

CoventryOne® Fusion 100%/50% POS Plans

	\$3,000		\$5,000	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Lifetime Max (per Member)	\$6,000,000		\$6,000,000	
Deductible (per benefit year) - Maximum 3 per family	\$3,000		\$5,000	
Coinsurance Plan Pays	100%	50%	100%	50%
Out-of-Pocket Max (per benefit year)	Plan pays 100% after deductible is met	None	Plan pays 100% after deductible is met	None
Medical benefits shown with copays are not subject to the deductible (unless noted). Coinsurance percentages are effective after the deductible has been met unless specifically noted.				
Physician Services (PCP & Specialist) • Office Visits • Immunizations • X-ray and Lab when performed in office • Allergy Testing and Treatment • Convenience Care Clinic • Preventive Health Screenings	First 6 Visits: \$30 7+ Visits: \$60 After Deductible As Noted Above As Noted Above	Not Covered Not Covered	First 6 Visits: \$20 7+ Visits: \$40 After Deductible As Noted Above As Noted Above	Not Covered Not Covered
Mammograms (No deductible when received in-network)	100%	50%	100%	50%
Emergency Services (Copay waived if admitted to hospital)	\$150	\$150	\$150	\$150
Urgent Care	\$55	\$55	\$55	\$55
Ambulance	\$150	\$150	\$150	\$150
Inpatient Hospital	100%	50%	100%	50%
Outpatient Hospital / Facility • X-Ray, Lab, Diagnostic Services • Surgery, Anesthesia • Chemotherapy, Radiation Treatment	100%	50%	100%	50%
Maternity	Not Covered	Not Covered	Not Covered	Not Covered
Short Term Therapies (20 visits per benefit year) • Physical, Speech, Occupational and Respiratory Therapies • Cardiac and Pulmonary Rehabilitation	100%	50%	100%	50%
Chiropractic Services (12 Visits per benefit year)	\$10	Not Covered	\$10	Not Covered
DME, Prosthetics, Orthoses (\$2,500 Max per benefit year)	100%	Not Covered	100%	Not Covered
Transplants	100%	Not Covered	100%	Not Covered
Home Health Care (30 Days per benefit year)	100%	50%	100%	50%
Skilled Nursing Facility (30 Days per benefit year)	100%	50%	100%	50%
Hospice	100%	50%	100%	50%
RX • Tier 1 - Preferred Generic (No Deductible) • Tier 2 - Preferred Formulary Brand (Deductible) • Tier 3 - Non Preferred Brand and a few Non Preferred Generic (Deductible) • Tier 4 - Self-Administered Injectable Drugs (Deductible) • Rx deductible must be satisfied before copay applies on Tiers 2, 3, & 4 • Retail must be obtained from Participating Pharmacies only (except for Emergency), and Mail Order must be obtained from Caremark • To determine the specific cost of your medication, please refer to the Drug Formulary	RETAIL: \$10 \$35 \$50 70% \$2,000 Deductible	MAIL ORDER*: \$10 \$70 \$150 Not Covered *93 DAY SUPPLY	RETAIL: \$10 \$35 \$50 70% \$2,000 Deductible	MAIL ORDER*: \$10 \$70 \$150 Not Covered *93 DAY SUPPLY
Dental • One preventive cleaning every six months • Diagnostic & restorative services, orthodontic & emergency care • All care must be received as an established patient of a DeltaCare provider	\$20 Various Copays	Not Covered Not Covered	\$20 Various Copays	Not Covered Not Covered
Vision Exam (every 12 months) • Exam must be received from Avesis provider	\$15	Not Covered	\$15	Not Covered

Benefit year deductible must be satisfied before coinsurance applies. Medical benefits noted with a copay are not subject to deductible unless noted. Benefit limitations are a combination of in-network and out-of-network benefits. Deductibles and copays do not apply to out-of-pocket maximum.

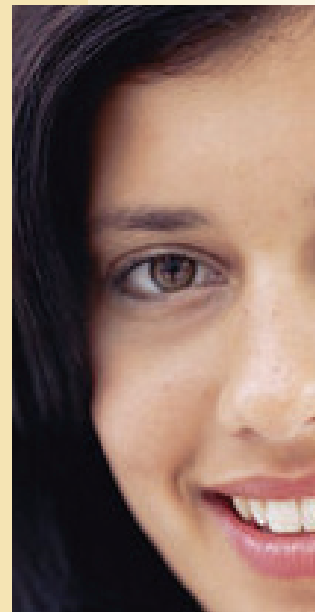
All plans are subject to a twelve (12) month waiting period for pre-existing conditions except when a condition is disclosed on the application at the time of medical underwriting and the policy is approved. Preexisting condition means the existence of symptoms which would cause an ordinarily prudent person to seek diagnosis, care, or treatment, or a condition for which medical advice or treatment was recommended by or received from a provider of health care services, within 12 months preceding the effective date of coverage of the insured.

