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EXPENSE REIMBURSED PLAN OPTIONS

Carrier	UH Trans	UH Trans	UH Sirius	PH Emerald	PH Sapphire	ComplaMed	HealthPro Ultimate	HealthPro Advanced	HealthPro Launch	UH Exec Phy Plans
Updated 10/25/2022	Transamerica	Transamerica	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America
Product Type	Expense Reimbursed			Expense Reimbursed			Expense Reimbursed			Expense Reimbursed
Product Name	Ultimate Health	Ultimate Health	Ultimate Health	Plena Health	Plena Health	ComplaMed	HealthPro Ultimate	HealthPro Advanced	HealthPro Launch	Ultimate Health
Plan Name	Diamond Plus	CA Gold	Diamond Plus	Emerald	Sapphire	Gold	Diamond Plus	High	High	Diamond
	Diamond		Diamond			Silver	Diamond	Mid	Low	Platinum
	Platinum		Platinum				Platinum	Low		Platinum 7500
	Gold									Platinum 5000
Current Product Status (Date of First Use)	In Market (2/3/2013)	In Market	In Market (4/26/2017)			In Market (11/22/2016)	In Market (4/1/2020)			In Market (9/1/2022)
Approved in but won't issue	N/A	N/A	ID, ND, OH (sm)			see below (states not approved)			N/A	
Rx Card?	Yes (some \$ card)	Yes (some \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)	Yes (all \$ card)
Per Occurrence	Yes	Yes	No	No	No	No	No	No	No	No
213(d) expenses?	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes
Balance Bills	Yes	Yes	Disclaimer: no OON HMO/EPO			Follow base plan			Disclaimer: no OON HMO/EPO	
Deductible option?	No	No	Yes (except for CC)	Yes (except for CC)	Yes	Yes	Yes	Yes	Yes	Yes
Executive Physicals?	Yes	Yes	Yes	No	No	No	Yes (does not include coordination services)	No	No	Yes
TDC?	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	Yes
Travel Program	Get Me Home	emergency travel services	Get Me Home	emergency travel services	emergency travel services	No	Get Me Home	No	No	Get Me Home
Air Evac?	Yes	No	Yes	No	No	No	Yes	No	No	Yes
Travel Local Phone #	317-927-6812	317-927-6812	317-927-6812	317-927-6812	317-927-6812	N/A	317-927-6812	N/A	N/A	317-927-6812
Embedded Services	TDC/GMH	TDC/Travel	TDC/GMH	TDC/Travel	TDC/Travel	TDC	C&T, GMH, TimeSaver Plus ArmadaCare.com/timesaver 888-839-1662	C&T and TimeSaver ArmadaCare.com/timesaver 888-839-1662	C&T	TDC, C&T, GMH
MVP Ancillaries Available (See tab for MS phone #'s)	TDC/GMH/C&T (choice of 2,3)	TDC/C&T (choice of 1) (Travel Service auto incl)	TDC/GMH/C&T (choice of 2,3)	TDC/GMH/C&T (choice of 2)	TDC/GMH/C&T (choice of 2)	TDC/C&T (choice of 1)	N/A	N/A	N/A	TDC/GMH/C&T (choice of 2,3)
Member Svcs Phone #	855-943-4595	888-302-5728	855-943-4595	888-302-5728	888-302-5728	888-302-5731	888-988-2453	888-906-2435	888-545-8379	866-228-2516
Member Svcs Fax #	866-431-6339	866-431-6339	866-431-6339	866-752-0273	866-752-0273	866-861-4179	866-431-6339	866-431-6339	866-431-6339	866-431-6339
Member Webinars URL (www.ArmadaCare.com/x)	/UHlive	/UHlive	/UHwebinar	/PHlive	/PHwebinar	/CMvideo	n/a	n/a	n/a	/UHwebinar
Claims P.O. Box	P.O. Box 449	P.O. Box 449	P.O. Box 449	P.O. Box 133	P.O. Box 133	P.O. Box 1427	P.O. Box 449	P.O. Box 449	P.O. Box 449	P.O. Box 449
Member Portal URL (www.ArmadaCare.com/x)	/myaccount	/myaccount	/myaccount	/myportal	/myportal	/myclaims	/myaccount	/myaccount	/myaccount	/myaccount
Claims Concierge phone & email	888-302-5732	888-302-5734	888-302-5732	888-302-5734	888-302-5734	N/A (Claims Sweep)	855-695-3099	n/a	n/a	N/A
	VIP@armadacare.com						VIP@armadacare.com			
Participation % (All Plans)	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
Underwriting Minimums for Non-Contrib	15 for Diamond Plus; 3 for others	3	15 for Diamond Plus (10 if suite); 3 for others	10 unless written with suite	10 unless written with suite	25 unless written with suite	15 for U20000; 3 for others	10 (unless suite)	25 (unless suite)	15 if EE only, 10 if follows primary plan participation
Contrib Available?	N/A	N/A	N/A	N/A	N/A	Yes in select states with min 50 enrolled	N/A	N/A	N/A	N/A
Premium Equivalency	\$10,500	\$10,500	\$10,500	\$5,000	\$5,000	\$1,500	\$10,500	\$5,000	\$2,500	
Fees: Implementation Standard/Reduced (Renewal)	\$300/\$250 (\$125)	\$300/\$250 (\$125)	\$300/\$250 (\$125)	\$150/\$125 (\$50)	\$150/\$125 (\$50)	\$50/\$40 (\$25)	\$300/\$250 (\$125)	\$150/\$125 (\$50)	\$50/\$40 (\$25)	\$300/\$250 (\$125)
Steerage	n/a	n/a	n/a	n/a	n/a	n/a	Yes: see page 7 of sales flier			N/A
Broker Commissions/ Accelerated Comp?	\$150/\$650	\$125/\$325	\$150/\$650	\$125/\$325	\$125/\$325	\$75/no	\$150/TBD	\$125/TBD	\$75/TBD	
Misc										
States Approved	See chart*		CA	See chart*			See chart*			See chart*
States Not Approved	CT, IN, KS, MT, NH, NJ, NM, NY, TN, VT, WA			CA, CT, ME, NH, NJ, UT, VT, WA			CA, CT, ID, MD, ME, MO, ND, NH, NJ, NY, OH, OR, TN, UT, VT, WA			

