

## Wellness programs designed for Mid-Market businesses

Optima Health offers creative health solutions to help you take charge and get the most out of your health plan and life – introducing MyLife MyPlan. Our revolutionary programs, designed with clinical experts, show you how to get started, stay motivated and exceed your health improvement goals.

### Get Started with a Personal Health Assessment

Optima Health members can complete a Personal Health Assessment annually and receive a customized Personal Wellness Report with health risk and lifestyle information.

**Staying Healthy** are award-winning nutrition, fitness, tobacco cessation and screening programs provided at the worksite or in the privacy of your home. Health Coaches and online resources are part of **Staying Healthy**.

**Improving Health** involves a Life Coach team with clinical, behavior and disease management specialists dedicated to learning about your specific needs. Optima Health members get guidance for managing asthma, chronic obstructive pulmonary disease (COPD), depression, and diabetes.

**Managing Meds** is a collection of tools to help you manage your prescription benefits. These tools help ensure the safety, effectiveness and affordability of the prescription medications covered by your pharmacy benefit.



Optima Health is the trade name of Optima Health Plan. Optima Health Insurance Company, Optima Health Group, Inc. and Sentara Health Plans, Inc. Optima Vantage and POS plans are underwritten by Optima Health Plan. Optima Plus (PPO) products are underwritten by Optima Health Insurance Company. All Optima Health plans have benefit exclusions and limitations and terms under which the policy may be continued in force or discontinued. Wellness and rewards programs are administered by Sentara Health Plans, Inc. and are not covered benefits under any Optima Health plan. Value added benefits are not covered benefits under any Optima Health plan. For costs and complete details of coverage, please call your broker or Optima Health at 1-800-745-1271 or visit optimahealth.com.

# Optima Health 2018 Mid-Market Plans



## Mid-Market Business Segment for businesses with 51–150 employees<sup>1</sup>

### Expanded options include:

- Chiropractic Rider for all non-Plus plans
- Products with leaner benefit designs
- POS with out-of-network coverage

<sup>1</sup> Employers with 51 or more total employees up to 150 or less eligible employees.

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# Progressive plans available through Optima Health designed for Mid-Market businesses.

The chart includes benefit ranges. For complete details visit [www.optimahealth.com/brokers](http://www.optimahealth.com/brokers).

