



**AIM** "The Nation's Leading Guaranteed Issue Health Plans"

**Guaranteed Issue Limited Medical Plans**

- Plan Descriptions
- Rates & Application
- Provider Search
- Drug Price Search
- Enroll Now

**Stand Alone Plans**

- Plan Summaries
- HSA Bridge Plans
- Accident Plus: \$5,000 & \$10,000
- Critical Illness: \$10,000
- Hospital: \$500 Daily
- Hospital + \$25,000 Critical Illness
- AIM Rx
- Rates & Enrollment

**Groups & Associations**

- Group Information
- Group Registration
- Member Enrollment

**Agents Corner**



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## HSA bridge plans

### Monthly Premiums

	\$5,000	\$10,000
<b>Single</b>	\$39.64   <a href="#">Enroll Now</a>	\$56.93   <a href="#">Enroll Now</a>
<b>Couple</b>	\$49.24   <a href="#">Enroll Now</a>	\$76.13   <a href="#">Enroll Now</a>
<b>Family</b>	\$49.24   <a href="#">Enroll Now</a>	\$76.13   <a href="#">Enroll Now</a>

### The HSA Package offers 5 great components:

- Accident Medical Insurance - covers you and your entire family
- Critical Illness Benefit - The policy has 10 critical illnesses that are covered.
- Ambulance ride is covered in Full, and Air Ambulance up to \$4,000
- Accidental Death & Dismemberment Insurance for primary insured persons
- AIM Rx Prescription Card

Available in 48 states. Not available in New York or Oregon.

### Accident Medical Insurance (\$5,000 or \$10,000)

- Select either \$5,000 or \$10,000 of Accident Medical Insurance - covers you and your entire family up to the limit selected for medical expenses due to an accident with only a \$100 deductible; the plan then pays 100% of the medical costs to the \$5,000 or \$10,000 limit selected of reasonable and customary charges.
- Ambulance ride is covered in **full**, and Air Ambulance up to \$4,000!
- No Limit on how many times an insured's family uses the policy.
- This benefit includes \$1,000 of Accidental Death & Dismemberment Insurance for primary insured only.

### POLICYHOLDER INFORMATION FOR ACCIDENT COVERAGE ONLY

#### GUARANTEE TRUST LIFE INSURANCE COMPANY

1275 Milwaukee Avenue  
Glenview, Illinois 60025

#### SCHEDULE OF BENEFITS

<b>Policyholder:</b>	Association for Independent Managers
<b>Policy Effective Date:</b>	December 1, 2006
<b>Eligible Persons:</b>	Members of the Association for Independent Managers under age 65 and their Dependents
<b>Date of Enrollment:</b>	The first of the month following Our receipt of the Eligible Person's completed enrollment form.
<b>Scope of Coverage:</b>	24-Hour Accident Coverage

#### COVERED CHARGES

- Treatment, services or supplies incurred for:
- Hospital room and board and general nursing care up to the semi-private room rate limited to 30 days.
- Intensive Care.
- Hospital miscellaneous expense
- Operating room expense
- Doctor's fees for surgery. No more than one surgical procedure will be covered when multiple procedures are performed through the same incision or in immediate succession. However, benefits will be payable up to 1.57 times the surgical procedure charge when more than one surgical procedure through different operating fields are performed during the same surgical session.
- Assistant surgeon expense.
- Anesthesia services
- Doctors visits, inpatient and outpatient.
- Hospital Emergency care or care in other Emergency facility.
- Outpatient services
- X-ray and laboratory services
- Ambulance expense
- Durable Medical Equipment
- Registered Nurse expense

#### EXCLUSIONS

This Certificate does not provide benefits for:

- Treatment services or supplies which:
  - Are not Medically Necessary;
  - Are not prescribed by a Doctor as necessary to treat an Injury;
  - Are determined to be Experimental/Investigational in nature;
  - Are received without charge or legal obligation to pay;
  - Are received from persons employed or retained by the Policyholder or any Family Member, unless otherwise specified; or
  - Are not specifically listed as Covered Charges in this Certificate.
- Intentionally self-inflicted Injury, violating or attempting to violate any duly enacted law.
- Injury by acts of war, whether declared or not.
- Injury received while traveling or flying by air, except as a fare-paying passenger on a regularly scheduled commercial airline.
- Injury or Sickness arising out of or in the course of employment and which is paid or received under any Workers' Compensation or Occupational Disease Act or Law.
- Treatment of illness, disease or infections, except pyogenic infections or bacterial infections which result from the accidental ingestion of contaminated substances.
- Heat exhaustion.
- Treatment of Osgood-Schlatter's disease; appendicitis; osteomyelitis; pathological fractures; congenital weakness; hernia; TMJ; fainting; headaches; boils; spondylolysis; osteochondritis dissecans; detached retina unless directly caused by Injury; or Mental or Nervous Disorders whether or not caused by Injury.
- Injury contributed to by the use of alcohol or drugs not prescribed by a Doctor.
- Suicide or attempted suicide while sane; or self-destruction or an attempt to self-destroy while insane. CAXXEX102
- Dental treatment, except as specifically stated. CAFLEX300
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state in which the Injury occurs.
- Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Doctor.
- Injury sustained while operating, riding in or upon, mounting or alighting from, any two- or three-wheeled recreational motor/engine driven vehicle or snowmobile or all terrain vehicle (ATV). CAXXEX400
- Injury which occurs while the Insured is on active duty service in any armed forces. Reserve or National Guard active duty for training is not excluded unless it extends beyond 31 days.
- Injury sustained flying in an ultra light, hang gliding, parachuting or bungi-cord jumping, byflight in a space craft or any craft designed for navigation above or beyond the earth's atmosphere.
- Treatment in any Veteran's Administration or federal Hospital, except if there is a legal obligation to pay.
- Cosmetic surgery, except for reconstructive surgery on an injured part of the body. CAXXEX600
- Covered Charges incurred outside of the United States or its possessions, unless such Covered Charges are incurred while the Covered Person is on a trip of not more than 30 days. CAXXEX700
- Injury resulting from participation in organized sports for Covered Persons over the age of 18.
- Physical Therapy or Physiotherapy, spinal manipulation, and manual manipulative treatment or therapy, where allowed.