* chart: <https://partner.armadaglobal.com/wp-content/uploads/pdfs/material/Broker-State-Availability-STC743.pdf>

State Variations on Policy Coverages Issuance (Internal Document):

<https://partner.armadaglobal.com/wp-content/uploads/pdfs/material/State-Variations-on-Policy-Coverages-Issuance-STC742.pdf>

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INDEMNITY PLAN OPTIONS

Updated 7/11/2022	DentaPak NY	WellPak Plus CT	Ultimate Health Indemnity	Plena Health Indemnity	BeneBoost	WellPak
Carrier	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America	Sirius America
Product Type	Indemnity	Indemnity	Indemnity	Indemnity	Indemnity	Indemnity
Product Name	DentaPak NY	WellPak Plus CT	Ultimate Health Indemnity	Plena Health Indemnity	BeneBoost	WellPak
Plan Name	D20000	Diamond Plus	Diamond Plus	Emerald	High	High
	D15000	Diamond	Diamond		Low	Mid
	D7500	Platinum	Platinum			Low
	D4000					
	D2500					
Current Product Status (Date of First Use)	In Market (6/24/2019)	In Market (1/6/2020)	In Market (10/1/2019)	In Market (10/1/2019)	In Market (6/1/2020)	In Market (1/1/2021)
Approved in but won't issue	N/A	N/A	N/A	N/A	N/A	N/A
Rx Card?	No card	No card	No card	No card	No card	No card
Per Occurrence	N/A	N/A	N/A	N/A	N/A	N/A
213(d) expenses?	den & vis	den & vis	den & vis	den & vis	No	No
Balance Bills	den & vis	den & vis	den & vis	den & vis	No	No
Deductible option?	No	No	No	No	No	No
Executive Physicals?	No	Yes	Yes	No	No	Yes, on High (does not include coordination services, No EPs in MI)
MVP Ancillaries Available (See tab for MS phone #'s)	N/A	N/A	TDC/GMH/C&T (choice of 2,3)	TDC/GMH/C&T (choice of 2)	TDC/C&T (choice of 1)	N/A
Embedded Services	None	TDC/GMH	TDC/GMH	TDC/Travel	TDC	Connect & Thrive
Travel Local Phone #	N/A	317-927-6812	317-927-6812	317-927-6812	N/A	N/A
Member Svcs Phone #	888-895-0196	855-943-4595	855-943-4595	888-302-5728	888-302-5731	888-315-6834
Member Svcs Fax #	866-601-5428	866-601-5428	866-601-5428	866-601-5428	866-601-5428	866-601-5428
Member Webinars URL (www.ArmadaCare.com/x)	n/a	n/a	n/a	n/a	n/a	n/a
Claims P.O. Box	P.O. Box 133	P.O. Box 133	P.O. Box 133	P.O. Box 133	P.O. Box 133	P.O. Box 133
Member Portal URL (www.ArmadaCare.com/x)	/myplan	/myplan	/myplan	/myplan	/myplan	/myplan
ORG URL (www.ArmadaCare.com/x)	N/A	N/A	N/A	N/A	N/A	N/A
Claims Concierge phone & email	N/A	N/A	N/A	N/A	N/A	N/A
Participation % (All Plans)	75%	75%	75%	75%	75%	75%
Underwriting Minimums for Non-Contrib	15 for 15000 & 20000; 3 for others	15 for Diamond Plus; 3 for others	15 for Diamond Plus (10 if suite); 3 for others	10 unless written with suite	25 unless written with suite	High - 10 Mid, Low - 25 unless with suite
Contrib Available?	N/A	N/A	N/A	N/A	Yes in select states with min 50 enrolled	Yes in select states with min 50 enrolled
Premium Equivalency	\$4,000	\$5,000	\$10,500	\$5,000	\$1,500	\$3,000
Fees: Implementation Standard/Reduced (Renewal)	\$50/\$40 (\$25)	\$300/\$250 (\$25)	\$300/\$250 (\$125)	\$150/\$125 (\$50)	\$50/\$40 (\$25)	High - 150/\$125 (\$50) Mid, Low - \$50/\$40 (\$25)
Steerage	n/a	n/a	n/a	n/a	n/a	n/a
Broker Commissions/Accelerated Comp?	4% of premium first year & renewal; first year in market bonus program of 4%			\$150/\$650	\$125/\$325	\$75/no
Misc						
States Approved	NY	CT	See chart*			
States Not Approved						Same as BB (see chart)

