

Benefit Plan Designs

Alternate Funding

Code	Co-payments	Deductible (In-Network/ Out-of-Network)	Deductible Type (Embed/ Non-Embed ¹)	Co-insurance Rate (In-Network/ Out-of-Network)	Out-of-Pocket Limit (In-Network/ Out-of-Network)	Pharmacy Co-payments
HSA Plans						
HP1500	None	\$1,500/\$3,000	Non-Embedded	80%/50%	\$3,000/\$6,000	None
HP2000	None	\$2,000/\$4,000	Non-Embedded	100%/50%	\$2,000/\$8,000	None
HP2000X	None	\$2,000/\$4,000	Non-Embedded	80%/50%	\$4,000/\$8,000	None
HP2500	None	\$2,500/\$5,000	Non-Embedded	100%/50%	\$2,500/\$10,000	None
HP2850	None	\$2,850/\$5,700	Embedded	100%/50%	\$2,850/\$11,400	None
HP5000	None	\$5,000/\$10,000	Embedded	100%/50%	\$5,000/\$20,000	None
HP6350	None	\$6,350/\$12,700	Embedded	100%/50%	\$6,350/\$25,400	None
PPO Plans						
P50030	\$30/\$100/\$300	\$500/\$1,000	Embedded	80%/50%	\$3,000/\$6,000	\$10/\$35/\$60/\$200
P100030	\$30/\$100/\$300	\$1,000/\$2,000	Embedded	80%/50%	\$3,500/\$7,000	\$15/\$35/\$75/\$250
P100040	\$40/\$100/\$300	\$1,000/\$2,000	Embedded	80%/50%	\$3,500/\$7,000	\$15/\$35/\$75/\$250
P150030	30/\$100/\$300	\$1,500/\$3,000	Embedded	100%/50%	\$4,000/\$8,000	\$15/\$35/\$75/\$250
P150040	\$40/\$100/\$300	\$1,500/\$3,000	Embedded	80%/50%	\$4,000/\$8,000	\$15/\$35/\$75/\$250
P200030	\$30/\$100/\$300	\$2,000/\$4,000	Embedded	100%/50%	\$4,000/\$8,000	\$15/\$35/\$75/\$250
P200040	\$40/\$100/\$300	\$2,000/\$4,000	Embedded	80%/50%	\$4,000/\$8,000	\$15/\$35/\$75/\$250
P250030	\$30/\$100/\$300	\$2,500/\$5,000	Embedded	100%/50%	\$5,000/\$10,000	\$15/\$35/\$75/\$250
P250040	\$40/\$100/\$300	\$2,500/\$5,000	Embedded	80%/50%	\$5,000/\$10,000	\$15/\$35/\$75/\$250
P300030	\$30/\$100/\$300	\$3,000/\$6,000	Embedded	100%/50%	\$5,500/\$11,000	\$15/\$35/\$75/\$250
P300060	\$60/\$100/\$300	\$3,000/\$6,000	Embedded	80%/50%	\$5,500/\$11,000	\$15/\$35/\$75/\$250
P350030	\$30/\$100/\$300	\$3,500/\$7,000	Embedded	100%/50%	\$6,000/\$12,000	\$15/\$35/\$75/\$250
P350040	\$40/\$100/\$300	\$3,500/\$7,000	Embedded	80%/50%	\$6,000/\$12,000	\$15/\$35/\$75/\$250
P400080	\$80/\$100/\$300	\$4,000/\$8,000	Embedded	80%/50%	\$6,000/\$12,000	\$15/\$35/\$75/\$250
P500060	\$60/\$100/\$300	\$5,000/\$10,000	Embedded	100%/50%	\$6,350/\$15,000	\$15/\$35/\$75/\$250
HSA – EPO Plans (no out-of-network coverage²)						
HE1500	None	\$1,500/None	Non-Embedded	80%/None	\$3,000/None	None
HE2000	None	\$2,000/None	Non-Embedded	100%/None	\$2,000/None	None
HE2000X	None	\$2,000/None	Non-Embedded	80%/None	\$4,000/None	None
HE2500	None	\$2,500/None	Non-Embedded	100%/None	\$2,500/None	None
HE2850	None	\$2,850/None	Embedded	100%/None	\$2,850/None	None
HE5000	None	\$5,000/None	Embedded	100%/None	\$5,000/None	None
HE6350	None	\$6,350/None	Embedded	100%/None	\$6,350/None	None

EPO Plans (no out-of-network coverage ²)						
E50030	\$30/\$100/\$300	\$500/None	Embedded	80%/None	\$3,000/None	\$10/\$35/\$60/\$200
E100030	\$30/\$100/\$300	\$1,000/None	Embedded	80%/None	\$3,500/None	\$15/\$35/\$75/\$250
E100040	\$40/\$100/\$300	\$1,000/None	Embedded	80%/None	\$3,500/None	\$15/\$35/\$75/\$250
E150030	\$30/\$100/\$300	\$1,500/None	Embedded	100%/None	\$4,000/None	\$15/\$35/\$75/\$250
E150040	\$40/\$100/\$300	\$1,500/None	Embedded	80%/None	\$4,000/None	\$15/\$35/\$75/\$250
E200030	\$30/\$100/\$300	\$2,000/None	Embedded	100%/None	\$4,000/None	\$15/\$35/\$75/\$250
E200040	\$40/\$100/\$300	\$2,000/None	Embedded	80%/None	\$4,000/None	\$15/\$35/\$75/\$250
E250030	\$30/\$100/\$300	\$2,500/None	Embedded	100%/None	\$5,000/None	\$15/\$35/\$75/\$250
E250040	\$40/\$100/\$300	\$2,500/None	Embedded	80%/None	\$5,000/None	\$15/\$35/\$75/\$250
E300030	\$30/\$100/\$300	\$3,000/None	Embedded	100%/None	\$5,500/None	\$15/\$35/\$75/\$250
E300060	\$60/\$100/\$300	\$3,000/None	Embedded	80%/None	\$5,500/None	\$15/\$35/\$75/\$250
E350030	\$30/\$100/\$300	\$3,500/None	Embedded	100%/None	\$6,000/None	\$15/\$35/\$75/\$250
E350040	\$40/\$100/\$300	\$3,500/None	Embedded	80%/None	\$6,000/None	\$15/\$35/\$75/\$250
E400080	\$80/\$100/\$300	\$4,000/None	Embedded	80%/None	\$6,000/None	\$15/\$35/\$75/\$250
E500060	\$60/\$100/\$300	\$5,000/None	Embedded	100%/None	\$6,350/None	\$15/\$35/\$75/\$250

Every All Savers benefit plan has the following family benefits:

Deductible	Out-of-Pocket Limit
2x Individual Deductible	2x Individual Limit



¹ "Embedded" deductible means once an individual meets their portion of the deductible, services are paid for that person without the entire family deductible being met. "Non-Embedded" deductible means no covered family member will satisfy an individual deductible until the entire family deductible is met.

² EPO plans exclude coverage for services provided by Out-of-Network Providers with the exception of (1) Services performed in a Network Facility by an out-of-network pathologist, emergency room physician, anesthesiologist or radiologist; and (2) Services performed under the Emergency Care benefit.

Administrative services are provided by United HealthCare Services, Inc. and its affiliates. Stop loss insurance is underwritten by All Savers Insurance Company, 3100 AMS Blvd., Green Bay, WI 54313 (800) 291-2634.

These products are not available in all states.

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