

Understanding Defined Benefit Medical Plans

In this primer we will discuss:

- * *What are Limited Medical plans?*
- * *How are they best used?*
- * *Which ones are best for my clients?*
- * *What areas warrant particular attention?*
- * *Various actual claims examples.*
- * *What is the RBRVS and why is it important?*
- * *Can I make a living selling Limited Med plans?*



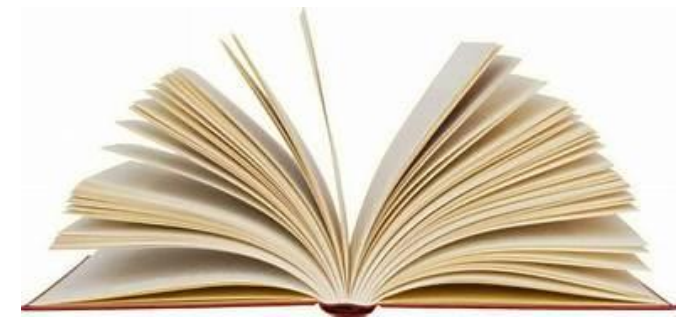
We Wrote the Book on Defined Benefit Plans!



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* We developed the very first **“Guaranteed Issue, Guaranteed Renewable”** Defined Benefit plan in the '90's. Since then, we have provided solid defined benefit insurance protection to over 30,000 families!

* We originated the **“Daily Surgical Benefit”** concept for FirstChoice in 2013.



* In the 18 years of continuous production since the origin of **Guaranteed Issue, Guaranteed Renewable** health plans, ***BMC sponsored products have never had a rate increase*** for existing policies or for new business, including our current FirstChoice!

What are Defined Benefit Medical Plans?



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Defined Benefit Medical plans, sometimes referred to as “Limited **Benefit**” plans, are less comprehensive than ACA or Major Medical plans, and provide specifically indicated benefits as outlined in the policy. These *benefits can vary greatly from plan to plan*, which is why it is so important to understand the ‘moving parts’ of any policy that you might promote.



What are Defined Benefit Medical Plans?



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Some common features of Defined Benefit Med plans include:

- * **Daily Room Benefit**
- * **Hospital Admission Benefit**
- * **Intensive Care Unit**
- * **Accident Confinement**
- * **Surgery and Anesthesia**
- * **Assistant Surgeon**
- * **Doctor Visits**
- * **Diagnostic Testing**
- * **Radiation & Chemotherapy**



When Should We Recommend Defined Benefit Medical Plans to Our Clients?



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Some common uses for Limited Med plans include:

- 1) To offset the high Out-of-Pocket costs associated with a hospital confinement, even with an **ACA** metallic plan in place.
- 2) To accompany a **Short Term Major Med** plan when top quality protection is necessary but premium dollars are limited.
- 3) To accompany a **Christian Bill Sharing Ministry** when some level of guaranteed insurance benefits are desired.
- 4) When an **ACA** plan is unaffordable and pre-x conditions makes a client uninsurable for **STMM**

Here is the 'not so fine' print...



After detailed research of all Defined Benefit Medical plans available today, our evaluation has led us to recognize THREE plans that represent the best VALUE for consumers. In almost every scenario, one of these three plans will best serve your client. Our goal is to provide this information without bias, as we do not personally represent half of these companies!

The remaining slides will endeavor to explain which one(s) work best in specific needs situations. These evaluations will be from the best interest of your clients, and not of you as a sales agent. We point this out as commission compensation varies considerably among plans.

As time and space are both limited, we will not be able to provide an exhaustive list of client scenarios, instead selecting a sampling of various demographics and claims examples from which you can draw parallels and hopefully become comfortable understanding the various benefits and how they perform at claim time. That knowledge, along with a thorough understanding of plan costs and underwriting considerations, will let you become an expert in Limited Medical plans!

Our Recommendations!



In example after example, with a variety of client demographics and claims, one of the following three plans emerges as superior almost every time. For that reason, we believe that the finest **Defined Benefit Med** plans available for sale today are:

FirstChoice VICTORY Series, ManhattanLife

Affordable Choice, ManhattanLife

Health Saver Plus, GOLD EDITION, Philadelphia American Life Insurance Company

We will look at what these three plans would pay for a variety of claims, followed by a comparison of plan costs (premium costs) and a brief comparison of underwriting.

