

Fixed Indemnity Medical Benefits - Value Plan

Value Plan

Medical Network	First Health
Network Provider Must Accept Plan	Yes
Prescription Network	Optum
Pre-Existing Condition Limitation	None

Wellness Care

Wellness Care (one per year)	\$75
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Inpatient Benefits

Standard Care	\$300 per day
Intensive Care Unit Maximum ¹	\$400 per day
Inpatient Surgery	\$2,000 per day
Anesthesia	\$400 per day
Skilled Nursing (<i>for stays in a skilled nursing facility after a hospital stay</i>)	\$100 per day

Outpatient Benefits ²

Annual Outpatient Maximum	\$2,200
Physician Office Visit (Virtual or In-Person)	\$70 per day
Diagnostic (Lab)	\$90 per day
Diagnostic (X-Ray)	\$200 per day
Ambulance Services	\$350 per day
Physical Therapy, Speech Therapy, Occupational Therapy	\$50 per day
Emergency Room Benefit - Sickness	\$150 per day
Emergency Room Benefit - Accident ³	\$300 per day
Outpatient Surgery	\$500 per day
Anesthesia	\$200 per day

Prescription Drugs ^{5,6}

Annual Maximum	\$600
Generic Coinsurance / Brand Coinsurance	70% / 50%

Teladoc Health

As an enrollee in the Fixed Indemnity medical plan, you have the option to obtain telehealth, primary care or mental health services through Teladoc Health. Please see the Summary Plan Description for additional details.

¹ subject to internal limits of plan ² Pays in addition to standard care benefit ³ All outpatient benefits are subject to the outpatient maximum ⁴ Covers treatment for off the job accidents only ⁵ Not subject to outpatient maximum ⁶ To file a claim, save your receipt and remit to Planned Administrators, Inc.

Weekly Premiums	Medical
Employee Only	\$15.98
Employee + Child(ren)	\$26.54
Employee + Spouse	\$30.36
Employee + Family	\$40.44

Premiums will be automatically deducted from your paycheck. For weekly payroll cycles the amount is shown above. For other payroll cycles the amount deducted will be calculated based on the weekly premium.