

YOUR NEW GO-TO SOLUTION

TO HELP FILL ACA GAPS

We Serve You



SiriusPoint America Insurance Company

SiriusPoint is a global underwriter of insurance and reinsurance providing solutions to clients and brokers around the world. SiriusPoint has licenses to write Property & Casualty and Accident & Health Insurance and reinsurance globally.

Their offering and distribution capabilities are strengthened by a portfolio of strategic partnerships with Managing General Agents and Program Administrators. SiriusPoint has \$2.8 billion total capital and their operating companies good financial strength ratings.

SiriusPoint is highly rated with A.M. Best, S&P, Fitch & Moody's:

AM Best: A- (Excellent)

S&P & Fitch: A (Strong)

Moody's: A3

Learn more about SiriusPoint at <https://siriuspt.com/>



United Business Association

The United Business Association (UBA) stands as a beacon of empowerment for small business owners and their dedicated teams. By weaving small businesses together under a unified banner, UBA harnesses their collective purchasing prowess, unlocking benefits and group insurance plans that often elude solitary operators. Together, we are Small, Strong, and United! Client must be a member of UBA in order to enroll in these membership plans.



HealthyAmerica

Since 1998, Healthy America Insurance Agency, Inc. (HealthyAmerica) has been the exclusive national marketer and nationwide TPA for the United Business Association (UBA). Our expertise in developing innovative products built to agency specifications sets HealthyAmerica apart.

- 1 Gap 10000
- 2 Gap 10000 & BB 1.0
- 3 Complement Care

OVERVIEW

BENEFITS AND FEATURES





Bridging Coverage Gaps with UBA Gap Plans

Understanding UBA Gap plans can significantly assist you in addressing your clients' coverage gaps, **especially as ACA costs rise and the necessity for higher deductibles increases for affordability.** These plans bolster existing insurance by covering out-of-pocket expenses, offering a more robust safety net.





Key Benefits of the base Gap 10000 plan

Supplemental Insurance Coverage Benefits

Blanket Group Accident Coverage Details

- \$10,000 Blanket Group Accident Medical Insurance per year
- \$100 Deductible per Accident
- \$5,000 Blanket Group Accidental Death & Dismemberment Benefit

Works in coordination with other insurance – meaning all other insurance pays first and then the blanket group accident medical expense benefit will pay up to the benefit maximum (minus the \$100 deductible per accident) of what the member was actually out-of-pocket for covered expense subject to limitations and exclusions of the certificate of insurance. The AD&D works based on the schedule in the Certificate of Insurance.

Blanket Group Accident Insurance is underwritten by SiriusPoint America Insurance Company

Key Benefits of the base Gap 10000 plan

Supplemental Insurance Coverage Benefits

Group Critical Illness Coverage Details

- \$10,000 Group Critical Illness lump sum benefit (after the 1st year)
- \$1,000 Group Critical Illness lump sum benefit (within the 1st year)
- Only covers First Diagnosis of a covered Critical Illness
- Coverage for Critical Illness is for Primary Member + Enrolled Spouse only
- Covered Critical Illnesses are: Heart Attack, Stroke & Invasive Cancer

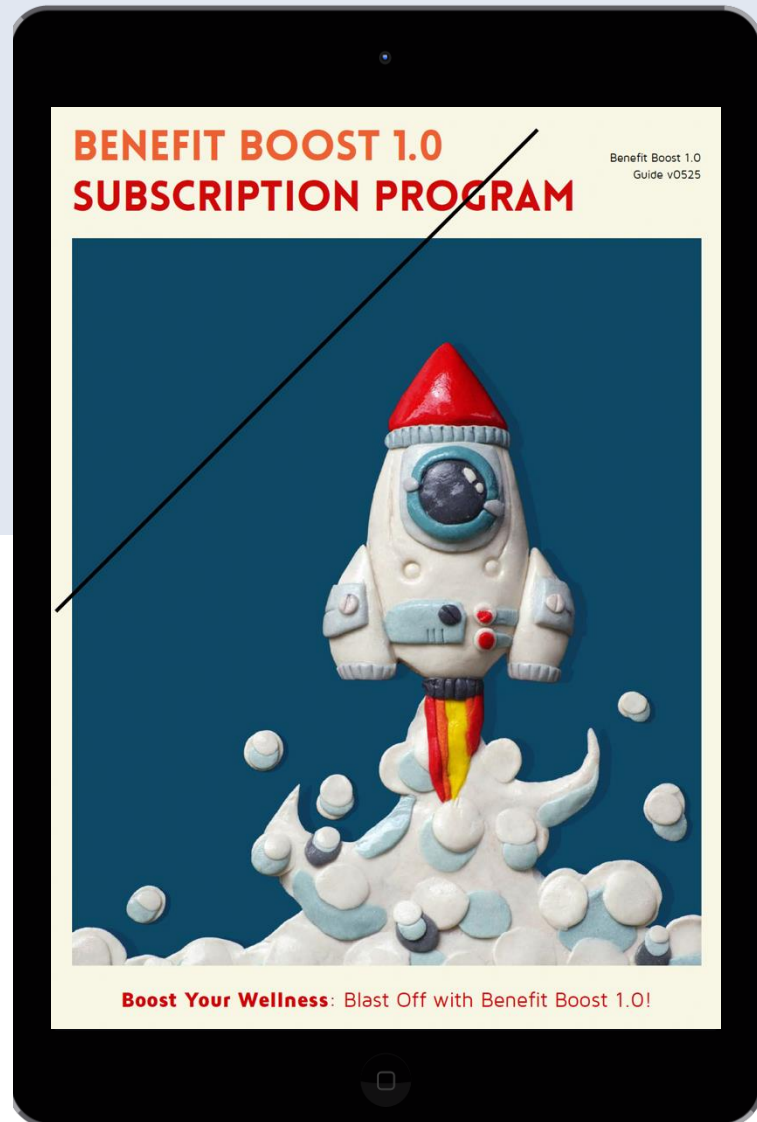


ENHANCING MEMBER PLANS WITH INNOVATIVE SOLUTIONS

In today's fast-paced world, having a reliable insurance plan is crucial, but what if you could offer more to your clients than supplemental insurance coverage?



