

**Short Term Medical  
Plan Options  
Effective July 1, 2007**



	STM 80+500	STM 80+1000	STM 70+2000	STM 70+2500
Maximum Lifetime Benefit	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Deductibles (per policy period)				
Participating Individual/Family	\$500/\$1,500	\$1,000/\$3,000	\$2,000/\$6,000	\$2,500/\$7,500
Nonparticipating Individual/Family	\$1,000/\$3,000	\$1,500/\$4,500	\$2,500/\$7,500	\$3,000/\$9,000
Out-of-pocket Limit (per policy period)				
Participating Individual/Family	\$1,500/\$4,500	\$2,000/\$6,000	\$3,000/\$9,000	\$3,000/\$9,000
Nonparticipating Individual/Family	\$3,000/\$9,000	\$4,000/\$12,000	\$6,000/\$18,000	\$6,000/\$18,000
Coinsurance Participating/Nonparticipating	80%/50%	80%/50%	70%/50%	70%/50%
<b>Preventive Care Services</b>	<b>Participating Provider Reimbursement</b>	<b>Participating Provider Reimbursement</b>	<b>Participating Provider Reimbursement</b>	<b>Participating Provider Reimbursement</b>
Routine Gynecological Exam	80%	80%	70%	70%
Colorectal Cancer Screening	80%	80%	70%	70%
Prostate Cancer Screening	80%	80%	70%	70%
<b>Professional Services</b>				
Office and Home Visits	80%	80%	70%	70%
Urgent Care Center Visits	80%	80%	70%	70%
Surgery	80%	80%	70%	70%
<b>Hospital Services</b>				
Inpatient Room and Board	80%	80%	70%	70%
Inpatient Rehabilitative Care	80%	80%	70%	70%
Skilled Nursing Facility Care	80%	80%	70%	70%
<b>Outpatient Services</b>				
Outpatient Surgery	80%	80%	70%	70%
Diagnostic Therapeutic Radiology/Lab	80%	80%	70%	70%
CT/MRI/PET Scans, CATH Labs	80%	80%	70%	70%
Emergency Room Visits	80%	80%	70%	70%
<b>Other Covered Services</b>				
Outpatient Therapy	80%	80%	70%	70%
Ambulance Ground & Air	80%	80%	70%	70%
Durable Medical Equipment	80%	80%	70%	70%
Home Healthcare	80%	80%	70%	70%
Generic and Preferred Brand Prescription Drugs ( <i>Not subject to deductible</i> )	\$15 or 50%, whichever is greater	\$15 or 50%, whichever is greater	\$15 or 50%, whichever is greater	\$15 or 50%, whichever is greater

**This is only a brief summary of benefits. Please refer to the additional information provided for a further explanation of benefits including limitations and exclusions.**