The HiiQuote short-term medical insurance plan provides health insurance coverage for college students and student athletes.

ELIGIBILITY

The Short Term Medical plan is designed for college athletes with no age minimums and an age maximum of 64. To be eligible, you must:

- Be a U.S. citizen (or foreign resident living in the United States that has not resided outside the U.S. for more than 4 weeks over the last twelve months);
- Answer "no" to all the medical questions on the application.

AVAILABILITY

AL, AZ, CO, DC, DE, FL, GA, IA, IL, IN, LA, MO, MS, ND, NV, OH, OK, OR, PA, SC, SD, TX, VA, WI, WV, WY

COVERED ACTIVITIES

Most medical services, including physician care, Inpatient and Outpatient hospital services, laboratory testing and surgical services are covered by the HiiQuote Short Term Medical plan. This plan provides coverage for non-work related sickness and injury during the school year. Coverage for intercollegiate athletic bodily injuries will be subject to the plan's deductible and coinsurance with the exception of these two injury limitations:

Joint or Tendon Surgery \$2,500 per covered person, per coverage period Knee Injury or Disorders \$2,500 per covered person, per coverage period for both left knee and right knee

EFFECTIVE DATES

Coverage is effective for a minimum of 30 days up to a maximum of 6 or 12 months depending on the state rules.

PRICING

Rates vary by state, age and gender.

SCHEDULE OF BENEFITS

Medical Maximum Benefit- Lifetime	\$250,000
Sports-Related Injuries	Subject to deductible and coinsurance with plan maximum inside limits of:
	\$2,500 for Joint or Tendon Surgery and \$2,500 for knee injury or disorders.
Deductible	\$1000
Maximum	\$2000 or \$4000 options, per Person per Policy Year
Co-Insurance Rate- In Network	80% to \$2,000/\$4000, then 100% to plan maximum
Doctor Visits: Inpatient	subject to coinsurance and deductible
Doctor Office/Urgent Care Consultation	\$50 Copay, unlimited
Wellness Benefit Copay	\$50 Copay, maximum 1
Outpatient Surgery Deductible	\$500 Additional deductible applies, maximum of 3
Surgical Facility	Subject to Coinsurance and deductible
Emergency Room	\$500 Additional deductible applies
Ambulance	\$250 copay per transit
Advanced Diagnostic Studies	\$500 deductible per occurrence
Prescription Drug Discount Plan	RX rider available: \$10 Copay for Generics with \$200 per member maximum payable per
	monthly benefit period. Does not cover Brand RX
Waiting Period	5 days for sickness. 30 days for Cancer
Durable Medical Equipment Rental	\$250 maximum (not to exceed purchase price)
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Important Notes:

- Plan is not tied to an HMO/PPO network. Multiplan Complimentary Network
- Short-term medical products do not meet the Affordable Care Act's definition of minimal essential coverage and therefore do not fulfill an individual's requirement to maintain coverage.

Carrier: Everest Reinsurance Company

Claims Administrator: Allied National, Inc C/O Global Care Alpharetta, GA