THE **POWER OF &**
BEYOND INSURANCE



Benefit Boost 1.0 Services

Lytic Health Virtual Visits

Access to convenient healthcare from the comfort of your home.
\$0 access fee for Virtual Urgent Care or Virtual Talk Therapy Visits.

SML Dental Discounts

Save on dental care with dental discounts for members.
Access to the Aetna Dental Access Network

Paramount RX Prescription Discounts

Get reduced prices on prescriptions through Paramount's participating pharmacies. Prescription discounts for you and your pets.

Free Multi-Vitamin Gumdrops

Enjoy complimentary nutritional support for you and your family.
3 month supply Strawberry & Cherry Gummies with Reorders at no cost

LifeLock Discounts and FamilySource

Enjoy identity theft discounts & referral and resource services through LifeLock Discounts and FamilySource referral service

ENHANCE CLIENT SOLUTIONS WITH COMPLEMENT CARE

Why Choose Complement Care?

Deliver more value to your clients while boosting your compensation!



Expanded Coverage:

Offer your clients additional coverage for emergency room visits, in-office doctor consultations, or urgent care visits.



Client Satisfaction:

Enhance client satisfaction by addressing their needs for comprehensive healthcare solutions.



Financial Benefits:

Increase your compensation through offering an attractive, necessary service that adds value to your clients' health plans.



Key Benefits of the Complement Care Plan

Supplemental Insurance Coverage Benefits

Group Hospital Indemnity Coverage Details

- \$500 per covered person for Emergency Room Visits up to 2 per year
- \$125 per covered person for Doctor or Urgent Care Visits up to 4 per year

This is an indemnity so once the member files the claim and provide documents and it is determined a covered expense they will receive the lump sum indemnity amount for the covered benefit.

Blanket Group Accident Insurance is underwritten by SiriusPoint America Insurance Company

ADDING COMPLEMENT CARE IS A

For Clients:

- Greater peace of mind with additional coverage options.
- Reduced out-of-pocket expenses during emergencies or urgent medical needs.



For You:

- Strengthened client relationships by providing superior service and covering up some out-of-pocket gaps in their coverage.
- Opportunities for increased earnings.

STRATEGY

Both you and your clients benefit from this enhanced coverage.

PLAN COSTS

1

Monthly Plan Cost

GAP 10000

Individual - \$20

Ind+1 - \$30

Family - \$40

+ \$10 for UBA Dues

2

Monthly Plan Cost

GAP 10000 & BB 1.0

Individual - \$60

Ind+1 - \$100

Family - \$120

+ \$10 for UBA Dues

3

Monthly Plan Cost

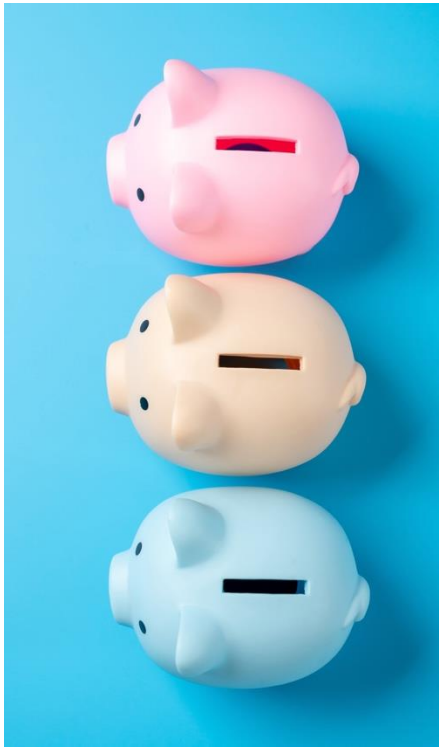
COMPLEMENT CARE

Individual - \$35

Ind+1 - \$70

Family - \$120

There is only one \$10 UBA dues required. If added with the Gap 10000 or Gap 10000 & BB 1.0, Complement Care rates are as listed above. If sold stand-alone, the \$10 UBA will be added to the plan cost listed above.



ENROLLING IS A SIMPLE PROCESS

The enrollment process for a UBA Gap Plan
takes less than 10 minutes.

<https://emp.ubaapplication.com>

The screenshot shows the UBA Enrollment page. At the top is a dark blue navigation bar with the UBA logo, 'Enroll', 'Member Portal', 'Empower Brokerage', and 'Member Sign In'. Below this is a light blue header section with the UBA logo and the text 'Become a UBA member or enroll in any optional UBA products including supplemental group insurance benefits, ancillary insurance plans, and non-insurance Benefit Boost programs.' To the right of this text is the Empower logo with the text 'Endorsed by Empower'. The main content area is titled 'UBA Enrollment' and contains the following text: 'The United Business Association (UBA) is a nationally recognized association of small business owners and employees, with over 35 business and lifestyle benefits available to UBA members and their families (spouse and dependent children, if applicable). UBA membership dues are \$10/month | [UBA Membership Details](#)'. Below this is a paragraph: 'UBA also offers a variety of products designed to reduce healthcare related expenses, each providing access to various benefits such as supplemental insurance coverage, ancillary insurance (e.g., dental or vision) plans, and non-insurance subscription services. All such supplemental products are *optional*; becoming a UBA member does not require enrolling in any supplemental product.' This is followed by 'This site allows you to:' and a bulleted list: '• Join UBA as a member only', '• Browse and enroll in optional benefit products', and '• Enroll in UBA and a supplemental product simultaneously, if desired'. Below the list are two sections: 'New Visitors >> Hit the Continue button to browse products and start a new enrollment (if desired).', and 'Existing Members [Sign In](#) to access to your account and streamline the process.' A 'Notice' box states: 'Notice: Some supplemental products require UBA membership because they include insurance benefits issued under a group policy held by UBA, and such products can be enrolled in simultaneously with UBA membership to meet that requirement. However, no supplemental product is required to enroll in UBA alone. Furthermore, some products do not require association membership and may be enrolled in standalone regardless of UBA membership status.' At the bottom right of the main content area is a blue 'CONTINUE >' button. The footer section is titled 'Help & Support' and contains the text 'Have questions or need help completing your enrollment?'. Below this is a 'No Agent' button and the text 'Specify your Agent'. At the bottom is the text 'UBA Member Services 866-438-4274'.

