

MAJOR MEDICAL HIGHLIGHTS

This page provides a quick guide to some of the Major Medical *plan* features which people most often want to know about. But it's not a complete description of your Major Medical *plan*. Read the following pages carefully for a complete explanation of what we pay, limit and exclude.

B453.0323-R

Benefit Year Cash Deductible	For <i>covered charges</i> from a <i>PPO</i> provider	\$500.00
	For <i>covered charges</i> from a non- <i>PPO</i> provider	\$1,500.00

B453.0316-R

Encounter Fee	For each visit to a <i>PPO doctor's</i> office	\$20.00
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(See the definition of "Encounter Fee" for a complete explanation.)

B453.3177-R

Co-Payments	For most <i>covered charges</i> -	
	For the services of a <i>hospital</i> which is a <i>preferred provider</i>	
	Before the <i>PPO co-payment</i> cap is met	20%
	After the <i>PPO co-payment</i> cap is met	No <i>co-payment</i>
	For the services of a <i>doctor</i> who is a <i>preferred provider</i>	
	Before the <i>PPO co-payment</i> cap is met	20%
	After the <i>PPO co-payment</i> cap is met	No <i>co-payment</i>
	For the services of a <i>hospital</i> which is not a <i>preferred provider</i>	
	Before the Non- <i>PPO co-payment</i> cap is met	50%
	After the Non- <i>PPO co-payment</i> cap is met	No <i>co-payment</i>
	For the services of a <i>doctor</i> who is not a <i>preferred provider</i>	
	Before the Non- <i>PPO co-payment</i> cap is met	50%
After the Non- <i>PPO co-payment</i> cap is met	No <i>co-payment</i>	
For the services of other providers		
Before the Non- <i>PPO co-payment</i> cap is met	50%	
After the Non- <i>PPO co-payment</i> cap is met	No <i>co-payment</i>	

Note: There may be different payment rates for some types of charges. Read all provisions of this *plan* carefully.

B453.3940-R

Co-Payment Cap	Limit on <i>PPO co-payments</i> , per <i>covered person</i> each <i>benefit year</i>	\$2,000.00
	Limit on <i>PPO co-payments</i> , per <i>covered family</i> each <i>benefit year</i>	\$6,000.00

Limit on Non-PPO co-payments, per covered person
each benefit year \$6,000.00

Limit on Non-PPO co-payments, per covered family
each benefit year \$15,000.00

B453.3728-R

Lifetime Limits Lifetime payment limit for most *sicknesses* or *injuries* Unlimited

Note: Some provisions have *benefit year* or treatment period limits. Read all provisions of this *plan* carefully.

B453.0343-R