

SERVICE CATEGORY	COVERAGE INFORMATION
Annual Deductible	You choose a \$3,500, \$5,000, \$10,000, \$25,000 or \$100,000 deductible Services are covered as noted below after satisfaction of the annual deductible; except for Preventive and Well Care Services.
Coinsurance	Varies with service, please see your Subscriber Contract for more details.
Calendar Year Maximum Benefit	\$750,000 per individual per calendar year
Lifetime Maximum Benefit Payable	No Maximum
Hospital	
Hospital Inpatient Hospital Outpatient-Ambulatory Surgery	MVP covers at 100% of allowable charges ¹ MVP covers at 70% of allowable charges ¹
Preventive & Well Care Services ² Well Baby, Child Care & Immunizations Adult Physical Mammography & Prostate Cancer Screening Annual Pap Test & Ob/Gyn Exam Immunizations for Adults Colonoscopy & Sigmoidoscopy Screening for Adults Bone Density Tests Physician Office Visits	Covered in Full (Not Subject to Deductible)
Physician Office Visits Physician Inpatient Care (Medical/Surgical)	
Second Opinion-Surgery/Cancer (Optional)	
Maternity Physician Services Hospital Services	MVP covers at 100% of allowable charges
Nursery Care	
Outpatient Physical/Occupational/Speech Therapy (Combined 60 visits/year max.) Ambulance Home Health Care (40 visits/year max.) Skilled Nursing Facility (30 consecutive days/year max.)	
Urgent Care Center Diagnostic Lab and X-Ray¹	MVP covers at 70% of allowable charges
Emergency Outpatient Hospital Care	MVD 11000/ 1 H 1 H 1
Durable Medical Equipment	MVP covers at 100% of allowable charges ¹
Mental Health Inpatient Outpatient Substance Abuse Detoxification, Inpatient and Outpatient Rehabilitation	MVP covers at 100% of allowable charges¹ (must use preferred providers)
Prescription Drug Benefit ³	Subject to \$250 deductible, 50% coinsurance. Subject to MVP formulary. Must use participating pharmacies.
Dependent Care Coverage	Covered children to age 26

Note: Benefits are subject to a pre-existing condition provision for 12 months, if applicable. Enrollees under age 19 are not subject to the pre-existing condition provision.

Allowable charges means the maximum benefit available. The allowable charge is established by MVP in accordance with a Fee Agreement; Usual, Customary and Reasonable Charges; or by law. Please see your Subscriber Contract for more details.

VT INDIVIDUAL INDEMNITY PLAN (9/10)

Continued on back

¹ Member is required to contact MVP for pre-certification prior to obtaining these services. If pre-certification is not obtained, coverage is reduced by \$300. Additionally, if we conduct

Retrospective Review and determine that any admission and/or service(s) were not medically necessary, we will not provide benefits.

2 This represents a partial list of preventive services covered under this Plan. MVP will also cover all preventive services as required under the Patient Protection and Affordable Care

²This represents a partial list of preventive services covered under this Plan. MVP will also cover all preventive services as required under the Patient Protection and Affordable Care Act of 2010 (PPACA). For a full listing of the PPACA preventive services, including any applicable limitations, please visit www.healthcare.gov.

³Diabetic services and supplies like insulin and oral agents are covered under the Prescription Drug Benefit. Certain prescription drugs require Prior Approval before dispensing. As a guide, visit www.mvphealthcare.com, look under Rx Info, and see the Prescription Drug Formulary chart. Drugs listed with the "#" indicator require Prior Approval.

This is a summary description only. Limitations and exclusions may apply. Please see your Subscriber Contract for details. In the event of any conflict between this document and your Subscriber Contract, your Subscriber Contract shall be controlling.

Features and Benefits

Benefits

- Worldwide emergency coverage
- Complete hospital coverage no day or dollar limits

Additional Features

- 24/7 Nurse Advice Line reach our Member Services Department every day at 1-888-MVP-MBRS (1-888-687-6277)
- Visit our innovative Web site at **www.mvphealthcare.com** that offers many convenient features:
 - Ask a question about coverage
 - Check claim status, eligibility and benefits
 - Change your address
- Exclusive member discounts on health and safety items, health clubs, optical programs, etc.
- A variety of special education programs for expectant mothers and families... and more!

Web Tools and Services

To help you make informed health care decisions - find these tools in the Health Central section at www.mvphealthcare.com.

- Online health library powered by Healthwise® Knowledgebase
- Hospital quality comparison tool
- Hospital quality profiles
- Wide range of disease and care management programs