Background



The **FirstChoice VICTORY** Series features three plan designs, **DELUXE**, **BASIC**, and **BRIDGE**. **VICTORY Series** has no deductibles or **Calendar Year Maximum Benefit**.

The **Affordable Choice** plan features four design options, **Classic**, **Classic Plus**, **Elite** and **Elite Plus**. **AC** has no deductibles and a **\$1,000,000 Calendar Year Maximum Benefit**.

The **Health Saver Plus GOLD EDITION** has three basic plan designs, **VALUE**, **PLUS**, and **PREFERRED**. Each one allows for a variety of **Calendar Year Inpatient Deductibles** and three options for **Calendar Year Maximum Benefits**. The examples that follow are based upon a **\$100 x 3 Calendar Year** confinement deductible and **\$250,000** calendar year maximum (per insured person).

Use #1 Reduce Exposure of Confinement with an ACA Qualified Metallic Plan.



Claim is for Double Cardiac Bypass, 7 day confinement, 2 Days ICU, Surgeon, Assistant Surgeon, Anesthesia and Daily Doctor Consultation.

ManhattanLife FirstChoice VICTORY	Bridge Plan	ManhattanLife Affordable Choice	CLASSIC	PALIC Gold Health Saver Plus	VALUE
Daily Room Benefit \$50 x 7 days	\$350	Daily Room Benefit \$1,500 x 7 days	\$10,500	Daily Room Benefit \$1,500 x 5 days	\$7,500
ICU	0	First Admission	\$1,000	ICU v 2 days	\$4,500
First Hospital Con 5 x \$1,000	\$5,000	Surgery 1 x RBRVS Value	\$2,214.14	Surgery 1 x RBRVS Value	\$2,214.14
Daily Surgery Benefit 5 x \$1,000	\$5,000	Assistant Surgeon 20% of RBRVS Value	\$444.83	Assistant Surgeon 20% of RBRVS Value	\$444.83
Anesthesia 20% of surgery benefit	\$1,000	Anesthesia 25% of RBRVS Value	\$556.04	Anesthesia 25% of RBRVS Value	\$556.04
Inpatient Dr.Visits	0	Inpatient Dr.Visits	0	Inpatient Dr. Visits \$50 x 7	\$350
TOTAL	\$11,350.00	TOTAL	\$14,715.01	TOTAL	\$15,224.88

Each plan provides more than enough to offset the out-of-pocket exposure on any ACA metallic plan

Use #1 Reduce Exposure of Confinement with an ACA Qualified Metallic Plan.



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These are the monthly premiums for the plan designs used in the prior claims example.

	FirstChoice BRIDGE	Affordable Choice CLASSIC (1xRBRVS)	PAIC Health Saver Plus VALUE (1xRBRVS)
Female 30, Non-Tobacco	\$34.50	\$87.08	\$92.93
Male 35, Tobacco Use	\$34.50	\$87.08	\$104.21
Female 39, Tobacco Use	\$34.50	\$87.08	\$126.72
Male 45, Non-Tobacco	\$45.65	\$103.70	\$120.26
Female 50, Non-Tobacco	\$45.65	\$103.70	\$150.77
Male 50, Tobacco	\$45.65	\$103.70	\$196.56
Female 63, Non-Tobacco	\$52.80	\$147.25	\$218.81

