

Tri-County Schools Insurance Group

Summary of Benefits - HSA Qualified High Deductible Health Plans Rates Effective: July 1, 2009 Deductible Effective: January 1, 2009

This outline does not constitute the group policy and is not a contract of insurance. It explains in simple language the essential features of the group benefits provided. All rights with respect to the benefits of an insured person will be governed solely by the group policy.

For a complete copy of the Plan Document please go to our website at: www.tcsig.com ; then click on "Documents."

Benefits	High Deductible Health Plan - 1	High Deductible Health Plan - 2	High Deductible Health Plan - 3
Composite	\$713	\$636	\$618
Retiree/Tiered:			
Emp Only	\$356	\$318	\$309
Emp + 1	\$677	\$604	\$587
Emp + Fam	\$891	\$795	\$773
Single Medicare	\$237	\$212	\$206
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Maximum Lifetime	\$6,000,000	\$6,000,000	\$6,000,000
Calendar Year Deductible			
PPO Individual	\$1,150	\$3,000	\$5,800
Family	\$2,300	\$5,950	\$11,600
Non PPO Individual	Double PPO	Double PPO	Double PPO
Family	Double PPO	Double PPO	Double PPO
Calendar Year Coinsurance	Plan Pays 50% in-network (PPO) / 40% out-of-network (Non PPO)		Plan Pays 100% after Deductible
PPO Individual	\$4,650	\$2,800	Does Not Apply
Family	\$9,300	\$5,650	Does Not Apply
Non PPO Individual	Double PPO	Double PPO	Does Not Apply
Family	Double PPO	Double PPO	Does Not Apply
Maximum Out-of-Pocket	Individual \$5,800. Family \$11,600. Out-of-network doubled.		
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Pre-existing Limitation	None		
Physician/Practitioner Office Visit	Subject to Deductible & Coinsurance		
Routine Physical Exam	PPO payable 100% ; Non-PPO subject to Deductible and Coinsurance		
Immunizations Per CDC	PPO payable 100% ; Non-PPO subject to Deductible and Coinsurance; foreign travel immunizations excluded		
Preventive Child Care	PPO payable 100% ; Non-PPO subject to Deductible and Coinsurance		
In-patient Hospitalization	Subject to Deductible and Coinsurance		
Out-patient Services	Subject to Deductible and Coinsurance		
Surgery	Subject to Deductible and Coinsurance		
Anesthesiologist	Subject to Deductible and Coinsurance. If surgeon is PPO, then anesthesiologist treated as PPO.		
Skilled Nursing	Subject to Deductible and Coinsurance. 100 Days Per Calendar Year		
Home Health Care	Subject to Deductible and Coinsurance. 100 Visits Per Calendar Year		
Hospice Care/Lifetime	Subject to Deductible and Coinsurance. \$10,000 Maximum.		
Bereavement Counseling	Subject to Deductible and Coinsurance. Four Sessions / \$25 Maximum.		
Hospital Emergency Room	Subject to Deductible and Coinsurance		
Maternity	Subject to Deductible and Coinsurance		
Ambulance	Subject to Deductible and Coinsurance		
Chiropractic Office Visit	Subject to Deductible and Coinsurance with 26 visits per Calendar Year		
Durable Medical Equipment	Subject to Deductible and Coinsurance		
TMJ/Lifetime Benefit	Subject to Deductible and Coinsurance with \$1,000 Lifetime Maximum Benefit		
Prescription Drugs:	Patient Pays 100% at Point of Sale - Reimbursed After Applying Deductible and Coinsurance.		
Retail:	Receive up to a 31 day supply at a retail store:		
Generic	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Preferred Brand	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Non-Preferred	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Mail Order:	Receive up to a 90 day supply through TCSIG's mail Order:		
Generic	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Preferred Brand	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Non-Preferred	Subject to Deductible and Coinsurance, then 100% coverage in-network		
Mental Health:	Pre-certification required for both Inpatient and Outpatient services		
In-patient Hospitalization	PPO only. Subject to Deductible and Coinsurance, then 100% coverage in-network.		
Days Limitation	30 per yr/90 lifetime		
PPO Out-patient	Maximum Allowed \$100, Subject to Deductible and Coinsurance		
Non PPO Out-patient	Maximum Allowed \$50, Subject to Deductible and Coinsurance		
Calendar Year Maximum	Subject to Deductible and Coinsurance. 52 visits, 1 per day		
Chemical Dependency	Subject to Deductible and Coinsurance. Calendar Year Max \$10,000; Lifetime Max \$20,000		