UBA Enroll Member Portal Empower Brokerage Member Sign In

UBA
UNITED BUSINESS ASSOCIATION

Become a UBA member or enroll in any optional UBA products including supplemental group insurance benefits, ancillary insurance plans, and non-insurance Benefit Boost programs.

Endorsed by Empower

UBA Enrollment

The United Business Association (UBA) is a nationally recognized association of small business owners and employees, with over 35 business and lifestyle benefits available to UBA members and their families (spouse and dependent children, if applicable).

UBA membership dues are \$10/month | [UBA Membership Details](#)

UBA also offers a variety of products designed to reduce healthcare related expenses, each providing access to various benefits such as supplemental insurance coverage, ancillary insurance (e.g., dental or vision) plans, and non-insurance subscription services. All such supplemental products are *optional*; becoming a UBA member does not require enrolling in any supplemental product.

This site allows you to:

- Join UBA as a member only
- Browse and enroll in optional benefit products
- Enroll in UBA and a supplemental product simultaneously, if desired

[New Visitors >>](#) Hit the Continue button to browse products and start a new enrollment (if desired).

[Existing Members Sign In](#) to access to your account and streamline the process.

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[CONTINUE >](#)

Help & Support

Have questions or need help completing your enrollment?

[No Agent](#) Specify your Agent

UBA Member Services 866-438-4274

UBA

EnrollMember PortalAbout UBA

Member Sign InAgent Sign In

UBA

UNITED BUSINESS ASSOCIATION

Become a UBA member or enroll in any optional UBA products including supplemental group insurance benefits, ancillary insurance plans, and non-insurance Benefit Boost programs.

UBA Enrollment

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UBA membership dues are \$10/month | [UBA Membership Details](#)

UBA also offers a variety of products designed to reduce healthcare related expenses, each providing access to various benefits such as supplemental insurance coverage, ancillary insurance (e.g., dental or vision) plans, and non-insurance subscription services. All such supplemental products are *optional*; becoming a UBA member does not require enrolling in any supplemental product.

This site allows you to:

- Join UBA as a member only
- Browse and enroll in optional benefit products
- Enroll in UBA and a supplemental product simultaneously

New Visitors > Choose your path forward from the options below, then hit Continue to get started.

☐ Enroll in UBA Only

Skip the products and jump directly to association enrollment.

☐ Browse Products

Browse and enroll in what suits you (including UBA membership).

Existing Members [Sign In](#) to access to your account and streamline the process.

Notice: Some supplemental products require UBA membership because they include insurance benefits issued under a group policy held by UBA, and such products can be enrolled in simultaneously with UBA membership to meet that requirement. However, no supplemental product is required to enroll in UBA alone. Furthermore, some products do not require association membership and may be enrolled in standalone regardless of UBA membership status.

To learn more about the United Business Association, including our mission, history, and organization, visit [UBAmembers.com](#).

CONTINUE

Help & Support

Have questions or need help completing your enrollment?

Your Agent

No Agent

[Specify your Agent](#)

UBA Member Services

[866-438-4274](#)

Sign In
To get all your
New Agent
Portal Features

Enter State &
Demographics

To Start Quote
Select Browse
Products

Make Sure You
See Your
Name Here

UBA

EnrollMember PortalAbout UBA

Who's Enrolling?

Residence State

The products available in which you live.

State: TX

Family Members

Product rates are based on how many family members are enrolling. In most cases, Add or remove family members to ensure accurate pricing.

Primary

Age

Yrs

Spouse

Child

Ages are optional to quote and select products; if provided, product age requirements will be checked automatically.

Switch a member off to exclude them from your (next) enrollment selection(s) without removing them from the family.

Member Sign In

—speed things up by loading in your existing account info and family members.

info for accurate product rates and availability. Then select one or more products to e

or detailed info

Prescription Drug Discount Program Powered by Paramount Rx®

Prescription Program Powered by Aetna Dental Access® Network

ual Doctor Visits | Urgent Care & Mental Health

A nationwide membership of small business owners and employees, where We are Better Together.™

Group Term Life Insurance

Group Vision Insurance

Group Insurance benefits for Accidents & Critical Illnesses

Subscription Multi-Vitamin Program

Individual Vision Insurance

Group Insurance benefits for Accidents & Critical Illnesses

Group Insurance benefits for Accidents

Group Dental Insurance | Dental HMO

Agent Use Only. Not for Consumer Use.

14

CHANGE THE WAY PLANS ARE DISPLAYED

FILTER PLANS
TO REDUCE CLUTTER

Filter Products

Showing 39 of 39 available products

Layout

Tiled

List

Filter by Product Attribute

With Insurance Benefits

26

& Benefit Boost

15

Filter by Included Benefit Type

Accident

18

Critical Illness

18

Dental

23

Doctor Visits

25

Emergency Room

6

Hospitalization

4

Prescription Drug

21

Term Life

1

Vision

2

Vitamins

20

UBA

Enroll

Member Portal

About UBA

Member Sign In

Agent Sign In

Person in TX

Showing all 39 products

PRODUCTS

Edit your enrolling family's info for accurate product rates and availability. Then select one or more products to enroll in.

