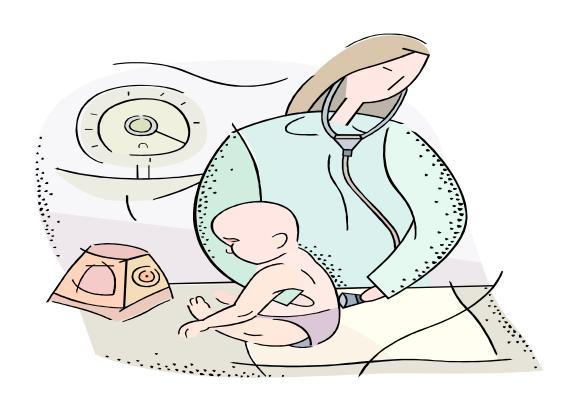
ALPHA DATA SYSTEMS, INC.

Presents

AlphaCare ESSENTIALS



Supplemental Medical Coverage When you need it most

"ESSENTIALS"*

from...

Alpha Data Systems, Inc.

HIGHER DEDUCTIBLES? INCREASED CO-PAYS? OUT OF POCKET COST TOO HIGH? NEED AN AFFORDABLE HEALTH CARE OPTION?

Whether you have a PPO health plan, HMO health plan, traditional health plan, or no health plan, add Alpha Data's "Essentials" plan to your supplemental Health Care Needs.

Alpha Data's "Essentials" offers a Flexible Benefits Plan that can fill the financial gaps created by Higher Deductibles and Increased Co-Pay Amounts.

Alpha Data's Plan is ESSENTIAL

- Pays regardless of all other plans (except Workers' Compensation or similar law)
- Covers Maternity as any other illness
- Guaranteed Renewable
- Benefits Paid directly to the Insured

Regardless of your current coverage, you can choose a Plan to meet your needs – AT AN AFFORDABLE PRICE.

YOU SELECT THE OPTION THAT IS BEST FOR YOU

*AlphaCare "Essentials" is a private label version of American Public Life Insurance Company's form HI-2000.

"ESSENTIALS"

Schedule of Benefits

Form HI-200=0

BENEFIT TYPE	DESCRIPTION	OPTION ONE	OPTION TWO	OPTION THREE
Hospital Expense Benefit	Pays a daily benefit for hospitalization due to sickness or accident beginning on the first day of hospitalization. Payable for up to 365 days of confinement per insured.	\$30	\$80	\$250
Annual First Occurrence Hospital Confinement Rider	This benefit is payable when a covered person is admitted and confined in a hospital for at least twenty-four (24) consecutive hours. Payable once per covered person in a calendar year.	\$200	\$250	\$500
Emergency Accident Rider	Pays the actual cost up to the benefit amount, for emergency care by a physician in a hospital or physician's office when incurred within 30 days of an accident. Benefits are payable for up to four covered accidents for the employee, four for the spouse, and four for all covered children.	\$100	\$200	\$300
Outpatient Sickness Rider	This benefit pays actual charges not to exceed the amount stated per treatment for a covered sickness by a physician or surgeon in their office, clinic, or other out-of-hospital facility. Payment will be limited to the maximum stated, for all insureds combined, in a calendar year.	\$25 per visit \$150 maximum	\$25 per visit \$250 maximum	\$50 per visit \$400 maximum
Intensive Care/Coronary Care Benefit Rider	Pays a daily intensive care benefit for each day an insured person is confined in a hospital's intensive care or coronary care unit due to an injury or sickness. Benefits begin on the first day of confinement, not to exceed 20 days per period of confinement.	\$100	\$200	\$200
Surgery Anesthesia Benefit Rider**	Pays actual charges, up to the amount shown in the schedule of operations, for surgery performed by a physician. Pays an additional 25% of the surgical benefit for anesthesia administered by a physician in connection with surgery.	\$1000 maximum	\$1500 maximum	\$4000 maximum

^{**} Refer to the policy for benefits and schedules.

TOTAL MONTHLY PREMIUM*

Option 1

Insured Only	\$17.17
Insured & Spouse	\$33.34
Insured & Children	\$28.99
Insured & Family	\$42.71

Option 2

Insured Only	\$30.22
Insured & Spouse	\$59.74
Insured & Children	\$54.14
Insured & Family	\$81.71

Option 3

Insured Only	\$ 74.30
Insured & Spouse	\$147.00
Insured & Children	\$124.95
Insured & Family	\$193.25

All Plans Include *ScriptSave* Prescription Discount Card!

^{*}The rates listed above are not applicable in all states. These rates may vary slightly in Arizona, Florida, Kentucky, Nevada, Tennessee, South Carolina and Virginia. Please call the Marketing Department for rates in these states.

DEFINITIONS

When We use the following words, We mean:

HOSPITAL – A lawfully operating institution which:

- a. has resident facilities for sick or injured patients, and
- mainly provides diagnostic, medical and surgical treatment for a fee to sick or injured persons (or has such treatment facilities available on a pre-arranged contractual basis); and,
- has a 24-hour nursing service by or under the supervision of a graduate registered nurse; and,
- d. has at least one Physician on the staff who is on call at any time; and,
- e. is accredited by the Joint Commission on Accreditation of Hospitals, the American Osteopathic Association or the Commission of the Accreditation of Rehabilitative Facilities, subject to the limitations in the paragraph below.

