

Benefit Schedule	Plan 1	Plan 2	Plan 3
Office Visit Benefit - Physician/Licensed Practitioner	\$50 per Visit 3 Visits	\$50 per Visit 3 Visits	\$50 per Visit 3 Visits
Daily In-Hospital Benefit	\$200 per Day 30 Days	\$350 per Day 30 Days	\$750 per Day 90 Days
First Day In-Hospital Confinement Benefit	\$200 First Day 1 Admission	\$350 First Day 1 Admission	\$750 First Day 1 Admission
Surgery Benefit	\$1,000 Max. per Surgery Based on Schedule 2 Surgeries	\$1,000 Max. per Surgery Based on Schedule 2 Surgeries	\$1,500 Max. per Surgery Based on Schedule 2 Surgeries
Anesthesia Benefit	20% of Scheduled Surgery Benefit	20% of Scheduled Surgery Benefit	20% of Scheduled Surgery Benefit
Outpatient Diagnostic Testing Day Benefit	\$100 per Testing Day 1 Day	\$250 per Testing Day 1 Day	\$500 per Testing Day 1 Day
Preferred Provider Network	Included	Included	Included
Hospital Emergency Room Benefit	\$100 per Visit 2 Visits	\$150 per Visit 2 Visits	\$150 per Visit 2 Visits
Inpatient Visits - Physician	Not Applicable	\$50 per Visit 5 Visits	\$50 per Visit 5 Visits
Outpatient Hospital Services	\$150 per Treatment Day 2 Days	\$500 per Treatment Day 2 Days	\$500 per Treatment Day 2 Days
Wellness Screening Test	\$100 1 Test	\$150 1 Test	\$150 1 Test
Wellness Service	\$75 1 Service	\$75 1 Service	\$75 1 Service
Ambulance Service	Not Applicable	\$200 per Trip 1 Trip	\$200 per Trip 1 Trip
Outpatient Prescription Drug Insurance With Discounts*	Discounts on Brand and Generic Prescription Drugs.**	\$10 Co-pay Generic Formulary \$15 Co-pay Generic Oral Formulary Contraceptives Brand Not Covered \$1,000 Max. Benefit  Discount continues after maximum is reached.	\$10 Co-pay Generic Formulary \$15 Co-pay Generic Oral Formulary Contraceptives Brand Not Covered \$1,000 Max. Benefit  Discount continues after maximum is reached.

\*Underwritten by Fidelity Security Life Insurance Company.

\*\*Provided by Caremark, Inc.

*This is a Benefit Plan highlight sheet and is not intended to be a complete or legal description of the program of benefits. Certain exclusions and limitations apply. Ask your employer for an employee benefits brochure that provides a more descriptive overview of these plans. Benefits shown are per calendar year for each covered person. Calendar year is the employer-defined benefit cycle.*

### Included with every plan...

#### Health Information On-Call

Access to a toll-free telephone line to talk with health coaches who provide information and support for health-related concerns. This service is available 24/7, 365 days a year. Service provided by Health Dialog Services Corporation.

#### Vision Discount

Covered persons must use a participating network vision provider to receive this benefit which includes a covered eye exam and reduced cost for other services such as frames, spectacle lenses, contact lenses and laser vision care. Service provided by Davis Vision.

#### Fitness/Wellness Discount

Discounts on health-related products and services, including fitness center memberships, chiropractic care, acupuncture, vitamins and massage therapy. Service provided by Preventive Health Services.

#### Health Information On-Line

Internet site providing lifestyle improvement programs, health information and resources on a range of topics including tobacco cessation, nutrition, weight management and stress management. Service provided by Preventive Health Services.

**This coverage provides group indemnity medical insurance. It does not provide major medical or comprehensive medical insurance.**

Monthly Payroll Deduction	Plan 1	Plan 2	Plan 3
Employee	\$67.13	\$128.70	\$176.56
Employee + Spouse	\$125.06	\$237.35	\$330.69
Employee + Child(ren)	\$126.10	\$246.47	\$339.81
Family	\$183.86	\$354.96	\$493.77



**HM CARE ADVANTAGE**  
A LIMITED BENEFIT MEDICAL PLAN

Medical coverage is underwritten by HM Life Insurance Company, Pittsburgh, PA, under policy form series HM905 or similar. Prescription Drug coverage is underwritten by Fidelity Security Life Insurance Company, Kansas City, MO, under policy form series M-9031, M-9022 and M-9037. Administrative and/or customer support services are provided: for Health Information On-Call - Health Dialog Services Corporation; for Health Information On-Line and Fitness/Wellness Discounts - Preventive Health Services; for Pharmacy Discount Card - Caremark, Inc; for Vision - Davis Vision; for the Preferred Provider Network - National Preferred Provider Network and Indiana Health Network. Other administrative and/or customer support services may be provided by HM Life Insurance Company and HM Benefits Administrators. Products and services may not be available in all states. Certain exclusions and limitations may apply. See your certificate or other evidence of coverage for details. Coverage or service requested or the use of the specific association may not be available in all states.