

COMPLIANCE AND AFFORDABILITY ALL IN ONE PRODUCT LINE!

Offer a plan with rates as low as \$60 including aggregate coverage and build a suite of buy up options for a top of the line benefit package that can't be beat.

PLAN OPTIONS

BENEFIT	MEC	MEC VALUE	MEC+	MVP	SPEC & AG BUY UP Hybrid	SPEC & AG BUY UP (Select Full RBP or Full PPO)
Preventive Care- Men, Women & Children	100% -PPO	100% - PPO	100% - PPO	100% - PPO	100% - PPO	100%
Deductible	\$0	\$0	\$0	\$0	Employer Selects	Employer Selects
Maximum Out of Pocket	\$0	\$6,350/\$12,700	\$6,350/\$12,700	\$6,500/\$13,000	Employer Selects	Employer Selects
*Telemedicine	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay - Included	\$0 Co-pay - Included
Primary Care Visit to Treat an Injury or Illness (exc. Well Baby, Preventive, and X-rays)		\$10 Co-pay (limited to 3 annual visits) - PPO	\$15 Co-pay - PPO	\$25 Co-pay - PPO	Employer Selects - PPO	Employer Selects
Specialist Visit			\$25 Co-pay - PPO	\$75 Co-pay - PPO	Employer Selects - PPO	Employer Selects
**Imaging (CT, PET Scans, MRIs)			\$400 Co-pay+20% - PPO	\$300 Co-pay for each test Performed- PPO	Employer Selects - PPO	Employer Selects
Laboratory Outpatient and Professional Services		\$10 Co-pay (limited to 3 annual visits) - PPO	\$50 Co-pay - PPO	\$100 Co-pay - PPO	Employer Selects - PPO	Employer Selects
X-rays and Diagnostic Imaging		\$10 Co-pay (limited to 3 annual visits) - PPO	\$50 Co-pay - PPO	\$100 Co-pay - PPO	Employer Selects - PPO	Employer Selects
Urgent Care			\$50 Co-pay+ 20% - PPO	\$100 Co-pay + 20% - PPO	Employer Selects - PPO	Employer Selects
Emergency Room Services			\$400 Co-pay+ 20% - PPO	\$500 Co-pay - RBP	Employer Selects - RBP	Employer Selects
Emergency Professional				\$500 Co-pay - RBP	Employer Selects - RBP	Employer Selects
Hospital Inpatient				\$5,000 Co-pay per day - RBP	Employer Selects - RBP	Employer Selects
Inpatient/Outpatient Surgery***Performed in Office, Surgical Facility or Hospital				50% (covers facility fee only) - RBP	Employer Selects - RBP	Employer Selects
Skilled Nursing					Employer Selects - RBP	Employer Selects
Ambulance Services					Employer Selects - RBP	Employer Selects
Durable Medical Equipment/ Prosthetics/Orthotics (\$2,000 Combined Annual Maximum)					Employer Selects - RBP	Employer Selects
Diabetic Equipment					Employer Selects - RBP	Employer Selects
Spinal Manipulation and Acupuncture (\$500 Combined Annual Maximum)					Employer Selects - RBP	Employer Selects
Prescription Drugs						
Generics			\$25 Co-pay	\$30 Co-pay	Employer Selects	Employer Selects
Preferred Brand Drugs			\$50 Co-pay	Not Covered ¹	Employer Selects	Employer Selects
Non-Preferred Brand Drugs			\$75 Co-pay		Employer Selects	Employer Selects
Specialty					Employer Selects	Employer Selects
Self-Injectable Drugs					Employer Selects	Employer Selects
ACA Compliance	MINIMUM ESSENTIAL COVERAGE PLANS			MINIMUM ESSENTIAL COVERAGE & MINIMUM VALUE PLANS		

- Please refer to detailed schedule of benefits for complete benefit outline, exclusions and limitations.
- All plans include out of network coverage at a lessened coinsurance level.
- Minimum enrollment varies by state.

* Telemedicine is optional for MEC, MEC Value, MEC+, and MVP plans.

** Applies to imaging not performed in a hospital. If performed in the hospital, this is an RBP benefit.

*** All non-emergency surgery requires pre-certification; failure to pre-certify results in no benefit.

¹ If no generic is available, then a \$60 co-pay applies.

RBP - Maximum reimbursement level for all providers will be a percentage of Medicare Allowable.

PPO - Maximum reimbursement level will be subject to the PPO contracted provider rate. PPO for Full PPO Buy Up utilizes the Cigna Network or First Health Network.

All others are PHCS through MultiPlan or First Health Network. (Your PPO Network selection will be subject to availability in your area.)



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