

GET in

## 1 What is short-term medical (STM) coverage?

Short-term medical coverage is temporary medical insurance that may keep you protected if you don't have insurance or are between plans. Keep in mind that STM coverage isn't the same as having an annual health insurance plan under the Affordable Care Act (ACA). For example, it doesn't provide the same benefits. However, it will offer you protection against unforeseen medical expenses such as accidents or hospitalizations that may not be related to a pre-existing medical condition.

## 2 How does it work?

Like traditional health insurance, STM plans offer you different types of coverage options. For example, you can sign up for an individual plan or one that also protects your family. There's a choice of deductible amounts and coinsurance percentages. There's also an out-of-pocket amount for your costs, and one to three copays for doctor office visits, depending on the term length of your coverage.

## 3 Who can get short-term medical coverage?

You may qualify if:

- You're the primary applicant, spouse, or domestic partner from age 18 through age 64
- You're a dependent child under the age of 26
- You need a child-only plan for children ages 2 up to 18
- You're a legal resident
- You have internet access and an email address
- You can answer "no" to the eight qualifying questions

## 4 Do I have to wait for the annual Affordable Care Act (ACA) open enrollment period to apply?

No. Short-term medical plans are not subject to the ACA rules. So, you can apply anytime during the year.

## 5 How quickly will my coverage begin?

When you apply online, your coverage could go into effect as soon as the day after you're approved.

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## 6 How long will my coverage last?

Coverage is available for 30 to 90 days.

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## 7 What is covered?

Short-term or temporary medical insurance offers coverage for a range of treatments, services, and supplies. These include, but are not limited to, hospital and emergency room care, surgery, X-rays, intensive care, casts and crutches, radiation and chemotherapy, and equipment rental. Check your insurance certificate or policy for a complete listing. Also, note that coverage is subject to your deductible and coinsurance payments.

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## 8 What is not covered?

Your insurance certificate or policy will include a full listing of what's not covered. Some examples of what may not be covered include:

- Expenses for the treatment of pre-existing medical conditions
  - Expenses incurred prior to your policy's effective date or after its expiration date
  - Expenses for routine office visits, maternity care, or mental health services
  - Medical care provided outside of the U.S.
  - Wellness/preventive care benefits, including routine lab work
  - Organized sports-related injuries
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## 9 Can I keep my preferred doctor and hospital?

You can visit any doctor or hospital you want. Use any licensed provider or facility in the U.S. for covered services. Data iSight's® technology solution works to negotiate discounts with healthcare providers on your covered claims.

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## 10 How will I receive my ID cards after I apply?

Once your online application is approved, you will receive an email from The IHC Group with instructions on how to set up your account. You will also be mailed a welcome kit, which will include information about online access and your ID card.

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STM plans are offered by The IHC Group and underwritten by Independence American Insurance Company (IAIC), a member of The IHC Group. The IHC Group and IAIC are independent companies that do not provide, offer, or sell BCBSAZ products or services and are solely responsible for the products and services they provide. Short-term medical (STM) insurance is temporary coverage with limited benefits. It is not ACA-compliant, may not cover pre-existing conditions, and is not guaranteed-issue.

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For more information, visit [azblue.com/short-term](https://azblue.com/short-term).



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