

Metal Gap FAQ

Which carrier is the underwriter for Metal Gap?

- Metal Gap is underwritten by Madison National Life Insurance Company (MNL), a member of The IHC Group.

How is the beneficiary designation made on the AD&D benefit under Plan C?

- At the time of application, there is an online form the client must complete to designate the beneficiary.

What are the available effective dates?

- Available effective dates are the 1st, 8th, 15th and 22nd of the month.

Are paper applications available?

- Metal Gap enrollment is only available online at www.myihcgroup.com. Please login, then select “Quote” under the Metal Gap header.

Does the client need to attest to having minimum essential coverage as defined by the Patient Protection and Affordable Care Act in order to purchase Metal Gap?

- For Metal Gap plan C, the consumer will need to attest that they have Minimum Essential Coverage in place. The attestation for Plan C is automatically included in the application.
- For Metal Gap plan A and B, there is no need for the consumer to provide an attestation as these plans contain only excepted benefits.

Is the deductible calendar year or per accident?

- The deductible is per accident, subject to language within the certificate of coverage.

Is the benefit maximum per calendar year or per accident/critical illness?

- Benefit maximum details are as follows:
 - Accident Medical Expense: Per accident
 - Critical Illness: Per person
 - “Per person” means that once the face value of the CI benefit is paid out on a member, no further CI benefits are to be issued. EX: A member with a \$7500 CI benefit has a coronary artery bypass, and we pay \$1875 (25% of the CI max) per the schedule. This same member has a stroke a year later. MNL will pay \$5625. Between the first critical illness and the second, we have paid out the maximum benefit of \$7500. This member no longer has a CI benefit even if he is diagnosed with another qualifying diagnosis for the life of the policy.
 - AD&D: Per person or body part
 - First Day Hospital Benefit: Only one per calendar year
 - Daily Hospital Benefit: Up to 10 days per calendar year

How many accidents are allowed to be paid, and when does the benefit roll over? If someone has a \$6350 plan, and has an accident with \$3000 paid, and they have another accident within a year, can they receive the additional money of \$3350? Or is the benefit exhausted?

- The benefit period starts with the date of the initial accident. The maximum benefit amount is **per accident** and the benefit period is limited to 52 weeks. In the event of another accident, insured would be eligible for the maximum amount again. The initial treatment period is 12 weeks.
- For accidents incurred November 1, 2014 or later, MNL will no longer “coordinate” with other health plans. If other insurance is indicated on the claim form, MNL will require the member to submit an EOB for the expense to determine whether there are any PPO savings. If there are savings, MNL will reduce the

charge by the savings amount, and pay based on the reduced amount. The amount actually paid by the other coverage will no longer be a factor in the benefit calculation.

Is there a specified time period that the insured must submit the claim?

- All claims must be filed by the insured. Time frame for filing is same as the time frame for the claim payment. Payment schedule is as follows:
 - AME: within 60 days after a covered loss starts, or as soon thereafter as is reasonably possible
 - CI: within 60 days after a covered loss starts, or as soon thereafter as is reasonably possible
 - AD&D: within 365 days from the date of accident, injury from such accident resulting in a loss
 - Hospitalization: within 20 days after the date on which the claim was incurred, or as soon as reasonably possible thereafter

To whom will MNL pay the benefits?

- If the claim form and benefits are assigned to the provider, MNL will provide a benefit to the provider. If the assignment is left blank, claims will be paid to the insured.

What is the definition of life threatening cancer? Also, with non-life threatening cancer, is there same payout or a percentage?