Click/tap product name/logo for detailed info

PARAMOUNT Rx

FREE

+ SELECT

Prescription Drug Discount Program Powered by Paramount Rx®

Save up to 70% on Generics and up to 20% on Brand Name drugs

All FDA-approved drugs are covered

Over 57,000 Network Pharmacies

No Waiting Periods, Deductibles, or Annual Limits

Includes discounts on Pet Medications also

SMOL

\$10 /mo

+ SELECT

Dental Discount Program Powered by Aetna Dental Access® Network

Save 15% to 50%* per visit in most instances, on dental services including cleanings, X-rays, fillings, root canals and crowns

Where available, also save on specialty care services including orthodontics and periodontics

Use at any participating dentist in the nationwide network

No annual limits

lyric Virtual Visits

\$10 /mo

+ SELECT

Virtual Doctor Visits | Urgent Care & Mental Health

Virtual doctor visits - evaluation, diagnosis, and treatment for a wide range of illnesses and injuries from the comfort of your home or office

Unlimited Urgent Care and 24/7 Talk Therapy visits at NO COST per visit

Urgent Care visits for illnesses or injuries, available 24/7/365

Talk Therapy visits for mental health care or counseling needs

UBA MEMBERSHIP

\$10 /mo

+ SELECT

A nationwide membership of small business owners and employees, where We are Better Together.™

Over 35 Association Benefits & Services available to UBA Members

Membership is required to enroll in any products or programs that offer group insurance coverage or include group insurance benefits

GROUP TERM

\$12 /mo

+ SELECT

Group Term Life Insurance

\$10,000 Benefit for Primary Member

\$5,000 Benefit for enrolled Spouse

\$2,500 Benefit for each enrolled Dependent Child

UBA vision.

\$14 /mo

+ SELECT

Group Vision Insurance

\$10 Copay Annual Eye Exam

\$25 Copay Prescription Glasses with Frames

\$60 Copay Prescription Contact Lenses

Largest National Provider Network of Eye Doctors (VSP)

Benefits Available at ANY Eye Doctor, in or Out of Network

GROUP 25000

\$15 /mo

+ SELECT

Group Insurance benefits for Accidents & Critical Illnesses

\$5,000 Blanket Group Accident Insurance

\$5,000 Critical Illness Benefit

\$2,500 Accidental Death & Dismemberment Benefit

BENEFIT BOOST VITAMINS

\$15 /mo

+ SELECT

Subscription Multi-Vitamin Program

Multi-Vitamin Subscription Program

Private label vitamins of the same quality currently found on the shelves of pharmacies, supermarkets, and other retail outlets

90-day supply shipped right to your door at no cost as long as you're subscribed

vsp individual vision plans

\$15.07 /mo

+ SELECT

Individual Vision Insurance

\$15 Copay Annual Eye Exam

\$25 Copay Prescription Glasses with Frames

\$0 Copay Prescription Contact Lenses

Largest National Provider Network of Eye Doctors (VSP)

Out of Network Coverage available in all states except MA and WA

VIEW LARGE TILE CARDS
WITH DESCRIPTIONS

UBA

Enroll

Member Portal

About UBA

Member Sign In

Agent Sign In

Person in TX

Showing all 39 products

PRODUCTS

Edit your enrolling family's info for accurate product rates and availability. Then select one or more products to enroll in.

Click/tap product name/logo for detailed info

PARAMOUNT Rx

FREE

+ SELECT

Prescription Drug Discount Program Powered by Paramount Rx®

SMOL

\$10 /mo

+ SELECT

Dental Discount Program Powered by Aetna Dental Access® Network

lyric Virtual Visits

\$10 /mo

+ SELECT

Virtual Doctor Visits | Urgent Care & Mental Health

UBA MEMBERSHIP

\$10 /mo

+ SELECT

A nationwide membership of small business owners and employees, where We are Better Together.™

GROUP TERM

\$12 /mo

+ SELECT

Group Term Life Insurance

UBA vision.

\$14 /mo

+ SELECT

Group Vision Insurance

GROUP 25000

\$15 /mo

+ SELECT

Group Insurance benefits for Accidents & Critical Illnesses

BENEFIT BOOST VITAMINS

\$15 /mo

+ SELECT

Subscription Multi-Vitamin Program

vsp individual vision plans

\$15.07 /mo

+ SELECT

Individual Vision Insurance

GROUP 10000

\$20 /mo

+ SELECT

Group Insurance benefits for Accidents & Critical Illnesses

UBA ACCIDENT

\$2 /mo

+ SELECT

Group Insurance benefits for Accidents

OraQuest

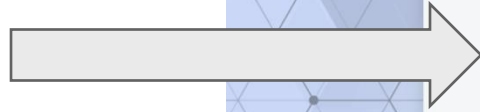
\$0 /mo

+ SELECT

Group Dental Insurance | Dental HMO

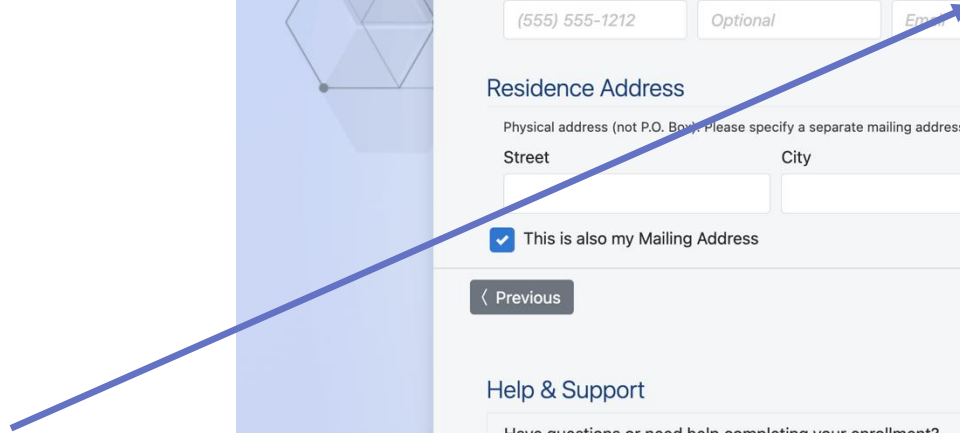
VIEW SMALLER PLAN
NAME SELECTION TILES

ENTER CUSTOMER
DEMOGRAPHIC &
FAMILY INFORMATION



CLIENT EMAIL IS IMPORTANT

- Benefits are tied to this email
- Member Portal is tied to email



UBA

Enroll

Member Portal

About UBA

Member Sign In

Agent Sign In

2 \$30.00/month <

ENROLL

HOUSEHOLD DETAILS

Family Members

Primary

First Name

MI

Last Name

Sex

Date of Birth

First

Last

mm/dd/yyyy

+ Add Spouse

+ Add Child

Contact Information

Phone Number

Alt. Phone

Email Address

(555) 555-1212

Optional

Email

Residence Address

Physical address (not P.O. Box). Please specify a separate mailing address if you use a P.O. Box.

