

# Group Health - Healthpays HSA



# GroupHealth

**All benefits shown below are “out of network” benefits using the First Choice network. [www.fchn.com](http://www.fchn.com)**

(Beech Street nationwide). If you go outside the First Choice network, you will be responsible for amount billed above the allowed amount.

**See Group Health summary for Alliant Plus in-network benefits which are 80% coverage and unlimited preventive benefit.**

## Deductible Options:

**Individual Plan \$2,750 deductible for individual / \$2,350 co-insurance maximum**

**Family Plan \$5,500 deductible for family / \$4,700 co-insurance maximum**

**Deductible is waived and you pay 40% co-insurance for preventive care.**

\$300 individual/\$600 family annual benefit maximum. (Well adult and well child physicals, preventive diagnostic lab, immunizations, pap smears, prostate/colorectal cancer screening)

Deductible is waived for mammogram only at a Group Health facility.

**All other services, paid AFTER deductible is met**

- Office visits - you pay 40% co-insurance
- Hospital and Physician Services – you pay 40% co-insurance
- Emergency care – you pay 20% co-insurance
- Out-of-Pocket Maximum = Deductible plus co-insurance maximum

## Notes regarding coverage:

- Inpatient physical therapy – 30 days PCY
- Outpatient - 60 visits PCY
- Includes inpatient and outpatient mental health
- Spinal manipulations, 10 PCY
- Acupuncture, 8 visits PCY
- Naturopath, 3 visits PCY
- No fourth quarter deductible “carry-over”
- Includes occupational injury coverage.  
Subscriber only (if not covered by L&I)

AGE	\$2750 INDIVIDUAL \$5500 FAMILY	
	NS	SMOKER
<25	\$97	\$117
25-29	\$106	\$128
30-34	\$117	\$140
35-39	\$129	\$155
40-44	\$157	\$189
45-49	\$187	\$224
50-54	\$224	\$269
55-59	\$277	\$331
60-64	\$350	\$419
65>	\$350	\$419
Per child	\$77	

## Partial list of Exclusions

Maternity, vision, prescription drugs

**Please note:** This plan is considered a catastrophic plan. If you change to a comprehensive plan at a later date, you will need to satisfy a new nine month waiting period for preexisting conditions you have been diagnosed, treated or medicated for in the past six months.

\*This flyer was prepared by the **Health Insurance Connection, Inc.**

This is a brief summary of benefits and is not a certificate of coverage. For full coverage provisions, including a description of waiting periods and limitations, refer to a benefit brochure and contract. This summary is not a contract. Rates are scheduled to increase July 1, 2012. However, due to health care reform mandated coverage there could be a slight increase before that date.