- Metal Gap only covers Life Threatening Cancer with the specific diagnostic requirements listed. Metal Gap does not cover other cancer, including what is in the exclusions.
- Life Threatening Cancer definition: a disease which is manifested by the presence of a malignant tumor characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue
 - For the purposes of this definition, life threatening cancer does NOT mean the following: pre-malignant lesions, benign tumors or polyps; leukoplakia; hyperplasia; carcinoid; any tumors in the presence of any human immunodeficiency virus (HIV); polycythemia; stage I Hodgkin's disease; stage A prostate cancer; Duke's stage A colon cancer; intraductal non-invasive breast cancer; Stage 0 to 1 transitional cell carcinoma of urinary bladder; or non-invasive cancer in situ or any skin cancer other than malignant melanoma invading into the dermis or deeper.
- To be clear on cancer, there has to be a biopsy done with a pathology or oncologist report AND it has to be a malignant.
- Life Threatening Cancer payment:
 - If an Insured Person is first Diagnosed with Life Threatening Cancer more than 90 days after the Insured Person's Effective Date of coverage, the Plan will pay the indicated percentage of the Maximum Benefit Amount shown in the Schedule, less any amount paid or payable for any other benefit provided under the Policy.
 - If an Insured Person is first Diagnosed with Life Threatening Cancer within the initial 90 day period following the Insured Person's Effective Date of coverage, but after coverage has been in effect for 30 days, MNL will pay the indicated percentage of the Maximum Benefit Amount shown in the Schedule, less any amount paid or payable for any other benefit provided under the Policy.
 - Benefits for Life Threatening Cancer are payable only once regardless of whether the Life Threatening Cancer is Diagnosed within or after the initial 90 days of the Insured Person's coverage.
 - Once the \$7500 of total benefit is exhausted, no other benefits are payable per person.

Hospital Indemnity Administration:

- The **hospital indemnity** benefit is to be administered as follows: MNL to pay the first day hospital benefit **one time** per calendar year. MNL pays for the daily hospital benefit up to 10 per calendar year. On the first hospital stay of the year, the patient will receive both the first day benefit AND the daily benefit for the initial day. EX: patient admitted on 9/1/2014 and discharged 9/4/2014. Patient is charged 3 days room and board. The benefit payout is:
 - First day benefit
 - Daily benefit for 3 days. (9/1, 9/2, and 9/3). No benefit payout for 9/4 as this is the discharge date, and no room and board is charged.

Are advanced commissions available?

- Yes, eligible producers and general agents can receive a 9-month advance upon request.

Is Metal Gap available on List Bill?

- List Bill is available in some states (check first with your IHC Regional Sales Director) and the process is as follows:
 - The minimum required group size for a list bill to be set up is 10 enrollees.
 - All enrollees on the list bill must have the same effective date for the month. If there are any additions, the effective date must match. EX: if the list bill is set up with the 1st of the month effective date, any new additions would become effective on the 1st day of the month.
 - Agent will gather information, list bill set-up form, and list bill election forms from employer.
 - The list bill set-up form with all the case names will be sent to newpolicyservices@ihcgroup.com at the time of enrollment. Policy services will notify the agent of the master list bill number. If additional employees are added, the employer or agent must have the employee complete a list bill election form and email the form to Policy Services at newpolicyservices@ihcgroup.com indicating the master list bill number. The agent or employer should enter the case online the same day that policy services is notified.
 - Agent or employer will enter cases into portal once the master case is set up in the system. All cases will be entered with a dummy ACH number, which will be given to the agent.
 - Policy Services will link all the cases to the Master list bill number. The employer will be billed for the initial month when the original group of employees is enrolled. Recurring billing statements are generated monthly 15 days prior to the premium due date.

Can Metal Gap premium be billed annually?

- No, Metal Gap is billed monthly via ACH or credit card only at this time.

Where do I get claim forms?

- Claim forms can be found at www.MyIHCGroup.com or by calling 866-336-0818.
 - Login to MyIHCGroup.com
 - Select "**Download Forms**" under **My Sales Tools** column on the left
 - Select "**Metal Gap**" and "**State**" from drop down menu in **Download Forms** page and press **Display Catalog** blue button
 - You will see 2 claim form options to "**Download**" under Applications and Forms section