

Custom Care HealthInvestor (HSA)

Benefits Summary

	SELF-ONLY PLANS			FAMILY PLANS (2+)			
	HSA Option 3,500/100% Self	HSA Option 5,000/100% Self	HSA Option 3,500/80% Self	HSA Option 3,500/100% Family	HSA Option 5,000/100% Family	HSA Option 3,500/80% Family	HSA Option 5,000/80% Family
Annual Deductible	\$3,500	\$5,000	\$3,500	\$3,500	\$5,000	\$3,500	\$5,000
Out-of-Pocket Maximum	\$3,500	\$5,000	\$5,000	\$3,500	\$5,000	\$7,500	\$9,000
Coinsurance	Plan pays 100% after Annual Deductible	Plan pays 100% after Annual Deductible	Plan pays 80% after Annual Deductible	Plan pays 100% after Annual Deductible	Plan pays 100% after Annual Deductible	Plan pays 80% after Annual Deductible	Plan pays 80% after Annual Deductible
Maximum Benefit while Covered	Unlimited			Unlimited			
Preventive Visits	\$15 Copay			\$15 Copay			
Preventive Services	Plan pays 100% (Annual Deductible not applicable)			Plan pays 100% (Annual Deductible not applicable)			
All Other Covered Services	Subject to Annual Deductible and Coinsurance			Subject to Annual Deductible and Coinsurance			

This plan summary is intended to only highlight some of the principal provisions of the plan. Please refer to your *Evidence of Coverage* for further details of the plan, or for specific limitations and exclusions. Certain underwriting guidelines apply. Applicants subject to medical review.