



Limited Medical

(fixed indemnity)

Limited Medical insurance helps people guard against the financial risks associated with paying medical expenses, enabling them to fill gaps and protect their income and assets. These plans typically offer a more affordable alternative to traditional health insurance, while ensuring that basic day-to-day health expenses – doctor’s visits, lab work, prescriptions, etc. – are covered.

Why Limited Medical?

Interest in Limited Medical insurance is growing. According to National Association of Health Underwriters (NAHU)¹, limited medical plans are fast becoming a mainstream healthcare offering. In 2011, Eastbridge² noted increased interest in hospital indemnity products at the workplace, as employers continue efforts to control healthcare costs and in turn, employees seek coverages that help them manage their own health expenses.

¹National Association of Health Underwriters, 2007; ²Eastbridge, 2011

Why Beazley Limited Medical?

Our Limited Medical (fixed indemnity) is a gap protection product, which provides a benefit amount for a select set of medical services. The plan provides an alternative to a traditional health plan, or a supplement to a high deductible health plan. It is well suited to groups with part-time workers who don’t qualify for coverage under the Affordable Care Act.

The benefit may be offered employer-funded, or employee-paid (voluntary), or a combination of the two. Coverage is offered on a guarantee issue basis with no medical underwriting.

The plan offers numerous flexible benefit options:

- The hospital confinement benefit is required. It is also compatible with Health Savings Accounts (HSA).

All other options can be offered separately:

- The hospital admission benefit is paid upon hospital admission, regardless of the number of nights.
- The surgery benefit pays a fixed amount (regardless of the type of surgery), and there are separate benefit amounts for inpatient surgery and for outpatient surgery.
- There are also separate benefits for x-ray, for lab, and for major diagnostic tests.
- Likewise, there is a benefit option for physician’s office/urgent care visits and a separate benefit for preventive care visits.
- Ambulance transportation benefits can be offered for ground ambulance and/or air ambulance.
- In addition, there are benefit options for prescription drugs, organ transplant travel, skilled nursing care and more.

Our Product at a Glance

- Fixed indemnity plan
- Broad spectrum of benefit options
- Packaged plan designs for small groups
- Offered guarantee issue (no medical questions)
- Flexible funding options (employer-funded, employee-paid, or combination)
- Composite rates with employer funding
- Offered down to 10 lives (employees)
- Hospital confinement benefit is compatible with Health Savings Accounts

LIMITED MEDICAL EXPENSE - PLAN DESIGN OPTIONS

PLAN DESIGN	RANGE OF OPTIONS	
Funding Options	<ul style="list-style-type: none"> • May offer employer-paid, or employee-paid (voluntary), or a combination of the two 	
Underwriting	<ul style="list-style-type: none"> • Guarantee issue 	
Benefit Options	Benefit Definitions	Benefit Amounts
Hospital confinement benefit (required)	For treatment in a hospital due to sickness or injury for 23 or more continuous hours (i.e. not less than a day).	<ul style="list-style-type: none"> • \$100-\$2,000/day for 1-5 days (additional days available at lower per diem) • 15-60 days per year
Hospital intensive care unit (ICU) benefit	For intensive and comprehensive care, in an area equipped with lifesaving equipment (ICU).	<ul style="list-style-type: none"> • \$100-\$3,000 per day • 15-30 days per year
Hospital admission benefit	Lump sum benefit for a hospital admission, due to sickness or injury.	<ul style="list-style-type: none"> • \$100-\$2,500 per insured • 1-2 admissions per insured
Inpatient surgery benefit	For inpatient surgery in a hospital due to sickness or injury.	<ul style="list-style-type: none"> • \$100-\$1,000 per day • 1-2 surgeries per year
Outpatient surgery benefit	For outpatient surgery in hospital or freestanding surgery center, due to sickness or injury.	<ul style="list-style-type: none"> • \$50-\$375 per day • 1-2 surgeries per year
Physician's office/urgent care visit	For services rendered by a physician at physician's office or urgent care facility.	<ul style="list-style-type: none"> • \$15-\$125 • 3-6 visits per year
Emergency room visit	For treatment in an ER due to sickness or injury, received within 72 hours of an accident (if injury, treatment must occur within 72 hours of the accident).	<ul style="list-style-type: none"> • Sickness-\$50-\$150 per visit • Injury \$100-300 per visit • 1-3 visits per year
Preventive care visit	For immunizations, well-baby care, certain cancer and routine physical exams.	<ul style="list-style-type: none"> • \$25-\$75 per visit • 1-2 visits per year
Lab or x-ray benefit	For x-ray or lab test, ordered by a physician.	<ul style="list-style-type: none"> • X-ray: \$50-\$250 per day, 3-5 days per insured • Lab: -\$25-\$100 per day, 3-5 days per insured
Major diagnostic testing benefit	For major diagnostic test (such as a MRI, CT scan, PET scan), ordered by a physician.	<ul style="list-style-type: none"> • \$250-\$500 per major diagnostic test • 1-2 tests per year
Ambulance transportation benefits	For transport by a licensed, professional ambulance company to or from a hospital.	<ul style="list-style-type: none"> • Ground: \$50-\$100 per trip • Air: \$150-\$300 per trip
Prescription benefit	For a prescription drug, dispensed by a pharmacy.	<ul style="list-style-type: none"> • \$5-\$25 per prescription • 5-12 prescriptions per insured
Other benefits	Skilled nursing care	• \$100-\$250 per day 15 or 30 days per insured
	Mental health/substance abuse benefit	<ul style="list-style-type: none"> • Stay: \$100-\$250 per day, 15 or 30 days per insured • Lump Sum: \$150-\$250, 1 admission per insured
	Transplant travel benefit	• \$250-1,000, 1 occurrence per insured
Participation Requirements	<ul style="list-style-type: none"> • Groups with 10-19 eligible employees require a minimum of 8 covered employees. • Groups with 20-49 eligible employees require a minimum of 12 covered employees. • Groups with 50-99 eligible employees require a minimum of 15 covered employees. • Groups with 100+ eligible employees require a minimum of 15% participation. 	

Contact us

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Benefits and range of options may vary by state. Premium will vary based on plan chosen. A waiting period for late entrants may apply. This policy is renewable at the option of the company. For full benefit definitions, see the Master Policy. Pre-existing condition limitations may apply. (Pre-existing condition means any sickness, disease, or physical condition for which the insured 1) had treatment, or 2) received a diagnosis or advice from a physician, during the pre-existing condition period.)

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