

## TCCS, INDIANA – 2007

### MEDICAL PLAN HIGHLIGHTS

You have the option of one medical plan - Advantage Health HMO. Below is a brief summary of the plan features. The information provided below represents associate co-insurance / co-payment responsibility.

MEDICAL Plan Highlights	Advantage Health HMO
<b>Annual Deductible</b> Individual Family	N/A N/A
<b>Co-insurance</b> <small>(associate responsibility, after deductible)</small>	N/A
<b>Office Visit</b>	\$15
<b>Urgent Care Visit</b> <small>(non-life threatening)</small>	\$25
<b>Emergency Room Visit</b> <small>(life threatening)</small>	\$50
<b>Inpatient Admissions</b>	\$500 <small>(waived if re-admitted within 24 hours of discharge)</small>
<b>Out of Pocket Maximums<sup>2</sup></b> Individual Family	N/A
<b>Prescription Co-pay<sup>3</sup></b> Generic Brand Formulary Brand Non-Formulary	Retail (34-day supply) / Mail (90-day supply) \$10 / \$20 \$20 / \$40 \$40 / \$80
<b>Lifetime Maximum</b>	\$2 million

<sup>1</sup>Applies to facility fees only, does not include professional fees.

<sup>2</sup>Co-payments and deductibles do not apply to out of pocket maximums.

<sup>3</sup>If the brand drug has a generic equivalent and you receive the brand drug, you pay the brand co-pay plus the difference between the ingredient cost of the brand drug and the generic drug.

<sup>4</sup>INDIANA NETWORK – SELECT HEALTH

**DISCLAIMER:** This information is designed to help you understand Trinity Health's Flexible Benefits Program. It is only an overview, and it is not intended to be a detailed description of your benefits. The summary plan descriptions and official plan documents cover these plans in more detail. Whenever there is a discrepancy between printed materials, the official plan documents will prevail.

To view the official summary plan documents, visit <http://mybenefits.trinity-health.org> and click on your Ministry Organization's link.