Bronze Secure Plus 3

You can take control of your health care costs.





Understanding the Bronze Secure Plus 3 Plan

The Bronze Secure Plus 3 Plan may work a little differently than other health plans that you've had in the past. Your plan includes free coverage for preventive screenings to keep you healthy and a high deductible to help keep your premium costs low. You'll have coverage for things like:

- Choice of doctors and hospitals
- Doctor visits
- No-cost preventive care
- Hospitalization
- Laboratory coverage
- No-cost birth control
- Prescription drugs

- Urgent care visits
- Telemedicine and telehealth visits
- ExerciseRewards® & Active&Fit Direct® fitness benefits
- \$50 reward for annual dental cleaning/exam
- Pediatric vision and dental
- **NEW** Adult eye exams and dental (Preventive & Routine)



Let's start with the basics:

Under the Bronze Secure Plus 3 plan, you have free coverage for:

- Preventive screenings, such as routine physicals and vaccinations, are covered if services are received from a participating or in-network doctor.*
- Your first 3 visits to your primary care doctor are covered at no charge. This can include visits for mental health care, substance use treatments, telemedicine and telehealth.

For all other services, such as your 4th visit to your primary care doctor, care provided by a specialist or emergency care, you are responsible for paying out of your pocket until you meet your deductible. Once you reach your deductible, your care is covered in full for the remainder of the year.

The diagram illustrates how this works:

Preventive Services and first 3 services provided by your primary care doctor



Insurance company provides full coverage

Other Services

Until deductible amount is reached



You pay a deductible up to a certain amount

After deductible amount is reached



Once the deductible amount is reached your care is covered in full





You pay

^{*}In accordance with the PPACA preventive care regulations, full coverage (no cost share) will be applied for those services meeting the requirements as outlined in Grade A and B Recommendations of the United States Preventive Services Task Force.

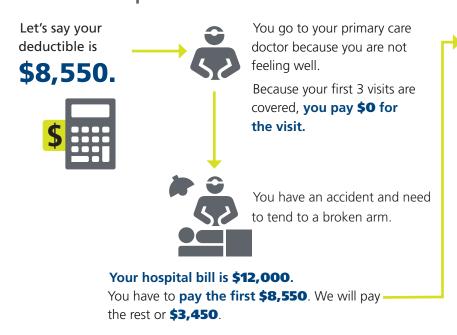
The top 3 things to know about the Bronze Secure Plus 3 Plan

 Preventive care for you (and your family) is covered in full on the first day your coverage begins. What benefits are free? Your first 3 visits to your primary care doctor are covered in full. Does my plan have a Yes, this plan has a deductible. deductible? If so what • The deductible will apply after 3 primary care doctor visits and to all other does it apply to? medical services and prescription drugs. Each person only has to pay his or her own deductible. How does the money Once you meet your deductible, your benefits are covered in full. I pay toward my • When covering more than one person, the family deductible is met for deductible add up everyone on the plan once any combination of members reaches the family (or aggregate)? deductible amount.

Important terms to know

- ▶ **Deductible** The amount of money you have to pay before your care is covered in full.
- ➤ Covered in full 100% of the total cost is covered by the health insurance company and you do not have to pay anything.

For example:





Your doctor orders an **MRI** of your lower back.

The cost of the MRI is **\$1.000**.

Because you have already paid your deductible, **you pay \$0**.

We pay the total cost of your MRI.



You also have a series of visits to a physical therapist. The cost of these visits is also **covered 100% by us**.

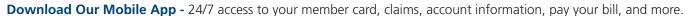
Remember preventive care is covered in full and is not subject to the deductible. So you have free coverage for things like your annual physical.

Ways to stretch your health care dollars

Our plans come with access to programs and online resources to help you stay healthy and get the most value for your dollar.

You can manage your health care costs online at Member. Univera Health care.com

View and order member cards, track deductibles and out-of-pocket spending, find a health care provider, access your benefits and claims information, estimate medical costs, pay your premium bill, and more.