An optional Mental Health Rider is available with POS Plans shown above. If this Rider is purchased, it must be taken by all family members applying for coverage on the same application. Each member is charged an additional monthly premium. All care must be coordinated through Coventry's mental health and substance abuse vendor. Refer to your broker for more details.

This summary is a partial description of coverage and does not detail all benefits, limitations and exclusions. Please consult the Member Contract, Schedule of Benefits, and applicable Riders to determine the exact terms, conditions and scope of coverage. Ask your broker for a DeltaCare dental provider list created specifically for the CoventryOne product.

CoventryOne® is an individual product underwritten by Coventry Health Care of Georgia, Inc.

CHCGA_10102008



Everyone needs a plan.

**Health Coverage for
Individuals and Families**

CoventryOne.

The right *One* for you.

If you don't have insurance through your employer, you're not alone. That's why CoventryOne offers several plan options. Now you can choose the health care coverage that fits your needs.

Are you self-employed, an entrepreneur, an early retiree, a part-timer, a recent grad, between jobs? Then CoventryOne has a cost-effective policy that's right for you. We've got you covered with plans that give you freedom, comprehensive coverage and valuable extras.

CoventryOne gives you freedom

With CoventryOne, you have the freedom to see any physician you want. No referrals are needed to see a specialist. If you select one of over 14,000 physicians that are a part of the Coventry Health Care of Georgia network (in-network providers), you'll enjoy savings on out-of-pocket costs. You can still use out-of-network providers, but you will pay a higher share of the cost. The choice is yours.

Finding a participating provider

Simply go to our website at www.chcga.com to access our provider search. We encourage you to search for providers online to find the most up-to-date information.



No matter which CoventryOne policy you choose, you'll get coverage for:

- Doctor's office visits
- Preventive care for adults and children
- Routine gynecological exams including Pap tests
- Mammograms at no cost to you
- Convenience clinic care
- Urgent and emergency care
- Prescription drugs (including a mail order program)
- Immunizations
- Hospital care
- Outpatient care
- Diagnostic services including lab and x-ray
- Short-term therapies

All policies are backed by Coventry Health Care of Georgia, Inc. – an established and respected insurance company with a proven track record – so you know your health coverage will be there for you when you need it.

We're right for you with valuable extras

CoventryOne goes a step further for you by offering these additional benefits. Many of them are available at no extra cost.

Annual vision exam

We all need to have our vision checked on a regular basis. Your plan includes one vision exam each year for a low copay of \$15. Benefits must be received by a participating vision provider. To locate a provider, go to www.chcga.com, select "Plan Member," then "Locate a Provider," then "Routine Vision Care."

Dental benefits

Dental benefits are included with many of our CoventryOne Plans. The dental benefit provides for one cleaning every six months, paid with a low copay. Diagnostic, restorative, orthodontia, and emergency care services are also included with no deductible or waiting period to be satisfied. Please ask your agent for a Schedule of Benefits and a listing of current participating providers.

Chiropractic Services

Several CoventryOne plans include Chiropractic visits for a copay of \$10. Please ask your agent for a Schedule of Benefits to determine if the plan you selected includes these benefits. Benefits must be received by a participating provider. To locate a provider go to www.chcga.com, select "Plan Member," then "Locate a Provider," then "Chiropractic Services."

Savings on extra services

With CoventryOne, you'll get extra features that you'd normally expect to have only with employer-sponsored health plans, such as:

- Secure online access to a wealth of tools and your personal account information through My Online ServicesSM
- Friendly and courteous customer service support through a toll-free telephone number
- Fast and accurate claims payment processing
- Discounts on services and programs typically not covered under health benefit plans through Coventry Extra, including:

- Acupuncture
- Chiropractic services
- Massage therapists
- Audiology services
- Day spa services
- Health club memberships
- Vision care
- Wellness center

For the most up-to-date listing of services and providers, go to www.chcga.com, select "Health Care Solutions," then "Special Services" and then "Discount Programs."