**GP-1200**

**Critical Illness Plan Overview ( \$5,000 or \$10,000)**

- \$5,000 or \$10,000 One-time Critical Illness Benefit
- The insurance carrier will pay one time benefit of the plan selected for the diagnosis of a critical illness.
- Family coverage will cover both the primary insured and their spouse.
- Pre-existing conditions are covered after 12 consecutive months of coverage.
- The policy has 10 Critical Illnesses that are covered.

**Critical Illness Coverage Details**

**Critical Illness Diagnosis**

If an insured person is diagnosed with a critical illness, listed below, by a physician, the Company will pay a benefit subject to the Benefit Payment Conditions and Schedule of Benefits of the plan selected. Once a 100% of the maximum benefit amount has been paid for an insured person, coverage terminates and no further benefits are payable to that insured person.

**Life Threatening Cancer**

Pays benefits if an insured person is first diagnosed with life threatening cancer, more than 90 after the person's effective date of coverage. (The benefit is 10% payment after 30 days and before 90 days.)

**Heart Attack**

Pays benefits if an insured person is first diagnosed as having suffered a heart attack more than 30 days after the person's effective date of coverage.

**Kidney (Renal) Failure**

Pays benefits if an insured person is first diagnosed with having suffered kidney (renal) failure more than 30 days after the person's effective date of coverage.

**Stroke**

Pays benefits if an insured person is first diagnosed with having suffered a stroke more than 30 days after the person's effective date of coverage.

**Coma**

Pays benefits if an insured person is first diagnosed as being comatose more than 30 days after the person's effective date of coverage.

**Coronary Artery Bypass Graft**

Pays 25% of the benefit amount if an insured person is first diagnosed with a condition that necessitates a Coronary Artery Bypass Graft and receives the Coronary Artery Bypass Graft more than 30 days after the person's effective date of coverage. This benefit is paid once per lifetime.

**Loss of Sight, Speech or Hearing**

Loss of Sight, Speech or Hearing Pays benefits if an insured person is first diagnosed with loss of Sight, speech or Hearing more than 30 days after the person's effective date of coverage.

**Major Organ Transplant**

Pays benefits if an insured person is first diagnosed with a condition that necessitates a Major Organ Transplant and receives that Major Organ Transplant more than 30 days after the person's effective date of coverage.

**Paralysis**

Pays benefits if an insured person is first diagnosed as being paralyzed more than 30 days after the person's effective date of coverage.

**Severe Burns**

Pays benefits, depending on the severity of the burn, if an insured person is first diagnosed with having suffered a Severe Burn more than 30 days after the person's effective date of coverage.

These are brief descriptions of the coverage available under the policy. The policies will contain limitations, exclusions and termination provisions.

**AIM Rx Prescription Card Details**

AIM Rx offers access to your maintenance medications at affordable prices that will be shipped directly to your doorstep. Plan Members will save on average 48% on the cost of their medications.

**The Aim Rx Card has 3 Great Components**

**Walk-In Pharmacy Discount** - Plan Members will also receive the AIM Rx Discount Card, which allows you to shop locally and receive discounts on your immediate need medications. The AIM Rx Discount Card is accepted by over 42,000 pharmacies so you won't have to look far to save money.

**\$5 Generic Mail Order** - As part of our commitment to lowering healthcare costs, AIM Rx offers over 400 prescription drugs at only \$5 per 30 day supply or \$15 for a 90 day supply.

**Brand Name Mail Order** - Plan Members can save even more with the AIM Rx Maintenance Mail-order Service. It's as easy as 1-2-3.

**Step 1** Members can simply go on-line or call to receive a drug cost comparison on high cost medications.

**Step 2** Submit your order form, doctor's prescription and payment method.

**Step 3** Receive your medications right at your doorstep.

- o On-line Easy Refills
- o Refill reminders

