

Satisfies all 71 benefits required by the PPACA	100% Coverage for Preventative Care Services	100% Coverage for Preventative Care Services
<b>PPO Network Services</b>		
TELADOC 24/7 (Multilingual)	<b>FREE</b> (unlimited)	<b>FREE</b> (unlimited)
Primary Care Physician Visits	<b>\$20 Copay</b> (max 3 visits per plan year)	<b>\$20 Copay</b> (max 3 visits per plan year)
Specialist Office Visits	<b>\$50 Copay</b> (max 3 visits per plan year)	<b>\$50 Copay</b> (max 3 visits per plan year)
Urgent Care	<b>\$50 Copay</b> (max 3 visits per plan year)	<b>\$50 Copay</b> (max 3 visits per plan year)
Diagnostic X-ray and Lab	<b>\$50 Copay</b> (in offices, max 5 services per plan year)	<b>\$50 Copay</b> (in offices, max 5 services per plan year)
CT Scan/MRI (outpatient only)	<b>\$200 Copay</b> (max 1 CT Scan, 1 MRI per plan year)	<b>\$200 Copay</b> (max 1 CT Scan, 1 MRI per plan year)
<b>Prescription Benefits</b>		
Tier 1 - Low Cost	<b>\$1 Copay</b>	<b>\$1 Copay</b>
Tier 2 - Generics	<b>10% Coinsurance</b>	<b>10% Coinsurance</b>
Tier 3 - Preferred	<b>20% Coinsurance</b>	<b>20% Coinsurance</b>
Tier 4 - Non-Preferred	<b>40% Coinsurance</b>	<b>40% Coinsurance</b>
Tier 5 - Generic & Preferred Specialty	<b>10% Coinsurance</b> (Plan pays 90% up to max of \$150)	<b>10% Coinsurance</b> (Plan pays 90% up to max of \$150)
Tier 6 - Non-Preferred	<b>20% Coinsurance</b> (Plan pays 80% up to max of \$250)	<b>20% Coinsurance</b> (Plan pays 80% up to max of \$250)
<b>Hospitalization Indemnity Benefits</b>		
Underwritten by Beazley	<b>Compass 1</b>	<b>Compass 2</b>
Daily In-Hospital	<b>\$200/ day</b> 10 days per confinement (x2 per year)	<b>\$500/ day</b> 10 days per confinement (x2 per year)
Hospital Admission	<b>\$1000 per admission</b> 1 day per year	<b>\$2000 per admission</b> 1 day per year
ER Sickness	<b>\$50 benefit per day</b> 1 day per year	<b>\$100 benefit per day</b> 1 day per year
ER Injury	<b>\$100 benefit per day</b> 1 day per year	<b>\$250 benefit per day</b> 1 day per year
Ambulance Ground (5x for Air)	<b>\$100 benefit per day</b> 1 day per year	<b>\$200 benefit per day</b> 1 day per year
<b>Monthly Premiums</b>		
	<b>2 Year Rate Cap*</b>	<b>2 Year Rate Cap*</b>
EE	<b>\$161.29</b>	<b>\$181.75</b>
EE & Spouse	<b>\$264.70</b>	<b>\$306.39</b>
EE & Children	<b>\$244.19</b>	<b>\$279.94</b>
Family	<b>\$356.70</b>	<b>\$417.20</b>



\*Plan design and premium for situs in DC only.

For questions or plan options and pricing in any state, please contact:

Dave Kylo at 202-898-6312 or Nick Cianci at 202-898-2841 or [ahcainsurancesolutions@ahca.org](mailto:ahcainsurancesolutions@ahca.org)

This material is not intended to be accessible in Arizona, Missouri, New Hampshire, Oregon, Washington and Wyoming until any required approvals have been obtained.

Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032. Beazley is rated A by A.M. Best. Beazley is licensed in all 50 states and the District of Columbia. For a current listing of product offerings and availability, visit <http://www.beazley.com/accident&health>.

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