



GHI HSA EPO Index

HealthPass	GHI HSA EPO (HSA)
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Benefit	In-Network
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Drug Card	Covered in full after deductible
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Major Medical

Deductible Ind/Fam	\$5,600/\$11,200
Co-Insurance	100%
Out-of-Pocket	N/A
Office Copay	Deductible
DXL/Lab Fees	Deductible
Specialist Copay	Deductible
Lifetime Maximum	Unlimited

Hospital Benefits

Hospital In-Patient	Deductible
Hospital Out-Patient	Deductible
Emergency Room	Deductible
Private Nursing	Not Covered

Surgical Benefits

Surgical In-Patient	Deductible
Surgical Out-Patient	Deductible

Mental Health

Mental Nervous In-Patient	Deductible 30 days max/yr
Substance Abuse In-Patient	Deductible 30 days max/yr
Mental Nervous Out-Patient	Deductible 30 visits max/yr
Substance Abuse Out-Patient	Deductible 60 visits max/yr

Other

Well Care (Up to 19)	No Charge
Routine Adult Care	No Charge
Chiropractic Care	Deductible
Home Health Care	Deductible- 200 visits/cal yr
Non-Authorization	No Information Available
Therapy Services In-Patient	Deductible
Therapy Services Out-Patient	Deductible
Durable Medical Equipment	Deductible
Optical (1 exam every 24 months)	100% after deductible

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The above rates and benefits are for general information and discussion purposes only and not valid unless approved by the carrier. Final rates are determined by the carrier's underwriting guidelines and final enrollment. The insurance policy, not general rates and descriptions in this website or printed output, will for the contract between the insured and the carrier.

(d) Non-Formulary / Oral Contraceptive / Deductible