## 2023 Business EDGE® Optima POS Equity Plans

## Groups with 5-250 enrolled employees

This chart only summarizes standard covered expenses. Exclusions and limitations apply. Additional benefits may be available.

Plan Name	<b>DED</b> ( <b>In Net)</b> Individual Family	<b>DED</b> (OON) Individual Family	<b>MOOP</b> (In Net) Individual Family	MOOP (OON) Individual Family	<b>PCP</b> Tier 1 / Tier 2 Physicians	VIRTUAL CONSULT No OON Coverage	<b>SPECIALIST</b> Tier 1 / Tier 2 Physicians	<b>OUTPATIENT</b> Tier 1 / Tier 2 Facilities	<b>INPATIENT</b> Tier 1 / Tier 2 Facilities	<b>ED</b> (In or OON)	UCC	PRESCRIPTION DRUG COVERAGE OPTION 1 Deductible, if applicable	PRESCRIPTION DRUG COVERAGE OPTION 2 Deductible, if applicable
Optima POS Equity 3000/10%	\$3,000 \$6,000	\$6,000 \$12,000	\$5,500 \$11,000	\$11,000 \$22,000	10% AD	No charge AD	10% AD	10% AD	10% AD	20% AD	10% AD	** <b>MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	<b>Prev BD, **MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Optima POS Equity 4000/20%	\$4,000 \$8,000	\$12,500 \$25,000	\$6,500 \$13,000	\$13,000 \$26,000	20% AD	No charge AD	20% AD	20% AD	20% AD	30% AD	20% AD	** <b>MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	<b>Prev BD, **MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Optima POS Equity 5000/0%	\$5,000 \$10,000	\$10,000 \$20,000	\$6,900 \$13,800	\$13,800 \$27,600	\$30 AD	No charge AD	\$60 AD	No charge AD	No charge AD	20% AD	20% AD	** <b>MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	<b>Prev BD, **MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)

AD: After Deductible | \*Ded p/p: Deductible per person | \*\*MDA: Medical Deductible Applies | AC: Allowable Charges | Prev BD: Prenventive Drugs Before Deductible

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