Support for your well-being

Coventry is committed to supporting our members' health and wellness. Coventry WellBeingSM gives you self-care resources and helps improve your overall well-being. Members have access to a variety of programs including:

- **Online Health Management** – Our program helps individuals of all ages get in shape, eat right, and live well. It provides customized fitness, nutrition, and life skills plans that are personalized to each member's health status and fitness goals.
- **Health Risk Assessments** – An online Health Risk Assessment tool analyzes responses to questions about health history and lifestyle. Members receive information about conditions they may be at risk for and suggestions on how to reduce or eliminate risks.
- **E-mail Reminders for tests, screenings and immunizations** – It's easy to forget these important preventive services, so Coventry encourages members to sign up online for e-mail reminders about scheduling important screening tests.

My Online ServicesSM

CoventryOne gives you access to many useful online tools through its secure member website, My Online Services. You'll be able to manage your health and benefits with the click of a mouse. With My Online Services, you can:

- **Check claims status**
- **Request a new ID card**
- **Order prescription refills**
- **Research costs for drugs, procedures and conditions**
- **Compare quality results for providers**
- **And much, much more**



Benefit basics

Here is some important information to help you understand your benefits.

Eligibility

You and your lawful spouse are eligible to apply if you are both under the age of 63 ½ and not eligible for Medicare.

All eligible persons must reside in the Coventry Health Care of Georgia service area and have been a United States resident for at least six months.

Dependents

Eligible dependents under the age of 26 may apply, provided they are unmarried. CoventryOne also accepts minor child/children-only applications.

Mental health benefits (optional)

The mental health and substance abuse rider may be purchased as an optional benefit with our Copay Point-of-Service and Fusion plans. If this rider is purchased, it must be taken by all family members applying for coverage on the same application and must be selected at the time of the original application submission to CoventryOne. Benefits include 48 outpatient visits and 30 inpatient hospital days. Services must be provided by participating providers; there are no out-of-network services available under this rider. Please contact your agent for monthly premiums for these benefits.

The mental health and substance abuse benefits are automatically included in our Qualified High Deductible Plans (QHD).

Health Savings Account offered with Qualified High Deductible Plan

HealthEquity will administer your Health Savings Account (HSA) that goes with our qualified high deductible plans. If accepted, once you are enrolled, you will receive a kit from HealthEquity that includes a debit card and information regarding your HSA including your own website to manage claims payment, expenses and more. **All of this is free to CoventryOne members who have selected a QHD plan.** If you do not care to receive this free enrollment into HealthEquity, please note where indicated on your application for coverage.

Policy information and member ID cards

When your application is approved and you become a member, you will receive a new member kit that includes a welcome letter, Schedule of Benefits, Individual Member Contract and other helpful material within two weeks of your approval date. Member ID cards are mailed separately but should arrive about the same time. Once you have been approved, you may contact our Customer Service Representatives who can help you print your ID card before it arrives in the mail.

Your effective date

Your effective date is when your CoventryOne benefit coverage begins and will be either the 1st or the 15th of the month. That date is determined by the date you request (up to 60 days after your application submission) and upon the approval of your application.

The earliest coverage can begin is the 1st or the 15th of the month following underwriting review and written acceptance of the application. Allow a minimum of 15 days to review and process your application. Applications for coverage may be



*Kids aging off of your employer-sponsored plan?
CoventryOne has policies that can help you bridge the gap.*



assessed additional premium or denied based upon the health status of the applicant.

DO NOT cancel existing insurance until you have been notified of your acceptance by CoventryOne Underwriting.

Network providers

Using Coventry Health Care of Georgia participating providers gives you the highest level of benefits and lower out-of-pocket costs. Network providers will file claims for you. You should not be balance billed for any cost above our negotiated rate. Members who do get balance billed should call Customer Service.

Please note that the continued participation of any provider in the Coventry Health Care of Georgia network is not guaranteed.

Coverage outside the service area

If you obtain emergency care from any physician when outside of the CoventryOne service area, you'll receive benefit coverage at your in-network levels. If at all possible, please contact your physician as well to ensure he or she can coordinate your care once your condition has stabilized.

If you choose to get non-emergency care when you're outside the CoventryOne service area, your out-of-pocket costs will be higher – sometimes substantially higher.

Your rates are guaranteed

Beginning with your effective date, your rates are guaranteed not to change for 12 months as long as you remain in the same area and keep the same benefit plan.

Pay your monthly premium the easy way

Your CoventryOne monthly premium payments will be withdrawn directly from your checking or savings account on the 10th of each month. Your first premium payment will not be deducted from your bank account until the 10th day of the month following the effective date of coverage.



You made it through college. CoventryOne can help you make it through life. It's the "gotta have" that you'll be glad to have if something would happen – and it won't break the bank, so you can still get out and have fun without worry.

