



Premium Rate Schedule & Contract Summary

Quote Effective: 01/01/2019 - 12/31/2019

Version Updated: 09/19/2018

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| Plan ID: 78124NY0900009-00 | Plan Name: Silver Select | Enrollment Code: IPPA |
| Rating Region: Rochester | Direct Pay | |
| Rate | | |
| Plan Name: Silver Select | | |
| Plan Highlights | A deductible is applied to all covered medical and prescription drug benefits. Preventive services are covered in full. Plan includes ExerciseRewards and Active&Fit Direct program. | |
| Network Structure | This plan provides covered benefits at 100% of hospitals and more than 98% of local doctors in our 31-county network. | |
| Enrollment Code | IPPA | |
| Plan Type | Deductible HSA | |
| HSA Eligibility | Yes | |
| Monthly Premium Single \$497.69 / Subscriber & Spouse \$995.39 / Subscriber & Children \$846.08 / Family \$1,418.43 | | |
| In-Network Benefits | | |
| Deductible | \$2,250 Individual / \$4,500 Family | |
| Coinsurance | Covered at 80% | |
| Annual Out of Pocket Maximum | \$6,350 Individual / \$12,700 Family | |
| Primary Care / Specialist Office Visit | Covered at 80%, subject to the deductible / Covered at 80%, subject to the deductible | |
| Hospital Benefit | Covered at 80% per admission for unlimited days, subject to the deductible | |
| Emergency Room Care | Covered at 80%, subject to the deductible | |
| Urgent Care | Covered at 80%, subject to the deductible | |
| Prescription Drug | \$10/\$45/\$90, subject to the plan deductible | |
| Dependent Coverage To Age 26 , Pediatric Dental Coverage Included | | |
| A summary of benefits and coverage (SBC) can be found at excellusbcbs.com/sbcfinder , or you can call 1-855-646-8011 to request a copy to be mailed to you. You will need to key in the Plan ID# listed above. | | |
| How To enroll: Complete the enrollment application included and mail to: Excellus Health Plan, Inc P.O. Box 21146 Eagan, MN 55121 | | |
| Questions? Call 1-888-477-5804 Our dedicated insurance advisors can help complete your enrollment application and answer your questions. | | |
| Tips For Enrolling: | | |
| <ul style="list-style-type: none"> • Carefully review the entire enrollment application to make sure it's filled out. An incomplete form will be returned and will delay your enrollment. • Sign the completed enrollment form. • Enclose a check or money order for the first month's premium made payable to Excellus Health Plan. The monthly premium amount you owe is shown above. • Payment must be received and processed before the plan will become effective. | | |