



SUMMARY OF BENEFITS

PREFERRED 70/3500

MAXIMUM LIFETIME BENEFIT\$2,000,000

OUT-OF-POCKET LIMIT

Participating Providers\$3,500 per person / \$10,500 per family per calendar year

Nonparticipating Providers\$10,000 per person per calendar year

The medical out-of-pocket limit for participating providers accumulates separately from the medical out-of-pocket limit for nonparticipating providers. Once the participating provider out-of-pocket limit has been met, this plan will pay 100% of covered charges for participating and network not available providers for the rest of that calendar year. Once the nonparticipating provider out-of-pocket limit has been met, this plan will pay 100% of covered charges for all providers for the rest of that calendar year. Benefits paid in full and nonparticipating provider charges in excess of the PacificSource fee allowance do not accumulate toward the out-of-pocket limit.

SERVICE:	PARTICIPATING PROVIDER/ NETWORK NOT AVAILABLE BENEFIT:	NONPARTICIPATING PROVIDER BENEFIT:
PREVENTIVE CARE		
Well Baby Care	70%	60%
Routine Physicals	70%	60%
Routine Gynecological Exams	70%	60%
Immunizations	70%	60%
PROFESSIONAL SERVICES		
Office and Home Visits	70%	60%
Urgent Care Center Visits	70%	60%
Surgery	70%	60%
HOSPITAL SERVICES		
Inpatient Room and Board	70%	60%
Inpatient Rehabilitative Care	70%	60%
Skilled Nursing Facility Care	70%	60%
OUTPATIENT SERVICES		
Outpatient Surgery	70%	60%
Diagnostic and Therapeutic Radiology and Lab	70%	60%
CT/PET Scans, CATH Labs and MRIs	70%	60%
• Emergency Room Visits	70%	60%
MENTAL HEALTH/CHEMICAL DEPENDENCY SERVICES		
Office Visits	70%	60%
Inpatient Care	70%	60%
Residential Programs	70%	60%
OTHER COVERED SERVICES		
Physical Therapy	70%	60%
Allergy Injections	70%	60%
Ambulance, Ground	70%	60%
Ambulance, Air	70%	60%
Durable Medical Equipment	70%	60%
Home Health Care	70%	60%
• <i>In true medical emergencies, nonparticipating providers are paid at the participating provider level.</i>		

Payment to providers is based on the prevailing or contracted PacificSource fee allowance for covered services. Although participating providers accept the fee allowance as payment in full, nonparticipating providers may not. Services of nonparticipating providers could result in out-of-pocket expense in addition to the percentage indicated. Network Not Available payment is allowed when PacificSource has not contracted with providers in the geographical area of the member's residence or work for a specific service or supply. Payment to providers for Network Not Available is based on the usual, customary, and reasonable charge for the geographical area in which the charge is incurred. For more information, refer to the Payment to Providers section in the member benefit handbook.

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.