



ASSURANT  
Health®

## CoreMed major medical plans

States: Alabama, Indiana, Iowa, Louisiana, Minnesota, Nebraska, South Carolina, South Dakota, Tennessee, Wyoming

GOLD LEVEL PLANS	IN-NETWORK BENEFITS								OUT-OF-NETWORK BENEFITS		
	DEDUCTIBLE	COINSURANCE (We pay)	OUT-OF-POCKET MAXIMUM	OFFICE VISIT COPAY	PRESCRIPTION DRUGS <sup>1</sup>	DIAGNOSTIC/ X-RAY/LAB BENEFIT	ER ACCESS FEE	HSA COMPATIBLE	DEDUCTIBLE	COINSURANCE (We pay)	OUT-OF-POCKET MAXIMUM
Gold 1	\$2,000	100%	\$2,000	No copay; subject to deductible and coinsurance	Subject to deductible and coinsurance	Subject to deductible and coinsurance	\$100	No	\$5,000	50%	\$10,000
Gold 2	\$0	75%	\$6,350	\$25 for Unlimited visits	\$15/\$35/\$60	Subject to deductible and coinsurance	\$100	No	\$5,000	50%	\$10,000

### In-network dental benefits for children under the age of 19

	CHECKUPS	BASIC SERVICES	MAJOR SERVICES AND ORTHODONTICS
Non-HSA plans	We pay 100%	We pay 80%†	We pay 50%†
HSA-compatible plans	We pay 100%	Subject to deductible and coinsurance†	Subject to deductible and coinsurance†

### In-network vision benefits for children under the age of 19

	ANNUAL EYE EXAMS	GLASSES/CONTACTS FROM DESIGNATED PROVIDERS
All plans	We pay 100%	Subject to deductible and coinsurance†

Services from doctors and hospitals that are not in your network may be subject to limitations.

<sup>1</sup> Many specialty pharmaceuticals are paid according to medical plan benefits, not prescription drug benefits.

† We pay 100% once policyholder has met out-of-pocket maximum.

For more details, see the summary of provisions and exclusions.

Out-of-pocket maximum includes deductible, coinsurance, office visit copays, prescription deductible and copays, and any applicable access fees.