Street

City

State

Zip Code

TX

☒ This is also my Mailing Address

< Previous

CONTINUE >

Help & Support

Have questions or need help completing your enrollment?

Your Agent

No Agent

[Specify your Agent](#)

UBA Member Services

866-438-4274

TEST ENVIRONMENT

This environment is for submitting test or demo enrollment applications only, and will NOT result in actual enrollment. All test/demo data is purged every Saturday at 11:01 PM Central.

Site Config Code uba_default

UBA

UNITED BUSINESS ASSOCIATION

Agent Use Only. Not for Consumer Use.

UBA

EnrollMember PortalAbout UBA

Agent Sign In

> | 1 Person in TX

2

\$30.00/month<

ENROLL

ADDITIONAL INFORMATION

EFFECTIVE DATE

Your benefits will be active and available for use beginning on your Effective Date. The selected date will apply to all enrollments.

Requested Effective Date

12/01/2025

UBA QUESTIONS

This section pertains to the UBA Membership and Gap 10000 enrollments.

1. Are you an owner or an employee of a small business (less than 50 employees)?

☐ Yes☐ No

< Previous

CONTINUE >

Help & Support

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Your Agent

No Agent

[Specify your Agent](#)

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UBA

UNITED BUSINESS ASSOCIATION

CHOOSE AN
EFFECTIVE DATE
1st or 15th

(VSP and Dental Plans are only the
available for 1st e-dates)

Answer UBA
Required
Eligibility Question

*Must be answered Yes
for SiriusPoint Plans*

PAYMENT AND E-SIGNATURE METHOD PAGE

1 Person in TX

2 \$30.00/month

ENROLL

PAYMENT INFORMATION

PAYER RELATION

Who is paying for this enrollment?

☒ Myself ☐ Someone Else

PAYMENT METHOD

☒ ACH ☐ Credit

BANK ACCOUNT INFORMATION

Account Type

☒ Checking ☐ Savings

Account Holder Name

Account Number

Routing Number

BILLING ADDRESS

Select from Addresses

Street

City

State

Zip Code

Enrolling In [Edit](#)

Gap 10000

Group Insurance benefits for Accidents & Critical Illnesses

UBA Membership

A nationwide membership of small business owners and employees, where We are Better TogetherSM

Total Monthly \$30.00

Your Agent

No Agent [Specify Agent](#)

E-SIGN LINK DELIVERY

Next we'll send a link for you to review, e-sign, and submit your finalized application. Choose how you wish to receive the link.

Verify that the selected email address or phone number is correct. Your application contact information will be updated with any changes.

☒ Email to Applicant Email

☐ SMS/Text Message to Primary Phone

☐ SMS/Text Message to Alt Phone

[Previous](#) [CONTINUE](#)

Help & Support

Have questions or need help completing your enrollment?

☒ No Agent [Specify your Agent](#)

UBA Member Services 866-438-4274

This website and all memberships, products or programs available for enrollment here are administered by H A Partners, Inc on behalf of the United Business Administration (UBA). For questions regarding enrollment or billing specific to UBA Membership or products available on this site, or website-related technical assistance, contact UBA customer service at 1-866-438-4274 or info@ubamembers.com.

The Empower logo is a registered trademark of Empower Brokerage, Inc. For any information regarding insurance products purchased through or administered by Empower, visit empowerbrokerage.com

CHOOSE PAYMENT METHOD
ENTIRE PAYMENT INFO
ENTER PAYOR BILLING ADDRESS

SELECT E-SIGN LINK DELIVERY METHOD
EMAIL OR TEXT MESSAGE OPTIONS

Once you hit Continue button, the app is submitted and **your part is done**. The client will then need to e-sign from their email link or text message link.

Hit the EXIT
Button to close out the
app and clear it for your
next enrollment

YOUR PART IS
COMPLETE

ENROLL

Application ID 268

E-SIGN LINK SENT

NOTICE - TEST ENVIRONMENT - TEST APP ONLY. This application was created in a Testing or Demo Environment. It can be e-signed to simulate the full enrollment process, but will NOT be transmitted or processed, and will not result in actual enrollment. This environment is for testing only, and all data is purged weekly.

Check Your Email

Almost done! The last remaining step is to review and e-sign your enrollment application.

Check your inbox for an email with the subject line "E-Sign Your Application" from UBA Enrollment. Follow the link in that email to review, e-sign, and submit your finalized enrollment application.

 If the email isn't delivered to your inbox within a few minutes, check your junk mail or spam folder also.

 For privacy protection purposes, the e-sign link is valid for only a short time after it's sent; please be sure to follow the link and e-sign your application before it expires.

NOTICE: Your enrollments are not yet complete, and will not be processed or activated, until your application is e-signed and submitted.



Help & Support

Have questions or need help completing your enrollment?