If you do not want your premiums to be automatically withdrawn from your bank account, Coventry Health Care of Georgia also offers monthly billing. Please note that a \$5 monthly administrative fee will be added to each policy for monthly billing. If you select monthly billing, your application should include payment for the first month's premium. Future premiums are due on the 1st day of each month.

Renewing your coverage

Your plan is guaranteed renewable as long as premiums are paid and you and your dependents remain in the Coventry Health Care of Georgia service area. We will not change your premium because of claims filed or due to a change in your health since becoming a member. Renewal premiums are based on your original premium, age, gender, area of residence and the type of benefit plan you have.

Cancelling coverage

If you choose to cancel your coverage, Coventry Health Care of Georgia must receive the request in writing. Written requests must be received by the last day of the month prior to the requested termination date. The request should be faxed to 866-294-4301 or sent by e-mail to gacoventryone@cvtly.com. No retroactive terminations are allowed.



Terms you should know

Copayment

This is a fixed dollar amount charged to you for certain health care services. You pay the copayment to the physician or other health care provider at the time services are rendered. Copayments are usually not subject to the deductible.

Deductible

This is the set amount you pay each benefit year before Coventry pays for benefits. For example, if the policy you select has a \$500 deductible, you would need to pay the first \$500 of covered services that are subject to the deductible before Coventry will begin to pay for benefits. Several benefits are paid for prior to the deductible being met; please ask your agent for a Schedule of Benefits for more details.

Coinsurance

Once you have met your deductible, you will pay a specified percentage of the charges for covered health services until you reach your out-of-pocket maximum.

Out-of-pocket maximum

This is the most you will pay each benefit year for covered health care services. Once you reach this amount you are no longer required to pay additional deductibles or coinsurance for covered services for the remainder of the benefit year.

Medical underwriting

Medical underwriting, or the process of being medically underwritten, is the practice of using a person's health information to decide what premium rate to offer for a policy or whether to offer coverage at all. It is important to provide clear, accurate information on your application so that an appropriate decision can be made.

Pre-existing conditions

This means the existence of symptoms which would cause an ordinarily prudent person to seek diagnosis, care, or treatment, or a condition for which medical advice or treatment was recommended by or received from a provider of health care services, within 12 months preceding the effective date of coverage of the insured.

Pre-existing conditions may result in your application being denied, or may affect your premium rate. If you are accepted for coverage, your premium rate will be calculated to include your documented pre-existing conditions. These conditions will be covered under the terms of your Individual Member Contract from the first day you're enrolled unless the condition is specifically waived. You may receive a phone call from a Coventry medical underwriter who will identify himself or herself and will leave a message if you are unavailable. This is not a sales call.

Prior authorization

Coventry must be contacted prior to you receiving certain covered services to determine if the services and supplies are medically necessary, and whether the services or supplies are covered under your health benefit plan. Please note that obtaining prior authorization is not a guarantee of coverage for the service or treatment. When you use a participating provider, he or she will obtain prior authorization for you. It is your responsibility to make sure you have obtained prior authorization before receiving care and incurring expenses.

For more information regarding services that require prior authorization, please see the Individual Member Contract.

CoventryOne is the right plan for you.

We're here for you when you need us with benefits and service that meets your needs.

Contact your local independent agent.

Learn more about specific plans or compare several different plans. Your local agent can also help you apply online.



Being self-employed has its advantages. It also has its challenges. Like finding affordable, quality health care coverage. You know you can't afford to go without it. But how do you fit the premiums into your budget? It's a catch 22 that nearly all self-employed individuals face. CoventryOne can be your solution.

About Coventry Health Care, Inc.

National Strength You Can Trust

Coventry Health Care, Inc. is a national managed care company serving more than 5 million members in all 50 states with a full range of products and services including group and individual health insurance, Medicare and Medicaid programs and coverage for specialty services such as workers' compensation. Coventry Health Care is a recognized leader – we hold a place on the S&P 500 index and have been named to the FORTUNE 500 in every year since 2002.

Local Focus You Can Count On

Coventry Health Care of Georgia provides a full range of products and services including group health coverage and Medicare Advantage Plans. We have been a part of your area for three decades, and we're proud of the relationships we have with the community and our members. We look forward to serving you for many years to come.



The Right *One* For You



CoventryOne's non-employer group health insurance plans are offered through Coventry Health Care of Georgia, Inc. This information is a partial description of the benefits and in no way details all of the benefits, limitations, or exclusions of the plan. Please refer to the Individual Member Contract and applicable Riders to determine exact terms, conditions and scope of coverage, including all exclusions and limitations and defined terms.