

## Introducing VEBA's Newest Plan:

## UHC Performance HMO Network 3!



Our **UHC Performance HMO Network 3** plan features great savings for accessing

## **Scripps Health**

VEBA members now have a more affordable way to access Scripps Clinic, Scripps Coastal Medical Center and Rady Children's primary care physicians, specialists and hospitals through the re-introduction of UHC Performance HMO Network 3!

Features include:

- Lowest premium cost to access Scripps Clinic and Scripps Coastal providers
- Three new copay plan designs to choose from
- Available alongside any UnitedHealthcare plan

Benefit Summary	UHC Performance HMO Network 3 HMO \$10	UHC Performance HMO Network 3 HMO \$20	UHC Performance HMO Network 3 HMO \$20/\$30
	What You Pay	What You Pay	What You Pay
Medical Deductible	None	None	None
PCP/Specialist (Office Visit)	\$10 copay	\$20 copay	\$20 copay / \$30 copay
Inpatient Hospital Care	No charge	\$250 admit copay	\$500 admit copay
Mental Health Services (outpatient/inpatient)	\$10 copay / No charge	\$20 copay / \$250 admit copay	\$20 copay / \$500 admit copay
Outpatient Diagnostic Laboratory and Radiology (standard procedures)	No charge	No charge	No charge
Complex Radiology (PET & MRI)	No charge	\$100 copay	\$200 copay
Outpatient Surgery	No charge	No charge	\$250 copay
Chiropractic Services*	\$10 copay	\$20 copay	\$20 copay
<b>Urgent Care</b> (your medical group/other medical group)	\$10 copay / \$50 copay	\$20 copay / \$75 copay	\$20 copay / \$75 copay
Emergency Room (copay waived if admitted)	\$100 copay	\$150 copay	\$150 copay
**Monthly Single	\$829.00	\$801.00	\$779.00
Rates Employee + Spouse	\$1,539.00	\$1,480.00	\$1,445.00
Employee + Child(ren)	\$1,198.00	\$1,152.00	\$1,125.00
Family	\$2,165.00	\$2,082.00	\$2,032.00

These preliminary rates apply only to the specific VEBA pool tier or school district name shown at the top right corner of this page. The rates correspond to the directly above illustrated benefit plans, are unbinding and subject to change until authorized district and/or bargaining unit signatories are received on a completed and valid plan selection amendment to be confirmed on a revised Exhibit C.

If you have any questions, please contact us at VEBABenefits@mcgregorinc.com

\*Chiropractic services have no annual visit maximums, must be medically necessary and may be subject to prior authorization from OptumHealth, also applies to accupuncture services if offered by your district/unit. \*\* The illustrated rates do not include acupuncture. If your school district/bargaining unit does not currently offer Acupuncture, they are available to be added to your HMO plan offering with an average increase in premium rates of about 0.2%.

## Disclaimer: Prepared by Gallagher Benefit Services, Inc. on behalf of VEBA.

This document is an illustrative outline of the coverage proposed by CS VEBA. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be directed to your Human Resources/Benefits Department and/or CS VEBA