No Agent Specify your Agent

UBA Member Services 866-438-4274

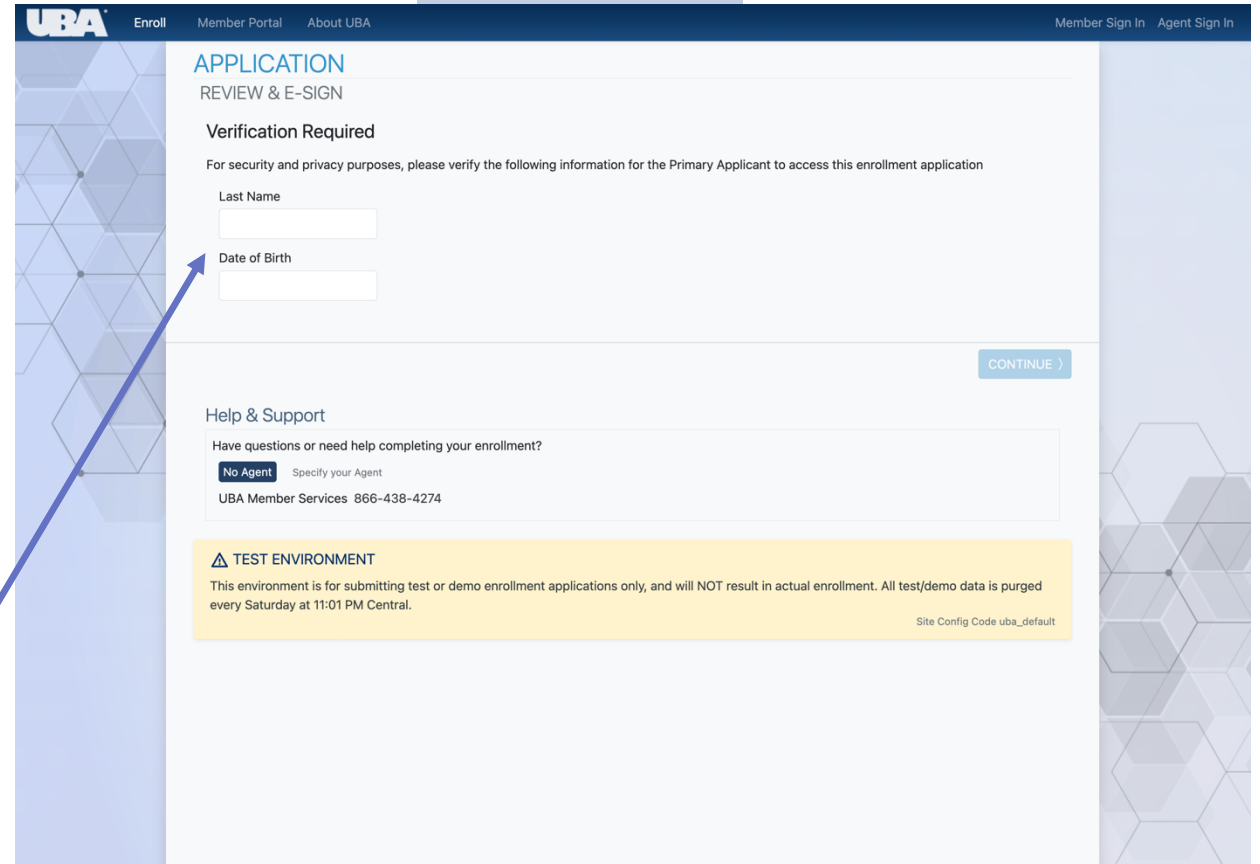
 **TEST ENVIRONMENT**

This environment is for submitting test or demo enrollment applications only, and will NOT result in actual enrollment. All test/demo data is purged every Saturday at 11:01 PM Central.

Site Config Code uba_default

CUSTOMER PART OF ENROLLMENT PROCESS

The member has a simple process to complete the app. Once they click on the link in their email or text message, they enter their Last Name and Date of Birth then hit continue.



UBA Enroll Member Portal About UBA Member Sign In Agent Sign In

APPLICATION

REVIEW & E-SIGN

Verification Required

For security and privacy purposes, please verify the following information for the Primary Applicant to access this enrollment application

Last Name

Date of Birth

[CONTINUE >](#)

Help & Support

Have questions or need help completing your enrollment?

[No Agent](#) Specify your Agent

UBA Member Services 866-438-4274

TEST ENVIRONMENT

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Site Config Code uba_default

UBA® Enroll Member Portal About UBA

Person in TX Application ID 268

ENROLL REVIEW

REVIEW YOUR INFORMATION

Please carefully review all the application information being provided about you and any other enrolling family members, as well as your answers to any questions required by the product(s) in which you are requesting enrollment.

Ensure that all information and answers provided are complete and accurate.

[Review Your Information](#)

REVIEW YOUR ENROLLMENTS

This application is requesting two (2) new enrollments.

Please review the detailed information for each of your enrollments below, including the full descriptions of all benefits, the details of any insurance coverage provided, and all terms, conditions, limitations and exclusions. (Click or tap the enrollment to view its details.)

UBA Membership	\$10.00/mo
A nationwide membership of small business owners and employees, where life is Better Together™	
Gap 10000	\$20.00/mo
Group Insurance benefits for Accidents & Critical Illnesses	

EFFECTIVE DATE

The Effective Date is the official start date of your enrollments; the first day that benefits will be available to use and any included insurance coverage will begin. The same effective date will be applied to all of this application's enrollments.

Please note that your effective date is subject to change until your application is completely processed and your enrollments are activated. Be sure to confirm the effective date of your enrollments before attempting to use any benefits.

Requested Effective Date

11/15/2025

REVIEW DISCLAIMERS

UBA Disclaimer

The United Business Association (UBA) is a nationwide association of small business owners and employees. UBA leverages our purchasing power to secure benefits and discounts for our members that may not be otherwise available on an individual basis. With access to short term medical insurance, association group insurance programs, and non-insurance subscription programs, plus shared business knowledge, business and lifestyle benefits and services, and opportunities to network, We are Better Together.

UBA Membership is not health insurance. With availability varying by state, Membership provides access to association group insurance programs wherein insurance policies have been issued to UBA as the group master policyholder, and coverage is provided to association members enrolled in those programs. You must be a UBA member to enroll in any such association group insurance program. These programs are optional; joining UBA does not require enrolling in any additional program, service, plan, or product. Any insurance benefit available through enrollment in an optional supplemental UBA product or program is subject to the terms, conditions, definitions, limitations, and exclusions according to the insurance policy / rider or certificate of insurance.

To view full association membership details, terms, privacy notice, refund policy, benefits & services, state availability, exclusions and limitations, please review the UBA Membership Guide. UBA cannot warrant or guarantee the performance of any discount or service, and reserves the right to modify or replace any benefits or services at any time. Services and product cost are subject to change. We will notify you of any changes to your benefits in accordance with your state's requirements.

