



PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY

The Insurance Plans of Choice for
Medicare Supplemental Coverage

- ➔ **Standard Plan A**
- ➔ **Standard Plan C**
- ➔ **Standard Plan F**
- ➔ **Standard Plan G**
- ➔ **Standard Plan N**



MISSISSIPPI

Policy Form Number: MS.A.PAL.MS, MS.C.PAL.MS, MS.F.PAL.MS,
MS.G.PAL.MS, MS.N.PAL.MS

MEDICARE AND PHILADELPHIA AMERICAN – BOTH SIDES OF THE STORY

When it comes to Medicare, it's important that you know both sides of the story, the advantages and disadvantages of relying only on Medicare to provide for your health care needs.

Before Medicare pays for any of the medical services you want or need, you must first pay the Medicare deductibles.

When combined with the Medicare coinsurance you are also required to pay, you could be out hundreds, even thousands of dollars after any benefits are paid by Medicare! These are bills you are expected to pay.

PHILADELPHIA AMERICAN Life Insurance Company's Medicare Supplement Insurance Plans help pay the bills that Medicare doesn't and provide you with protection from the ever-increasing gaps in Medicare. Plus, you receive the following benefits:

- Affordable Medicare supplement plans.
- Your right to use the doctor of your choice. You may see any doctor accepting Medicare patients.
- Guaranteed renewable.

- No annual maximums for Medicare-covered services.
- Accurate and speedy claim payments.
- Toll-free dedicated customer service phone number:

1-877-368-4691

FREEDOM OF CHOICE

You've earned the right to choose your own doctor or hospital, and we respect that right. Our plans allow you to use any Medicare-participating physician and any Medicare-approved hospital in the state.

PROTECTION AGAINST EXCESS CHARGES

Under Part B of Medicare, you may have 'out-of-pocket' costs if your physician or medical supplier does not accept assignment of your Medicare claim and charges more than Medicare's approved amount. The difference to be paid is called the 'excess charge.' With some plans, your doctor's charges for Medicare's covered services are paid in full, including the Medicare Part B deductible.

OPEN ENROLLMENT

Acceptance of your application is guaranteed if you are 65 or older and apply within six (6) months of your initial enrollment in Part B of Medicare. You must already be enrolled in both Parts A and B of Medicare to apply for these plans.

INSURED BILLING

Home Office MUST receive your application on or before your requested effective date.

- You should submit premium with your application. The amount of the premium submitted depends on the payment mode you have selected. After your policy is issued, PHILADELPHIA AMERICAN will bill you according to the payment mode you have selected.
- A one-time, non-refundable application fee should be included with each application.

PHILADELPHIA AMERICAN reserves the right to reject your application. If your application is rejected, you will be notified in writing and any premium submitted will be refunded.

With the PHILADELPHIA AMERICAN monthly Checking Account Deduction Program, you can have your monthly PHILADELPHIA AMERICAN dues withdrawn directly from your checking account on or about the sixth (6th) day of each month.

When you receive your bank statement, your PHILADELPHIA AMERICAN monthly checking account deduction will be included. To find out more about this convenient service, contact your PHILADELPHIA AMERICAN Authorized Agent, or call us toll-free at:

1-877-368-4691

Summary Billing offers you the convenience of consolidating your billing with any other PHILADELPHIA AMERICAN senior plan member, such as a spouse or relative.

This means that we can combine separate billings onto a single statement, even if you and the other person(s) are enrolled in different PHILADELPHIA AMERICAN senior plans.

The result is less paper work for you because one statement, one check and one envelope does the job. Summary Billing is also available if you choose the Monthly Checking Account Deduction Program.



GUARANTEED RENEWABLE

PHILADELPHIA AMERICAN Medicare supplements are guaranteed renewable. After the first modal premium payment, the term of this coverage is for the modal duration. As mentioned before, the first modal premium must be submitted with the application.

You also have the option to pay premium on a bimonthly or quarterly basis. It renews automatically, subject to the right of PHILADELPHIA AMERICAN to change rates on a class basis.

We will not cancel your coverage, except for the reasons listed below:

- If we discover any concealment of material facts upon enrollment
- If you do not pay your premiums, your coverage will end automatically without notice from us
- You cease to be covered under both Parts A and B of Medicare

- You enroll in a Medicare Coordinated Care Plan (also sometimes referred to as Medicare-at-Risk Plans) or special Health Maintenance Organizations (HMOs) and Competitive Medical Plans (CMPs) that seniors eligible for Medicare may be able to join.



