

HealthMate Coast-to-Coast HDHP Benefit Summary

HealthMate Coast-to-Coast HDHP is a health savings account (HSA) qualifying high-deductible health plan that can be combined with an HSA through an administrator of your choice.

- **An extensive nationwide network.** You can receive in-network coverage from more than 727,000 doctors and 6,300 hospitals through the BlueCard PPO network.
- **No paperwork for in-network services.** Simply show your BCBSRI member ID card, and the provider will do the rest. You're only responsible for paying any applicable deductible.
- **Health Savings Accounts.** An HSA is a tax-favored savings account set up to pay for current and future unreimbursed medical expenses. Contributions to an HSA can be made by you and/or your employer, and the money in the account can be used from one year to the next.

	Within the BlueCard® PPO Network you pay:	Outside of the BlueCard® PPO Network you pay:	Notes
Calendar year deductible	\$3,000 per individual \$6,000 per family	\$3,000 per individual \$6,000 per family	The deductible amount is included in the out-of-pocket maximum. (All services apply to the deductible except preventive care.) The in-network and out-of-network deductible are calculated separately. Prescription drugs apply toward the deductible.
Coinsurance	0%	40%	
Calendar year out-of-pocket maximum	\$3,000 per individual \$6,000 per family	\$6,000 per individual \$12,000 per family	The deductible and coinsurance apply to your out-of-pocket maximum.

Please remember that you are responsible for paying any coinsurance and/or deductible to your provider. This is a mandatory requirement when receiving healthcare services. Any coinsurance and/or deductible amounts can be paid at the time of service or within the time frame specified by your provider. Coinsurance and deductible amounts are shown on the explanation of benefits that we send to you after processing your claim. You must pay the provider the total amount shown in the section labeled "Your Responsibility" on the explanation of benefits.

Preventive Care

Adult preventive care	0% coinsurance (Deductible does not apply.)	40% coinsurance (Deductible does not apply.)	Includes one physical exam and one gynecological exam per calendar year.
Pediatric preventive care	0% coinsurance (Deductible does not apply.)	40% coinsurance (Deductible does not apply.)	
Immunizations	0% coinsurance (Deductible does not apply.)	40% coinsurance (Deductible does not apply.)	Includes adult and pediatric immunizations.
Lab services, machine tests, and X-rays	\$0 (Deductible does not apply.)	40% coinsurance (Deductible does not apply.)	Includes Pap smears, screening mammograms, and prostate-specific antigen (PSA) tests.

Office Visits

Personal care physician (PCP)	0% coinsurance after deductible	40% coinsurance after deductible	
Specialist	0% coinsurance after deductible	40% coinsurance after deductible	- Chiropractic visits are limited to 12 per calendar year. - Routine eye exams are limited to 1 per calendar year.

Outpatient Services

Outpatient services - medical/surgical care - facility and doctor services - mental health - chemical dependency	0% coinsurance after deductible	40% coinsurance after deductible	
Lab services, machine tests, and X-rays (diagnostic)	0% coinsurance after deductible	40% coinsurance after deductible	

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Inpatient Services			
Inpatient hospital services - acute care - maternity - mental health - chemical dependency	0% coinsurance after deductible	40% coinsurance after deductible	Unlimited days at a general, specialty, or mental health hospital. Up to 45 days per calendar year for physical rehabilitation.
Urgent Care or Emergency Care			
Urgent care center	0% coinsurance after deductible	40% coinsurance after deductible	
Emergency room care	0% coinsurance after deductible	40% coinsurance after deductible	If emergency room visit results in hospital admission, coinsurance is waived. The annual deductible and/or coinsurance for inpatient hospital services will apply.
Ambulance services	0% coinsurance after deductible	40% coinsurance after deductible	Coverage for medically necessary/emergency services. Air and water ambulances are limited to a maximum of \$3,000 per occurrence.
Additional Services			
Prescription drugs	0% coinsurance after deductible	Not covered	Not covered at out-of-network pharmacies.
Physical/occupational therapy	0% coinsurance after deductible	40% coinsurance after deductible	
Durable medical equipment (DME)	0% coinsurance after deductible	40% coinsurance after deductible	Must be purchased from a participating DME vendor. Pharmacies are NOT participating in the DME network.
Home and hospice care	0% coinsurance after deductible	40% coinsurance after deductible	Includes physician, nurse, and home health aide visits.

This grid provides a general summary of your HealthMate Coast-to-Coast HDHP benefits. It is not a contract. For details about your coverage, including any limitations or exclusions not noted here, please refer to your subscriber agreement or call our Customer Service Department at (401) 459-5000 or 1-800-639-2227 (outside of Rhode Island). If you have any questions about receiving medical care, call your personal care physician.

Key Terms

Coinsurance: The percentage of our allowance that you must pay for a covered healthcare service.

Deductible: A fixed amount that you must pay for covered healthcare services each calendar year before we start to pay for those services.

Out-of-pocket maximum: Highest amount of coinsurance and deductible that you must pay each calendar year for certain covered healthcare services.

Personal care physician (PCP): Includes family practitioners, internists, and pediatricians.

Specialist: Includes office visits to all other medical providers who specialize in a certain area of medicine, such as but not limited to: oncology, cardiology, ophthalmology, dermatology, allergy, or psychiatry.

How Your Deductible Works

Your plan features a deductible. The deductible is the amount of covered expenses you must pay per calendar year before we start to pay for covered services.

Family Deductible Example

Here's how a deductible would work for a family of three enrolled in HealthMate Coast-to-Coast HDHP, with a family deductible of \$6,000. It assumes that all services are in-network.

- Sue has a surgical procedure that costs \$3,000.
- Her husband goes to see his doctor several times, for a total of \$1,500.
- Her daughter Jane has a sports injury, and her medical bills total \$1,500.
- Together, they've reached their deductible amount of \$6,000. They're now covered at 100 percent for any additional in-network services they might receive.



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