As part of the terms and conditions of enrolling as a member of the United Business Association, you agree to be placed on the UBA member mailing list for standard member correspondence. UBA periodically sends out membership newsletters and important notices concerning your membership, as well as benefits and services updates which could include new benefits or product offerings available to UBA members. These communications are sent by UBA; the TPA, H A Partners Inc.; or the Marketing Agency, HealthyAmerica Insurance Agency. Your email address and mailing address will not be used for any other purposes, and will be removed from the mailing list upon cancellation of your membership.

Optional Supplemental Insurance Program Disclaimer

Supplemental Insurance Benefits are available to members of the United Business Association (UBA) through a variety of optional Supplemental Insurance Programs whereby members can choose to enroll in a Program for a monthly fee that is in addition to their UBA membership dues. The Supplemental Insurance Benefits included in these Programs are NOT major medical insurance; these Programs are intended to supplement the member's comprehensive health insurance coverage, NOT replace it. UBA Supplemental Insurance Programs should not be purchased or enrolled in to replace any major medical insurance, Cobra, Medicare, Medicaid, or Medical Disability coverage that you have in place currently. UBA Supplemental Insurance Programs do not satisfy the requirement of minimum essential coverage under the Affordable Care Act and do not qualify or generate a 1095-A tax form.

Accident and Critical Illness Benefits Disclaimer

Blanket Accident Insurance and Group Critical Illness Insurance are underwritten by SiriusPoint America Insurance Company, New York, NY. The insurance provides limited benefits. Limited benefit plans are insurance products with reduced benefits intended to help supplement comprehensive health insurance plans. The insurance coverage is not an alternative to comprehensive coverage and is not designed to replace major medical insurance. Covered Critical Illnesses are subject to the definitions, limitations and exclusions of the Group Policy. Coverage for Critical Illness is for Member and eligible Spouse between the ages of 18-64. Benefit for Group Critical Illness Insurance ends at age 65. See the Certificate(s) of Insurance for complete details including all terms, conditions, limitations, and exclusions.

By checking 'I agree' below, you agree that 1) you have reviewed your application information and confirm that all information and answers provided are complete and accurate; 2) you have reviewed the enrollment(s) that you are requesting with this application, and the detailed product information for each, and understand all benefits, terms, limits, and exclusions; and 3) you understand and accept all of the above disclaimers that pertain to the specific product(s) in which you are requesting enrollment.

☐ I agree

[CONTINUE](#)

Help & Support

Have questions or need help completing your enrollment?

[No Agent](#) Specify your Agent

UBA Member Services 866-438-4274

TEST ENVIRONMENT

This environment is for submitting test or demo enrollment applications only, and will NOT result in actual enrollment. All test/demo data is purged every Saturday at 11:01 PM Central.

Site Config Code uba_default

Member can review app
Read through Disclosures
Agree to Disclaimers

UBA

EnrollMember PortalAbout UBA

> | Person in TX

Application ID 268

ENROLL

CONFIRM & E-SIGN

By electronically signing your application, you authorize billing of your enrollments in the total amount shown below to the payment method you provided.

ENROLLMENT SUMMARY

UBA Membership

\$10.00

A nationwide membership of small business owners and employees, where We are Better TogetherSM

Gap 10000

\$20.00

Group Insurance benefits for Accidents & Critical Illnesses

Total Monthly \$30.00

PAYMENT INFORMATION

Payment Method: Credit Card (Visa)

Card Holder

Jane Tester

Card Number

XXXX-XXXX-XXXX-1111

Exp.

10/27

PAYMENT AUTHORIZATION

You authorize H A Partners, Inc (HAPI) to initiate charges to your credit card in the total monthly amount shown for the enrollment(s) being requested with this application. This authorization will remain in effect until HAPI receives notice from you that it should be cancelled.

Your first monthly payment will be charged immediately when your application is processed. Subsequent monthly payments will be charged on the 5th each month if your effective date is the 1st, or the 15th each month if your effective date is the 15th, beginning the month after your effective date. Your credit card statements will show all payment transactions related to your enrollment(s) as being paid to "UBA GAP 866-438-4274".

You agree that if any such charge be dishonored, whether with or without cause and whether intentionally or inadvertently, it may result in forfeiture of your enrollment(s) and all associated benefit(s) and/or coverage(s), and neither HAPI nor your financial institution shall be held liable whatsoever.

Cancellation of any enrollment requires at least 10 days advance notice except during the initial Satisfaction Assurance period. Refunds of completed payments are available only during the initial Satisfaction Assurance period. See the Satisfaction Assurance policy(ies) pertaining to your enrollment(s) for the initial Satisfaction Assurance period(s) which may vary by enrollment product. Cancellation requests can be submitted online through the UBA Member Portal, by email to billing@ubaapplication.com, or by phone at 866-438-4274.

You will receive your I.D. Card for any applicable enrollment(s) in the mail within 14 days of initial payment. Digital copies of I.D. Cards, Membership Guides, Certificates of Insurance, and all other information pertaining to your enrollment(s), will be immediately available for download upon completion of your application. Please take the time to review all Guides and Certificates to ensure you fully understand all enrollment products and benefits, including any limitations, exclusions, definitions, or state variations.

ENROLLMENT CERTIFICATION (SiriusPoint America Insurance Company)

I hereby declare that I am in an eligible class of the Policyholder. I affirm, to the best of my knowledge and belief, that all information given by me on this form is true and complete. I have read, or had read to me, the completed enrollment form.

I also enroll for the Blanket Accident Insurance plan offered by the Policyholder. The Type of Coverage selected above for Group Critical Illness Insurance will also apply to my Blanket Accident Insurance coverage. The Total Deduction shown above will reflect the combined amount due for Group Critical Illness Insurance and Blanket Accident Insurance.

APPLICANT SIGNATURE

Sign your application by typing your first and last name exactly as entered on your application. Your signature will be saved to your application along with your IP address and the current date & time. You agree that your electronic signature will serve as your original signature, and by signing you agree to all acknowledgements, agreements, authorizations, and certifications that have been presented to you based on the product(s) in which you are requesting enrollment.