Use #2 Offset the Deductible of Short Term Major Medical with Limited Med



Let's look at the same Double Heart Bypass as used in our previous example

ManhattanLife FirstChoice VICTORY	BASIC Plan	ManhattanLife Affordable Choice	CLASSIC	PALIC Gold Health Saver Plus	VALUE
Daily Room Benefit \$200 x 7 days	\$1,400	Daily Room Benefit \$3,000 x 7 days	\$21,000	Daily Room Benefit \$3,000 x 5 days	\$15,000
ICU 2 x \$2,000	\$4,000	First Admission	\$2,000	ICU v \$4,500 x 2 days	\$9,000
Lump Sum (First Admission)	\$2,000	Surgery 2.5 x RBRVS Value	\$5,535.35	Surgery 2 x RBRVS Value	\$4,448.28
First Hospital Con 5 x \$2,000	\$10,000	Assistant Surgeon 20% of RBRVS Value	\$1,112.08	Assistant Surgeon 20% of RBRVS Value	\$889.66
Daily Surgery Benefit 5 x \$2,000	\$10,000	Anesthesia 25% of RBRVS Value	\$1,390.01	Anesthesia 25% of RBRVS Value	\$1,112.08
Anesthesia 20% of surgery benefit	\$2,000	Inpatient Dr.Visits	0	Inpatient Dr. Visits \$100 x 7	\$700
Inpatient Dr.Visits	0	TOTAL	\$31,037.44	TOTAL	\$30,450.02
TOTAL	\$29,400				

All three would have provided more than enough benefit to offset the out-of-pocket costs associated with a \$10,000 STMM deductible

Use #2 Offset the Deductible of Short Term Major Medical with a Defined Benefit Medical Plan



These are the monthly premiums for the plan designs used in the prior claims example.

	FirstChoice BASIC	Affordable Choice ELITE (2.5 x RBRVS)	PAIC Health Saver Plus PLUS (2 x RBRVS)
Female 30, Non-Tobacco	\$110.08	\$152.59	\$185.86
Male 35, Tobacco Use	\$110.08	\$152.59	\$208.43
Female 39, Tobacco Use	\$110.08	\$152.59	\$253.44
Male 45, Non-Tobacco	\$147.90	\$182.99	\$240.53
Female 50, Non-Tobacco	\$147.90	\$263.02	\$301.53
Male 50, Tobacco	\$147.90	\$263.02	\$393.12
Female 63, Non-Tobacco	\$177.05	\$263.02	\$437.62

Use #3 Primary Coverage when the cost of an ACA qualified plan is unaffordable



Same claim, Double Cardiac Bypass, 7 day confinement, 2 Days ICU, Surgeon, Assistant Surgeon, Anesthesia and Daily Doctor Consultation.

FirstChoice	DELUXE
Daily Room Benefit \$300 X 7 days	\$2,100
Lump Sup	\$3,000
ICU \$3,000 x 2 days	\$6,000
First Hosp. Con. \$3,000 X 5 days	\$15,000
Surgery \$3,000 X 5 days	\$15,000
Anesthesia	\$3,000
TOTAL	\$44,100

Affordable Choice	ELITE PLUS
Daily Room Benefit \$5,000 X 7 days	\$35,000
Hospital Admission	\$3,000
Surgery 3 X RBRVS	\$6,672.42
Assistant Surgeon 20% of Surgery	\$1,334.49
Anesthesia 25% of Surgery	\$1,668.12
TOTAL	\$47,675.03

PALIC HSP GOLD	PREFERRED
Daily Room Benefit \$3,000 X 7 days	\$22,500
Hospital ADMISSION	X (not available with \$100 deductible)
ICU \$6,750 x 2	\$13,500
Surgery 3 X RBRVS	\$6,672.42
Anesthesia	\$1,334.49
Impatient Dr. Visits	\$1,050
TOTAL	\$45,675.03

Use #3 Primary Coverage when the cost of an ACA qualified plan is unaffordable



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These are the monthly premiums for the plan designs used in the prior claims example.

	FirstChoice DELUXE	Affordable Choice ELITE PLUS (3xRBRVS)	PAIC Health Saver Plus PREFERRED (3xRBRVS)
Female 30, Non-Tobacco	\$168.17	\$210.75	\$278.78
Male 35, Tobacco Use	\$168.17	\$210.75	\$312.64
Female 39, Tobacco Use	\$168.17	\$210.75	\$381.15
Male 45, Non-Tobacco	\$226.30	\$253.91	\$360.79
Female 50, Non-Tobacco	\$226.30	\$253.91	\$452.30
Male 50, Tobacco	\$226.30	\$253.91	\$589.68
Female 63, Non-Tobacco	\$270.60	\$365.82	\$656.44

Let's look at a variety of different claims and see how each plan would perform.