Member Benefits and Healthy Perks:

- Our Network Access more top-quality doctors, hospitals and pharmacies.
- Preventive Care Free preventive care screenings, immunizations and more to help keep you healthy.
- **Dental Rewards program** You and your spouse or partner earn \$50 per year for getting your annual dental cleaning and exam.
- **Telehealth and Telemedicine** See a doctor from the comfort of your home. Telehealth services through your in-network provider, as well as 24/7 telemedicine through MDLIVE, are covered in full after deductible.
- **Wellframe**® **App** Text with health professionals for advice and guidance, create medication reminders, make daily "to-do" lists, access educational materials, and more.
- ExerciseRewards® Program¹ Fitness facility and individual fitness class rewards program with reduced fees at participating facilities, with online interactive fitness and wellness tools available at no additional cost. Now it's easier to earn the maximum of \$400 or \$600 annually by tracking your visits using the new fitness app.
- Active&Fit Direct® Program¹ Offers fitness center memberships to 10,000+ fitness centers nationwide for just \$25 a month (plus a \$25 enrollment fee and tax, where applicable).
- 24/7 Nurse Call Line Get answers to your health care questions anytime day or night.
- Pharmacy Home Delivery Save time and money by having your prescriptions delivered to your home.*
- Perks 4 U Receive discounts on healthy programs and services.
- **Health Risk Assessment** Our secure online health assessment will help you identify potential health risk factors and identify areas for improvement.

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Notice of Nondiscrimination

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, national origin, age, disability, or sex. The Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - o Qualified sign language interpreters
 - o Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as:
 - o Qualified interpreters
 - o Information written in other languages

If you need these services, please refer to the enclosed document for ways to reach us.

If you believe that the Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Advocacy Department

Attn: Civil Rights Coordinator PO Box 4717 Syracuse, NY 13221 Telephone number: 1-800-614-6575

TTY number: 1-800-662-1220

Fax: 1-315-671-6656

You can file a grievance in person or by mail or fax. If you need help filing a grievance, the Health Plan's Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Attention: If you speak English free language help is available to you. Please refer to the enclosed document for ways to reach us.

Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意:如果您说中文,我们可为您提供免费的语言协助。 请参见随附的文件以获取我们的联系方式。

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Atansyon: Si ou pale Kreyòl Ayisyen gen èd gratis nan lang ki disponib pou ou. Tanpri gade dokiman ki nan anvlòp la pou jwenn fason pou kontakte nou.

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Attenzione: Se la vostra lingua parlata è l'italiano, potete usufruire di assistenza linguistica gratuita. Per sapere come ottenerla, consultate il documento allegato.

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নজর দিন: যদি আপনি বাংলা ভাষায় কথা বলেন তাহলে আপনার জন্য সহায়তা উপলভ্য রয়েছে। আমাদের সঙ্গে যোগাযোগ করার জন্য অনুগ্রহ করে সংযুক্ত নথি পড়ন।

Uwaga: jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Patrz załączony dokument w celu uzyskania informacji na temat sposobów kontaktu z nami.

تنبيه: إذا كنت تتحدث اللغة العربية، فإن المساعدة اللغوية المجانية متاحة لك. يرجى الرجوع إلى الوثيقة المرفقة لمعرفة كيفية الوصول إلينا.

Remarque : si vous parlez français, une assistance linguistique gratuite vous est proposée. Consultez le document ci-joint pour savoir comment nous joindre.

Paunawa: Kung nagsasalita ka ng Tagalog, may maaari kang kuning libreng tulong sa wika. Mangyaring sumangguni sa nakalakip na dokumento para sa mga paraan ng pakikipag-ugnayan sa amin.

Προσοχή: Αν μιλάτε Ελληνικά μπορούμε να σας προσφέρουμε βοήθεια στη γλώσσα σας δωρεάν. Δείτε το έγγραφο που εσωκλείεται για πληροφορίες σχετικά με τους διαθέσιμους τρόπους επικοινωνίας μαζί μας.

Kujdes: Nëse flisni shqip, ju ofrohet ndihmë gjuhësore falas. Drejtojuni dokumentit bashkëlidhur për mënyra se si të na kontaktoni.



^{*}Certain Prescription Drugs may be ordered through pharmacy home delivery supplier at two and a half copays for a 90 day supply.

[†]The ExerciseRewards Program and the Active&Fit Direct Program are provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). ExerciseRewards and the Active&Fit Direct Program are trademarks of ASH and used with permission herein. Consult a physician before beginning or changing your exercise or fitness routine.