I hereby request enrollments in UBA Membership and Gap 10000. I have reviewed, understand, and agree to all terms and conditions related to these enrollments.

I authorize H A Partners, Inc, the Administrator of these enrollments, to charge the monthly amount according to the Enrollment Summary above to the credit card I have provided. I attest that I am the owner of, an authorized signer on, or have been granted express authority to use, the credit card provided for these charges. I agree that this Authorization is to remain in force until revoked by me in writing to 409 W Vickery Blvd, Fort Worth, TX 76104 or by phone at 866-438-4274.

WARNING: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application/enrollment form containing any false, incomplete, or misleading information may be guilty of a crime and may be subject to fines and confinement in prison.

Electronic Signature (Jane Tester)

Type your first and last name to sign

SATISFACTION ASSURANCE

We want you to be completely satisfied. If you have any problems, or any questions at all about an enrollment or benefit, please don't hesitate to call Member Services at 866-438-4274.

30-Day Satisfaction Assurance Policy for Gap 10000 and UBA Membership Enrollments

If for any reason you are not completely satisfied with your enrollment, just notify us anytime up to thirty (30) days after your Effective Date to cancel and receive a full refund of all dues, premiums, or fees paid.

Notice: for any enrollment in a program or product that provides insurance benefits or coverage, enrollment costs cannot be refunded if an insurance claim has been filed.

Outside of the Satisfaction Assurance period defined above, cancellation of an enrollment requires at least 10 days advance notice. Cancellation requests can be made by email to billing@ubaapplication.com, by phone at 866-438-4274, or through the UBA Member Portal. Refunds of completed enrollment payments are available only during the Satisfaction Assurance period. Please allow 7-10 business days from the date of request for an issued refund to complete processing.

[Previous](#)

[SUBMIT](#)

Member Types in Name for Electronic Signature

THE APP IS NOW SUBMITTED & WAITING TO BE DRAFTED

UBA Enroll Member Portal About UBA

APPLICATION COMPLETE Application ID 268

NOTICE - TEST APP ONLY. This application was submitted in a Test or Dev environment, and will NOT be transmitted, reviewed, or processed. This environment is for testing only, with the data temporarily saved to test databases and directories only. Any enrollment forms, certificates, or policies that have been generated and made available below are for test/demo purposes only, and include watermarks to indicate such.

SUCCESS ✓

ALL DONE! Thank you for e-signing and completing your enrollment application, and welcome to the United Business Association, new UBA Member! Your completed application and enrollment requests have been successfully submitted for processing.

Submission Date Nov 5th, 2025
Effective Date Nov 15th, 2025 *

Your **new** Member ID 9726310

Here's what's next ⓘ

- You can download your new ID Card(s) and access all member information to use your new benefits, at the [UBA Member Portal](#).
 - Since we've already verified your email address and confirmed your identity, the above link to the Member Portal makes registering quick & easy (just click & enter your desired login password when you get there). If you don't have time to create your Member Portal login now, no worries: Your 'Application Complete' confirmation email will include your Member ID as well as a link to the Member Portal, so take care of it at your leisure.
- You'll receive your welcome letter and hard copy ID Card(s) in the mail within two weeks.
 - Hard copies are nice, but it isn't necessary to wait for them to use your benefits: you can download or print digital copies of your ID Card(s) right now in the Member Portal.
- After your enrollments are processed and activated, you'll be able to start using your new benefits on the Effective Date 11/15/2025. *

Full Member Guides and/or insurance coverage documents pertaining to your enrollments, such as Policies or Certificates of Insurance, are all available to you in the [UBA Member Portal](#).

* Delays in enrollment processing, though uncommon, can occur for various reasons out of our control (e.g., missing/invalid application information or initial payment failure), and so the Effective Date cannot be guaranteed and is subject to change until processing is complete and your enrollments are activated.

[UBA Member Portal](#)

ENROLLMENT FORMS

The UBA Enrollment Application is the full, UBA-official document, containing your enrollment summary with product and cost information, along with every question asked, answer provided, disclaimer presented, and agreement agreed to along your enrollment application journey. Any other enrollment forms listed are required by, and specific to, a particular product or benefit within your enrollments. These forms are also provided in the UBA Member Portal.

- UBA Enrollment Application
- Enrollment Form (SPAIC-CI Opt Accident)

SATISFACTION ASSURANCE

We want you to be completely satisfied. If you have any problems, or any questions at all about an enrollment or benefit, please don't hesitate to call Member Services at 866-438-4274.

30-Day Satisfaction Assurance Policy for Gap 10000 and UBA Membership Enrollments

If for any reason you are not completely satisfied with your enrollment, just notify us anytime up to thirty (30) days after your Effective Date to cancel and receive a full refund of all dues, premiums, or fees paid.

Notice: for any enrollment in a program or product that provides insurance benefits or coverage, enrollment costs cannot be refunded if an insurance claim has been filed.

Outside of the Satisfaction Assurance period defined above, cancellation of an enrollment requires at least 10 days advance notice. Cancellation requests can be made by email to billing@ubaapplication.com, by phone at 866-438-4274, or through the UBA Member Portal. Refunds of completed enrollment payments are available only during the Satisfaction Assurance period. Please allow 7-10 business days from the date of request for an issued refund to complete processing.

[EXIT](#)

MEMBERS CAN NOW LOGIN TO MEMBER PORTAL
TO DOWNLOAD CERTIFICATES OF INSURANCE,
CLAIM FORMS, DIGITAL ID CARDS, AND MORE

<https://members.ubaapplication.com>

MEMBERS CAN DOWNLOAD ENROLLMENT FORMS (PDFS)
If app is e-signed by Wednesday before midnight:
We draft initial payment that same Friday

All future drafts:
The 5th (1st effective dates)
The 15th (15th effective dates)

Agent Use Only. Not for Consumer Use.



QUESTIONS

Contact Shelly Wiegand
shelly.Wiegand@healthyamerica.biz
800-964-8331 ext 219