



Important disclaimers/information:

The termination or loss of this policy does not entitle you to a special enrollment period to purchase a health benefit plan - such as health plans purchased on the federal marketplace - outside of an open enrollment period. To avoid lapses in insurance, it is highly recommended to choose short term medical coverage terms that coincide with January 1.

If for any reason you are not satisfied with this Policy, you may return it to us within 10 days after you receive it. Your coverage issued under the Policy will be void, as though coverage had not been issued.

Short-Term Medical is non-renewable unless noted upon your enrollment. If you purchase a new policy, any conditions for which you incurred claims under the prior policy will be considered a pre-existing condition. The purchase of a new policy is not guaranteed, and you may be ineligible for new coverage based on pre-existing conditions. The new policy will have a new deductible and coinsurance limit to be satisfied according to the policy documents.

With Connect Short Term Medical and Connect Plus, you are not restricted by a network. You are free to use a provider of your choice. When you visit your provider, you will present your medical insurance card for the provider to submit the claim. Claims are reimbursed based on "Usual, Reasonable and Customary" charges for the geographical area and can be paid directly to the provider. In limited cases, your provider may require you to make payment at the time of service.

Short Term Medical plans are limited-benefit plans. Some common services that are NOT covered with a STM plan are (please see plan details for a full list):

- Maternity
- Mental Health
- Chiropractic
- Prescription
- Treatment for alcohol or substance abuse
- Pre-existing conditions (however the Connect Plus offers limited Pre-existing conditions coverage)