

Choose Your Deductible²

In Network		Out of Network	
Deductible	Out-of-Pocket Maximum	Deductible	Out-of-Pocket Maximum
\$500 Individual / \$1,000 Family	\$1,500 Individual / \$3,000 Family	\$1,000 Individual / \$2,000 Family	\$2,500 Individual / \$5,000 Family
\$750 Individual / \$1,500 Family	\$2,250 Individual / \$4,500 Family	\$1,500 Individual / \$3,000 Family	\$4,500 Individual / \$8,000 Family
\$1,000 Individual / \$2,000 Family	\$3,000 Individual / \$6,000 Family	\$2,000 Individual / \$4,000 Family	\$6,500 Individual / \$11,000 Family
\$3,000 Individual / \$5,000 Family	\$6,000 Individual / \$10,000 Family	\$5,000 Individual / \$8,000 Family	\$11,000 Individual / \$16,000 Family
\$5,000 Individual / \$10,000 Family	\$10,000 Individual / \$15,000 Family	\$9,000 Individual / \$14,000 Family	\$16,000 Individual / \$22,000 Family

Managing your healthcare expenses wisely has never been more important than in today's challenging economic times. As you shop health plan options, deductibles and out-of-pocket maximum amounts are key variables to understand when managing your expenses. Remember, not all health plans offered in the marketplace are the same.

- **Deductible** – With Optima, once two or more covered persons meet two times the individual medical deductible, the family deductible is met. At that point, no other medical deductible has to be met for the rest of the plan year.
- **Out-of-pocket maximum** – With Optima, your out-of-pocket maximum includes your deductible. Once the out-of-pocket maximum is reached, Optima pays 100% of most in-network charges for the remainder of the year.

Member Benefits

Physician and Preventive Benefits ²	In Network	Out of Network AD*
Office Visit	\$25 per visit	60%
Specialist Visit	\$40 per visit	60%
Preventive Care Services	100%	60% up to a maximum benefit
Preventive Screenings	100%	60%
Preventive Vision (1 eye exam every 2 years)	100%	\$30 maximum benefit
Well Child Immunizations	100%	60%

(birth to age 36 months)		
Outpatient Mental Health Care (20 visit limit)	\$40 copay, 1st 5 visits, 50% thereafter	60%

Benefits listed below are covered at the following coinsurance levels which Optima pays after deductible. Once maximum out-of-pocket (which includes your deductible) is reached, Optima pays 100% for covered services for the remaining year (subject to specific limitations and exclusions).²

Additional Member Benefits	In Network AD*	Out of Network AD*
Hospitalization	80%	60%
Surgery - Inpatient/outpatient	80%	60%
Lab & Xray	80%	60%
Urgent Care Center	80%	50%
Ambulance	80%	60%
Dialysis	80%	60%
Outpatient Chemotherapy	80%	60%
MRI, MRA, CT and PET Scans	80%	60%
Emergency Room	80%	80%
Therapy	80%	60%
Rehabilitation	80%	60%
Durable Medical Equipment	80%	60%

All Plans include the following Prescription Drug Coverage²

Prescription Drugs	No annual dollar limit per individual
Deductibles	\$150 Annual deductible per person
Tier 1	\$15 copay
Tier 2	\$30 copay or 40%, whichever is greater
Tier 3	\$50 copay or 50%, whichever is greater

Optional Benefits

You may personalize your plan by purchasing additional benefits to expand your coverage. These options or policy riders include maternity, prosthetics, obesity treatment and child health supervision. For details, ask an Optima Health representative or your broker.

*After deductible