To conserve space, the benefits will be calculated just as they were in the earlier example, but only the TOTAL CLAIM PAID for each plan will be shown. (rounded to the nearest dollar)

5 Days Confinement, 0 of which were in ICU. Open Gall Bladder (CPT Code 47562)

6 Days Confinement, 0 of which were in ICU. Hip Fracture (CPT Code 27267)

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$10,250	CLASSIC \$9,338	VALUE \$8,588
BASIC \$23,000	ELITE \$19,097	PLUS \$17,177
DELUXE \$34,500	ELITE PLUS \$30,516	PREFERRED \$25,516

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$11,300	CLASSIC \$10,558	VALUE \$9,858
BASIC \$25,200	ELITE \$21,396	PLUS \$19,717
DELUXE \$37,800	ELITE PLUS \$34,676	PREFERRED \$29,576

Let's look at a variety of different claims and see how each plan would perform.



To conserve, the benefits will be calculated just as they were in the earlier example, but only the TOTAL CLAIM PAID for each plan will be shown. (rounded to the nearest dollar)

6 Days Confinement, 0 of which were in ICU. Sickness, No surgery

Confinement for Mental Illness, Alcohol and/or Substance Abuse, 10 days, daily doctor visit

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$5,300	CLASSIC \$10,000	VALUE \$9,300
BASIC \$13,200	ELITE \$20,000	PLUS \$18,600
DELUXE \$19,800	ELITE PLUS \$33,000	PREFERRED \$27,900

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$0	CLASSIC \$0	VALUE \$2,500
BASIC \$0	ELITE \$0	PLUS \$5,000
DELUXE \$0	ELITE PLUS \$0	PREFERRED \$6,900

Let's look at a variety of different claims and see how each plan would perform.



To conserve space, the benefits will be calculated just as they were in the earlier example, but only the TOTAL CLAIM PAID for each plan will be shown. (rounded to the nearest dollar)

8 day hospital confinement for Influenza, daily doctor visits

Outpatient Arthroscopic Knee Surgery, CPT 29866, Ambulatory Surgical Center, Local Anesthetic

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$5,400	CLASSIC \$13,000	VALUE \$12,400
BASIC \$13,600	ELITE \$26,000	PLUS \$24,800
DELUXE \$20,400	ELITE PLUS \$43,000	PREFERRED \$37,200

ManhattanLife FirstChoice VICTORY SERIES	ManhattanLife Affordable Choice	PALIC HSP GOLD
BRIDGE \$600	CLASSIC \$1,898.19	VALUE \$1,468.55
BASIC \$1,200	ELITE \$4,745.47	PLUS \$3,271.38
DELUXE \$1,800	ELITE PLUS \$5,694.56	PREFERRED \$4,044.56

Underwriting is a MAJOR Consideration!



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If you have reviewed to prior slides, it should be easy to see why we have highlighted these three quality products in the ‘defined benefit’ arena. Your clients would be well served by any of them, assuming that they **QUALIFY!**

The **ManhattanLife Affordable Choice** and the **PALIC HSP Gold** are both liberally underwritten, (‘issue/decline’, no exclusionary endorsements) so your prospective clients (0-65) in reasonably good health should qualify.

The **ManhattanLife FirstChoice VICTORY Series** will issue a policy to anyone (age 18-65 working an average of 27hrs/wk.) who does not have **Cystic Fibrosis**. Permanent waivers will be placed on policies where **COPD** or **End Stage Renal** exist as Pre-X. **ALL other Pre-X conditions will be covered after a 12 month waiting period!**

Compensation and Agent Incentives



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The agent's level of compensation with the **ManhattanLife Affordable Choice** is on par with most other Limited Med plans. The **PALIC HSP Gold** is somewhat below average, while the **ManhattanLife FirstChoice VICTORY Series** pays the *highest commissions in the industry*.

Both companies, **ManhattanLife** and **PALIC**, provide generous **Incentive Trips** for their agents and managers who qualify at their modest production levels.



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Recap!

Let's review the reasons for selling a Defined Benefit Medical plan, and apply the claims and pricing data to see which one of these best plans shines the brightest in specific scenarios.