INSURED GRIEVANCE PROCEDURE

We are certain that you will be completely satisfied with your PHILADELPHIA AMERICAN plan, but if you should ever have a complaint or problem, please follow the Insured Grievance Procedure:

Contact PHILADELPHIA AMERICAN.

You can call us toll free at:

1-877-368-4691

You can write to us at:
 Philadelphia American Life Insurance Company
 P.O. Box 4884
 Houston, TX 77210-4884

Your grievance will be reviewed and you will receive a response within 30 days.

QUESTIONS

After you receive your policy, please feel free to contact your PHILADELPHIA AMERICAN Authorized Agent, or call us toll-free at:
1-877-368-4691

You can write to us at
 PHILADELPHIA AMERICAN
 P.O. Box 4884
 Houston, TX 77210-4884.

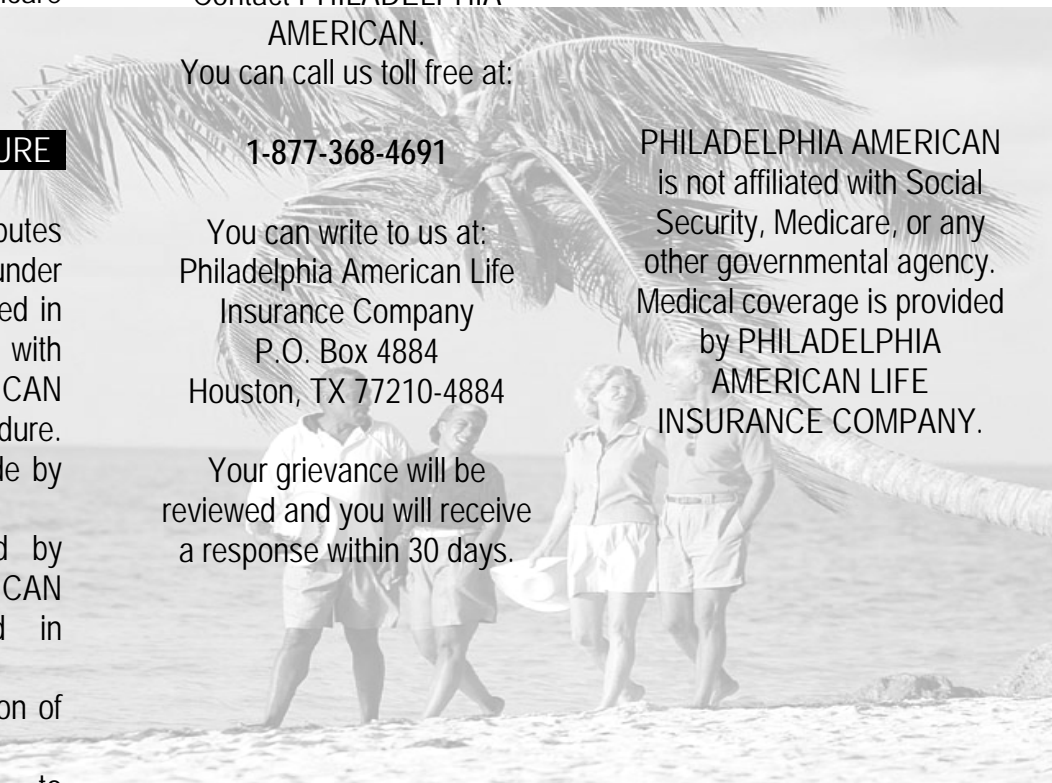
Please review the enclosed Outline of Coverage for complete information regarding the benefits, conditions, limitations, exclusions and cost of coverage.

MEDICARE CHANGES

PHILADELPHIA AMERICAN will send an annual notice to you 30 days prior to the effective date of Medicare changes, which will describe these changes and the changes in your Medicare supplement coverage.

GRIEVANCE PROCEDURE

All complaints and disputes relating to coverage under this plan must be resolved in accordance with PHILADELPHIA AMERICAN grievance procedure. Grievances may be made by telephone or in writing. All grievances received by PHILADELPHIA AMERICAN will be acknowledged in writing, together with a description of how PHILADELPHIA AMERICAN proposes to resolve the grievance.



PHILADELPHIA AMERICAN is not affiliated with Social Security, Medicare, or any other governmental agency. Medical coverage is provided by PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY.