including temporomandibular joint dysfunction (TMJ), TMJ pain syndromes, craniomandibular disorders, myofascial pain dysfunction or other conditions of the joint linking the jaw bone and skull and the complex of muscles, nerves and other tissues related to the joint.

This is not a complete list of the limitations and exclusions. Please see the detailed list in policy certificate you will receive when you purchase Short Term Medical Insurance. Exclusions and Limitations may vary by state.

When does coverage begin?

If you submit the application form and initial payment via:

Internet or facsimile, the earliest date that coverage can begin (if approved by FSG) is 12:01 a.m. on the day after FSG receives the completed application form and valid electronic payment information. A later effective date may be requested, but no more than 30 days following the application date. Note – payment must be made by automatic bank draft or MasterCard / VISA.

U.S. Mail, the earliest date that coverage can begin (if approved by FSG) is 12:01 a.m. on the day after the postmark date stamped by the U.S.P.S. on the envelope in which FSG receives the completed application form and payment for the total amount due. If the U.S.P.S. postmark date is not legible or present, the earliest date that coverage can begin is the day after the completed application form and payment for the correct plan cost are received by FSG. A later effective date may be requested, but no more than 30 days following the application date.

Do I Need Precertification?

Pre-admission certification prior to eligible inpatient hospitalization or surgery by the covered individual within 48 hours is required. This is not a guarantee of benefits. Failure to precertify will result in a benefit reduction of 50%. Call 1-800-874-2378 for precertification.

Payment Options

Single Payment – If you know the exact length of time you'll need this coverage and prefer to make one single payment for the entire Benefit Period, this

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payment option is ideal. Simply enter the exact total number of days you need coverage and pay for that Benefit Period (30 day minimum / 6 month maximum).

Monthly Payment – If you are unsure how long you'll need this coverage or prefer the convenience of making monthly installment payments, this option is ideal. Each monthly payment is for 30 days of coverage, up to the 12 months maximum Benefit Period. If your need for this coverage ceases before your Benefit Period expires, simply contact our office via email at info@simplestm.com or visit our Online Customer Service Center at www.simplestm.com.

Payment Methods

Personal Check: You will receive payment coupons with your Policy or Certificate. The 1st payment coupon will reflect a credit equal to your initial payment. Subsequent monthly payments, must be received by FSG on or before the payment due dates shown on payment coupons.

Automatic Bank Draft or Credit Card:

Your initial payment and subsequent monthly payments will be automatically debited (on or immediately following the payment due dates) from your bank account or your MasterCard / VISA that is identified on the Electronic Payment Authorization form. If you wish to discontinue coverage before your Benefit Period expires, simply mail or fax your written request for termination to FSG and we will discontinue future automated electronic debits.

Note: 5 days advance written and signed notice from the Primary Insured is required to ensure future credit card debits are discontinued.

Money Back Guarantee

If you are not satisfied that this coverage will meet your insurance needs, simply return the Policy or Certificate with your written and signed request for cancellation within 10 days after you receive it. Coverage will be canceled as of the effective date and you will receive a full premium refund of your initial payment – no questions asked!

Note: the application and administration fees are non-refundable. Underwritten by Fairmont Premier Insurance Company or Fairmont Specialty Insurance Company.

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