1) To offset the high Out-of-Pocket costs associated with a hospital confinement, even with an ACA metallic plan in place.

A review of the claims from the smallest plan design from all three suggested that any one would do a fine job of offsetting the out-of-pocket charges associated with an average period of hospital confinement. While the claims payouts were fairly close, the premiums were not.

The best value in this category, with 'value' defined as a comparison of benefits received to premiums paid, is clearly the **FirstChoice VICTORY Series BRIDGE Plan.**

Recap!



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Let's review the reasons for selling a Defined Benefit Medical plan, and apply the claims and pricing data to see which one of these best plans shines the brightest in specific scenarios.

2) To accompany a Short Term Major Med plan when top quality protection is necessary but premium dollars are limited.

Once again, a review of the claims from the 'medium' plan designs from all three suggested that any one would perform an excellent job of offsetting the out-of-pocket charges associated with an average period of hospital confinement along with a Short Term Major Med. While the claims payouts were all close, the **FirstChoice VICTORY Series BASIC** premiums were significantly lower.

With 'value' defined as a comparison of benefits received to premiums paid, the **FirstChoice VICTORY Series BASIC Plan** leads the pack.

3) When an ACA plan is unaffordable and pre-x conditions makes a client uninsurable for STMM



A review of the claims from the 'large' plan designs from all three suggested that any one would perform well. All performed similarly when surgery was involved, while confinements without surgery appear to favor the **ManhattanLife Affordable Choice** and **PALIC HSP Gold** plans. For Mental Illness, Alcohol and/or Substance Abuse claims, **PALIC HSP Gold** plans win hands down. Average confinements with surgery favor the **FirstChoice Victory Series DELUXE** plan.

.....
Then, take a step back and review the premium costs, and 'value' appears to once again favor the **FirstChoice VICTORY Series DELUXE Plan**.

It is absolutely imperative that you understand the following slides, which explains in detail how FirstChoice differs from the others.

What's the catch?



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The history of Defined Benefit plans goes back many years, to a time when they were used for two primary reasons:

1) Fill the gaps with Major Medical Plans, and 2) Income Replacement.

It was during this time that the predecessor of our current **FirstChoice** plan was born. Since Major Med plans have only one deductible and one coinsurance per year, we only needed to provide one 'up front' blast of benefits per year. If a client required a subsequent period of hospitalization in the same year, the Major Med plan was already paying 100%, and the Limited Med plan was strictly to provide some money for replacement income. By adhering to this philosophy, **FirstChoice** plans, with their "up front" benefit payout maintain a significant advantage over the competition with "package selling" situations. **It is not by magic that we provide more benefits for less premium, it is by strategic plan design!**

What's the catch?



This is why **FirstChoice** provides a distinct advantage over all traditional plan designs when providing benefits to 'fill the gaps' left behind by **ACA qualified plans**, **Short Term Major Med plans**, or **Christian Bill Sharing Ministries!**

This is also why the other two plans contrasted in this presentation would have strategic advantages for periods of abnormally long confinement!

It is also necessary to understand that when selecting any **FirstChoice** plan design it is important to also recommend a good **Cancer Policy**, as both **Affordable Choice** and **HSP Gold** plans each feature solid benefits for outpatient Radiation and Chemotherapy, while **FirstChoice** does not! This also serves to offset some of the premium disparity between **FirstChoice** and the others.

(As an aside, ManhattanLife offers one of the very best cancer plans in the industry, Cancer Care Plus!)

The Conundrum...



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The plans that provide the greatest level of protection are clearly the ACA metallic (Obamacare) plans, but these may be unaffordable for many.

The next best protection would be Short Term Major Med; while less expensive, STMM does have a couple of drawbacks, including:

- 1) It requires **approval by underwriting**, and
- 2) It must be **underwritten and reissued** at regular intervals.

Clients unable to pass the underwriting scrutiny of STMM might also fail to pass the underwriting associated with **Affordable Choice** and **HSP Gold**, leaving the “guaranteed issue” (except for Cystic Fibrosis) **FirstChoice Deluxe** plan as the best available option.

What is the RBRVS?