* chart: <https://partner.armadaglobal.com/wp-content/uploads/pdfs/material/Broker-State-Availability-STC743.pdf>

State Variations on Policy Coverages Issuance (Internal Document):

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AMAI INDEMNITY PLAN OPTIONS

Updated 12/8/2021	Ultimate Health Indemnity	Plena Health Indemnity	BeneBoost	WellPak
Carrier	Sirius America	Sirius America	Sirius America	Sirius America
Product Type	Indemnity	Indemnity	Indemnity	Indemnity
Product Name	AMAI/Ultimate Health	AMAI/Plena Health	AMAI/BeneBoost	WellPak
Plan Name	Diamond Plus	Emerald	High	High
	Diamond		Low	Mid
	Platinum			Low
Current Product Status (Date of First Use)	In Market First Enroll Date 11/1/2021	In Market First Enroll Date 11/1/2021	In Market First Enroll Date 11/1/2021	In Market First Enroll Date 11/1/2021
Approved in but won't issue	N/A	N/A	N/A	N/A
Rx Card?	No card	No card	No card	No card
Per Occurrence	N/A	N/A	N/A	N/A
Z13(d) expenses?	den & vis	den & vis	No	No
Balance Bills	den & vis	den & vis	No	No
Deductible option?	No	No	No	No
Executive Physicals?	Yes	No	No	Yes, on High (does not include coordination services, No EPs in MI)
TDC?	No	No	No	No
Travel Program	Get Me Home	emergency travel services	No	No
Air Evac?	No	No	No	No
Travel Local Phone #	317-927-6812	317-927-6812	N/A	N/A
Sales Phone #	866-956-4471	866-956-4471	866-956-4471	866-956-4471
Embedded Services	GMH/Connect & Thrive	Travel/Connect & Thrive	Connect & Thrive	Connect & Thrive
Member Svcs Phone #	866-883-8560	888-862-0371	888-315-6834	888-315-6834
Member Svcs Fax #	866-601-5428	866-601-5428	866-601-5428	866-601-5428
Member Webinars URL (www.ArmadaCare.com/x)	n/a	n/a	n/a	n/a
Claims P.O. Box	P.O. Box 133	P.O. Box 133	P.O. Box 133	P.O. Box 133
Member Portal URL (www.ArmadaCare.com/x)	/myplan	/myplan	/myplan	/myplan
ORG URL (www.ArmadaCare.com/x)	n/a	n/a	n/a	n/a
Claims Concierge phone & email	n/a	n/a	n/a	n/a
Participation % (All Plans)	75%	75%	75%	75%
Underwriting Minimums for Non-Contrib	15 for Diamond Plus (10 if suite); 3 for others	For 3+ physician practices -10 unless written with suite	25 unless written with suite	High – 10 Mid, Low– 25 unless with suite
Underwriting Minimums Small Physician Practices >4	For 1 physician practices, min is 1 and must be physician For 2 physician practices, min is 2 and both must be physicians For 3 physician practices, min is 2 and 2 need to be physicians		n/a	n/a
Contrib Available?	n/a	n/a	Yes in select states with min 50 enrolled	Yes in select states with min 50 enrolled
Premium Equivalency	\$10,500	\$5,000	\$1,500	\$3,000
Fees: Implementation Standard/Reduced (Renewal)	\$300/\$250 (\$125) 40% DISCOUNT FOR AMA MEMBERS	\$150/\$125 (\$50) 40% DISCOUNT FOR AMA MEMBERS	\$50/\$40 (\$25) 40% DISCOUNT FOR AMA MEMBERS	High - 150/\$125 (\$50) Mid, Low – \$50/\$40 (\$25) 40% DISCOUNT FOR AMA MEMBERS
Steerage	n/a	n/a	n/a	n/a
Broker Commissions/ Accelerated Comp?	\$150/\$650	\$125/\$325	\$75/no	High – \$125/no Mid, Low- \$75/no
States Approved	See chart*			

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