Plans Available for Mid – Market	Vantage Plans	Optima Design Vantage Plans	Optima Design Vantage RxDed Plans	Optima Equity Vantage Plans	Optima POS Plans	Optima Design POS Plans	Optima Design POS RxDed Plans	Optima Equity POS Plans	Optima Plus Plans	Optima Design Plus Plans	Optima Design Plus Rx Ded Plans	Optima Equity Plus Plans
<b>In-Network Individual Deductible</b>	\$0 – \$6,000	\$1,500 – \$5,000	\$3,000 – \$5,000	\$2,700 – \$5,000	\$0 – \$6,000	\$1,500 – \$5,000	\$3,000 – \$5,000	\$2,700 – \$5,000	\$0 – \$6,000	\$1,500 – \$5,000	\$3,000 – \$5,000	\$2,700 – \$5,000
<b>In-Network Family Deductible</b>	\$0 – \$12,000	\$3,000 – \$10,000	\$6,000 – \$10,000	\$5,400 – \$10,000	\$0 – \$12,000	\$3,000 – \$10,000	\$6,000 – \$10,000	\$5,400 – \$10,000	\$0 – \$12,000	\$3,000 – \$10,000	\$6,000 – \$10,000	\$5,400 – \$10,000
<b>Out-of-Network Individual Deductible</b>	N/A	N/A	N/A	N/A	\$400 – \$12,000	\$3,000 – \$6,500	\$4,500 – \$6,000	\$3,500 – \$6,000	\$500 – \$12,000	\$3,000 – \$6,500	\$4,500 – \$6,000	\$3,500 – \$6,000
<b>Out-of-Network Family Deductible</b>	N/A	N/A	N/A	N/A	\$1,200 – \$24,000	\$6,000 – \$13,000	\$9,000 – \$12,000	\$7,000 – \$12,000	\$1,000 – \$24,000	\$6,000 – \$13,000	\$9,000 – \$12,000	\$7,000 – \$12,000
<b>In-Network Out of Pocket Max Individual</b>	\$2,500 – \$7,350	\$3,000 – \$7,350	\$5,000 – \$7,350	\$4,500 – \$6,550	\$2,500 – \$7,350	\$4,000 – \$7,350	\$5,000 – \$7,350	\$4,500 – \$6,550	\$3,000 – \$7,350	\$4,000 – \$7,350	\$5,000 – \$7,350	\$4,500 – \$6,550
<b>In-Network Out of Pocket Max Family</b>	\$5,000 – \$14,700	\$6,000 – \$14,700	\$10,000 – \$14,700	\$9,000 – \$13,100	\$5,000 – \$14,700	\$8,000 – \$14,700	\$10,000 – \$14,700	\$9,000 – \$13,100	\$6,000 – \$14,700	\$8,000 – \$14,700	\$10,000 – \$14,700	\$9,000 – \$13,100
<b>Out-of-Network Out of Pocket Max Individual</b>	N/A	N/A	N/A	N/A	\$8,000 – \$14,700	\$8,000 – \$14,700	\$9,000 – \$14,700	\$7,000 – \$13,100	\$7,000 – \$14,700	\$8,000 – \$14,700	\$9,000 – \$14,700	\$7,000 – \$13,100
<b>Out-of-Network Out of Pocket Max Family</b>	N/A	N/A	N/A	N/A	\$16,000 – \$29,400	\$16,000 – \$29,400	\$18,000 – \$29,400	\$14,000 – \$26,200	\$14,000 – \$29,400	\$16,000 – \$29,400	\$18,000 – \$29,400	\$14,000 – \$26,200
<b>Out-of-Network Coinsurance</b>	N/A	N/A	N/A	N/A	40% – 50% AD/AC	30% – 50% AD/AC	30% – 50% AD/AC	30% – 50% AD/AC	40% – 50% AD/AC	30% – 50% AD/AC	30% – 50% AD/AC	30% – 50% AD/AC
<b>Primary Care Physician (PCP) Office Visit</b>	\$10 – \$30 or 50% AD	0% – 30% AD	0% – 30% AD	\$25 AD or 0% – 30% AD	\$10 – \$30 or 50% AD	0% – 30% AD	0% – 30% AD	\$25 AD or 0% – 30% AD	\$20 – \$30 or 50% AD	0% – 30% AD	0% – 30% AD	\$25 AD or 0% – 30% AD
<b>Specialist Office Visit</b>	\$25 – \$75 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD	\$25 – \$60 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD	\$40 – \$50 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD
<b>Maternity</b>	\$100 – \$600 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$100 – \$600 or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$500 – \$600 or 20% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD
<b>Outpatient Surgery</b>	\$100 – \$300 or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$100 – \$300 or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$150 + 20% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD
<b>Inpatient Hospital Services</b>	\$100 – \$300 per day (\$500 – \$1,500 max per stay) or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$100 - \$250 per day (\$500 – \$1,250 max per stay) or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$400 + 20% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD
<b>Emergency Services</b>	\$200 – \$300 or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$200 or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$200 + 20% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD
<b>Urgent Care Center Services</b>	\$25 – \$75 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD	\$25 – \$50 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD	\$40 - \$50 or 20% - 50% AD	0% – 30% AD	0% – 30% AD	\$50 AD or 0% – 30% AD
<b>Behavioral Health Inpatient</b>	\$100 – \$300 per day (\$500 – \$1,500 max per stay) or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$100 - \$250 per day (\$500 – \$1,250 max per stay) or 20% – 30% or 20% – 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD	\$400 + 20% or 20% - 50% AD	0% – 30% AD	0% – 30% AD	0% – 40% AD
<b>PHARMACY/PRESCRIPTION DRUG DEFAULT COVERAGE</b> Closed Formulary												
<b>Rx Deductible</b> Applies only if Rx deductible is separate from the medical deductible.	\$150	N/A	After Medical Ded	After Medical Ded	\$150	N/A	After Medical Ded	After Medical Ded	\$150	N/A	After Medical Ded	After Medical Ded
<b>Retail: Selected Generic (Tier 1):</b> Commonly prescribed generic drugs.	\$10 or 50% AD	\$10	\$10 AD	\$10 AD	\$10 or 50% AD	\$10	\$10 AD	\$10 AD	\$10 or 50% AD	\$10	\$10 AD	\$10 AD
<b>Retail: Selected Brand &amp; Other Generics (Tier 2):</b> Includes brand and some generic drugs.	\$45 AD or 50% AD	\$40	\$40 AD	\$40 AD	\$45 AD or 50% AD	\$40	\$40 AD	\$40 AD	\$45 AD or 50% AD	\$40	\$40 AD	\$40 AD
<b>Retail: Non – Selected Brand (Tier 3):</b> Includes brand drugs not included on tier 1 or 2.	\$75 AD or 20% - 50% AD (\$250 max)	\$60 or 20% (\$250 max)	\$60 AD or 20% AD (\$250 max)	\$60 AD or 20% AD (\$250 max)	\$75 AD or 20% - 50% AD (\$250 max)	\$60 or 20% (\$250 max)	\$60 AD or 20% AD (\$250 max)	\$60 AD or 20% AD (\$250 max)	\$75 AD or 20% – 50% AD (\$250 max)	\$60 or 20% (\$250 max)	\$60 AD or 20% AD (\$250 max)	\$60 AD or 20% AD (\$250 max)
<b>Retail: Specialty Drugs (Tier 4):</b> Includes specialty drugs and compound prescription medications.	20% - 50% AD (\$250 max)	20% (\$250 max)	20% AD (\$250 max)	20% AD (\$250 max)	20% - 50% AD (\$250 max)	20% (\$250 max)	20% AD (\$250 max)	20% AD (\$250 max)	20% - 50% AD (\$250 max)	20% (\$250 max)	20% AD (\$250 max)	20% AD (\$250 max)
<b>Mail Order</b>	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3	Tiers 1, 2, and 3

AD = After Deductible. P/P = Per Person.

AC = Allowable Charge is the amount Optima Health determines should be paid to a Provider for a Covered Service. When You use In-Network benefits from Plan Providers Allowable Charge is the Provider's contracted rate with Optima Health or the Provider's actual charge for the service, whichever is less. Plan Providers accept this amount as payment in full.

This chart only summarizes standard covered expenses. Exclusions and Limitations apply. Additional benefits may be available. Please see plan specific summary for more information.

Coinsurance amounts represent the percentage the member pays.