A Hospital is not an institution or part of an institution which mainly provides convalescent, nursing, or extended care.

SICKNESS – Disease or illness which first manifests itself after the coverage becomes effective for the person insured.

INJURY - Bodily injury sustained by an Insured Person which:

- a. is directly caused by an accident, independent of all other causes; and,
- b. occurs while the policy is in force for the person on whom claim is made.

PHYSICIAN – A person who: (in Florida, a practitioner of the healing arts who:)

- a. is licensed (Florida ends here) by the state in which he/she practices; and,
- renders treatment for which benefits are provided by the policy; and,
- **c**. acts within the scope of his/her license.

A Physician does not include a family member of an Insured Person. Family member means You, Your spouse, child, sibling, parent or parent-in-law.

RENEWABILITY

You have the right to renew the policy until the first premium due date on or after your 65th birthday if You pay the correct premium when due or within the Grace Period. Thereafter, You have the right to renew the policy on each Policy Anniversary if You are Actively At Work and You pay the correct premium when due or within the Grace Period.

Also, we reserve the right to change premiums from time to time. If We do change the premiums We will do so only:

- a. if We change the premiums for all policies of this same form in Your state of residence; and,
- if such change is in accordance with the laws and regulations of Your state of residence; and,
- c. if We give You 45 days (in Nevada, 60 days) notice before such change becomes effective.

In North Carolina only – The changed premium rates will remain in force a minimum of 12 months.

Any change in the premium will be based on Your age at the Policy Date.

LIMITATIONS AND EXCLUSIONS

We do not cover hospital confinements or other losses in the Policy or Riders attached thereto:

- a. due to hernia, adenoids, tonsils, varicose veins, appendix, disorder of the reproduction organs, or elective sterilization (in Oklahoma, adenoids, tonsils, appendix, elective sterilization not applicable) within 6 months after the Effective Date unless due to an emergency;
- due to an emergency;
 b. for an Injury or Sickness covered under Workers'
 Compensation, an Employers Liability Law, benefits provided
 by the Federal Employee Liability Act or similar law;
- c. for an Injury or Sickness due to war or act of war, whether declared or undeclared;
- d. for Dental Treatment unless due to Injury;
- e. for injuries that are intentionally self-inflicted;
- f. for an Injury or Sickness incurred while committing or attempting to commit a felony;
- g. for an Injury or Sickness incurred while engaging in an illegal occupation;
- for cosmetic care, except when the Hospital confinement is due to medically necessary reconstructive plastic surgery.

Medically necessary reconstructive plastic surgery is defined as:

- 1. surgery to restore a normal bodily function;
- surgery to improve functional impairment by anatomic alteration made necessary as a result of a congenital birth defect:
- 3, breast reconstruction following mastectomy;
- which are primary for rest care, convalescent care or for rehabilitation;
- j. due to being intoxicated (Intoxication means that which is determined and defined by the laws and jurisdiction of the geographical area in which loss or cause of loss was incurred.) (not applicable in Oklahoma);
- k. for Injury sustained or Sickness which manifests itself while on full-time duty in the armed forces. Upon notice, We will refund the portion of unearned premium paid while in such forces;
- I. for treatment of Mental or Nervous Disorders;
- m. for treatment of alcoholism or drug addiction;
- n. which are rendered outside the United States, its possessions, or Canada, except for emergency care for acute onset of Sickness or accidental Injury sustained while traveling for business or pleasure (not applicable in Florida); nor,
- for which payment is not legally required, except for:
 - 1. Medicaid;
 - treatment of non-service connected disabilities in Veteran Administration hospitals; and
 - inpatient care rendered to armed services retirees and dependents in military medical facilities of the United States Government.

PRE-EXISTING CONDITIONS LIMITATION*

We do not cover Pre-Existing Conditions for the first year after coverage becomes effective.

By Pre-Existing Conditions, We mean;

- a. the existence of symptoms which would cause an ordinarily prudent person to seek medical diagnosis, care or treatment during the 12 months before the Effective Date of his/her coverage; or,
- b. a condition for which medical advice or treatment was recommended by or received from a Physician during the 12 months before the Effective Date of his/her coverage.

This provision does not affect a newborn dependent child added after the Policy Date.

Pre-Existing Conditions specifically named or described as permanently excluded in any part of this contract are never covered. Pre-Existing Conditions specifically named or described as excluded for a limited time will be covered after the excluded period expires.

* Pre-Existing Conditions for AlphaCare "ESSENTIALS" Plan only.

These exclusions and limitations are not applicable for all states. Please refer to your policy or outline for applicable exclusions and limitations.

Underwritten By:

American Public Life Insurance Company P.O. Box 925 Jackson, Mississippi 39205-0925 (601) 936-6600 or (800) 256-6736

Administered By:

Alpha Data Systems, Inc. 1545 W. Mockingbird Lane Suite 6000 Dallas, Texas 75235 (214) 638-1488 or (800) 441-2446 www.alphadatasys.com

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