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In laymen's terms, the RBRVS (**short for the Resource Based Relative Value Scale,**) is understood to be the amount that Medicare would approve and pay for a given medical procedure. So, what is the problem with a plan, as many currently do, that claims to pay as much as three times the RBRVS? Its simple; the actual amount is often a fraction of the billed amount, even after PPO repricing. Here is a quote from Wikipedia: ***“Most specialties charge 200–400% of Medicare rates for their procedures and collect between 50–80% of those charges, after contractual adjustments and write-offs.”*** What becomes of the difference? Normally, it is ‘balance billed’ to the patient!

What is the RBRVS?



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Payments based upon the RBRVS are universally accepted and have become common with today's limited med policies, and is utilized by two of the three plans highlighted in this presentation, the **ManhattanLife Affordable Choice** as well as **PALIC HSP Gold**. The third, the **ManhattanLife FirstChoice** plans, alternatively feature a unique “Daily Surgical Benefit” that routinely delivers significantly more benefit for a given surgical procedure.

We point this out simply to help explain how plan designs with such drastically different “Daily Room Benefits” can so often have such similar payouts on claims where any sort of surgery takes place.

Conclusion



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Defined Benefit Medical plans serve a variety of functions and can be extremely valuable tools in a health benefits package.

Even among the very best Defined Benefit Medical plans, some work better than others in specific scenarios.

As in any other aspect of life, it is important to select the best tool for the job, and there appear to be several specific recommendations in order.

Conclusion

Supplement an ACA Plan



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When selecting a Defined benefit Med plan to offset the Out-of-Pocket costs left over from an ACA plan, the **FirstChoice Bridge plan appears to be the highest quality and most easily obtained product in the marketplace.**

The ‘front loaded’ plan design delivers the most benefits early, and at a premium cost well below even the highest caliber of competition.

Underwriting acceptance is near automatic, and rate increases historically nonexistent.

Conclusion Supplement a STMM Plan



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When looking to fill the gaps in a Short Term Major Med plan, the **FirstChoice Basic** plan appears to be the most economical option, while the **Affordable Choice Elite** plan runs a close second.

The **PALIC HSP Gold** appears to be slightly more comprehensive, as it includes benefits for Alcohol and Substance Abuse not found in the other two plans. Its slightly superior outpatient benefits, including more Doctor's Office Visits, comes at a significantly higher premium cost.

The **Affordable Choice Building Benefit Injury Reimbursement** becomes a valuable addition over time and thus should be a serious consideration when choosing between **Affordable Choice** and **HSP Gold**.

Conclusion “Stand Alone” Coverage



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When selecting a Defined Benefit Med plan as a “stand alone” alternative to ACA coverage, there are advantages to each of the plans discussed in this training.

The **PALIC HSP Gold appears to be the most comprehensive plan, as it includes benefits for Alcohol and Substance Abuse not found in the other two plans. It also appears to have slightly superior outpatient benefits, including Doctor’s Office Visits. These come at a significantly higher initial premium cost, with a history of annual rate increases that the **Affordable Choice** and **FirstChoice** plans have not experienced.**

The **Affordable Choice Building Benefit Injury Reimbursement becomes a valuable addition over time and thus should be a serious advantage when choosing between **Affordable Choice** and **HSP Gold**.**

Conclusion “Stand Alone” Coverage



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As the need to qualify medically with underwriting is also a consideration with **Affordable Choice** and **HSP Gold, FirstChoice** remains a serious option as well.

Rate stability going forward favors **Affordable Choice** and **FirstChoice**, as neither has any history of rate increases while all of the plans in the **PALIC** limited med series have experienced annual rate increases for both attained age and trend.

We hope this detailed evaluation of **ManhattanLife Affordable Choice, PALIC HSP Gold, and ManhattanLife FirstChoice** has helped you to understand the various applications for **Defined Benefit Medical** plans, and why these are the most popular limited med plans in the industry today.

For Additional Information



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For additional information on the **ManhattanLife Affordable Choice** and **FirstChoice** plans, please contact:

Executive Health Group: 724-856-3163 Website: www.BMCagencyINC.com

For additional information on any of the **PALIC** products, please contact:

Philadelphia American Life Insurance Company 1-800-552-7879