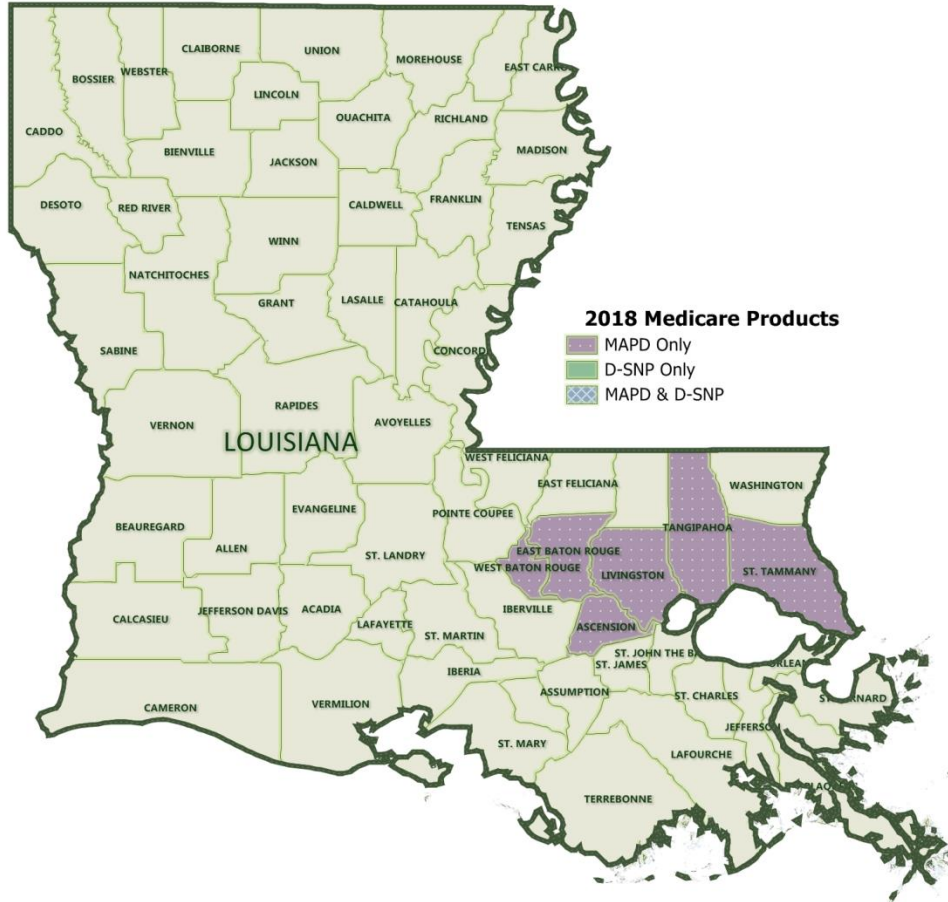


Louisiana

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Network

- All hospitals in the service area
- ACCESS health FQHC
- St. Tammany Physicians group
- St. Tammany Quality Network
- North Oaks Physicians group
- HLN (Health Leaders Network) Physicians group

Contract: H5117-001 (HMO)

Parishes: Ascension, East Baton Rouge, West Baton Rouge, Livingston, Tangipahoa

BENEFIT OVERVIEW

MOOP (Maximum Out Of Pocket)	\$6,700 In-Network
Inpatient	\$199 Per Day, Days 1 - 10 \$0 Per Day, Days 11 – 90
PCP/SPC-Copay Primary Care Provider/Specialist Copay	\$0 PCP Visits \$40 SPC Visits
RX	Deductible - \$300, only applies to tiers 4-5 Tier 1 - Preferred Generic: \$0 / \$0 Tier 2 - Generic: \$10 / \$30 Tier 3-Preferred Brand: \$37 / \$111 Tier 4-Non-Preferred Brand: \$90 / \$270 Tier 5-Specialty Drugs: 27% / 27% Tier 6 - Select Care: \$0 / \$0
Value Adds	Vision - Routine Covered Services; Maximum Allowance \$100 Every Year Dental - \$0 Preventative services, Comprehensive Dental- \$1,500 Every Year, optional buy-up package - \$1500, \$33.50 premium Hearing - Maximum Allowance- \$750 Every 3 Years, one hearing aid per year OTC - \$45 Every 3 Months Fitness Benefit Personal Emergency Response System

Note: Filed benefits only. Pending CMS approval and subject to change.

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Contract: H5117-002 (HMO)

Parishes: St. Tammany



BENEFIT OVERVIEW

MOOP (Maximum Out Of Pocket)	\$6,700 In-Network
Inpatient	\$199 Per Day, Days 1 - 10 \$0 Per Day, Days 11 – 90
PCP/SPC-Copay Primary Care Provider/Specialist Copay	\$0 PCP Visits \$40 SPC Visits
RX	Deductible - \$300, only applies to tiers 4-5 Tier 1 - Preferred Generic: \$0 / \$0 Tier 2 - Generic: \$10 / \$30 Tier 3-Preferred Brand: \$37 / \$111 Tier 4-Non-Preferred Brand: \$90 / \$270 Tier 5-Specialty Drugs: 27% / 27% Tier 6 - Select Care: \$0 / \$0
Value Adds	Vision - Routine Covered Services; Maximum Allowance \$100 Every Year Dental - \$0 Preventative services, Comprehensive Dental- \$1,500 Every Year, optional buy-up package - \$1500, \$34.80 premium Hearing - Maximum Allowance- \$750 Every 3 Years, one hearing aid per year OTC - \$45 Every 3 Months Fitness Benefit Chiropractic – 6 routine visits Personal Emergency Response System

Note: Filed benefits only. Pending CMS approval and subject to change.

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