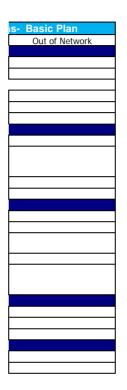


Please provide any plan deviations for the Ultimate, Best, Better and Basic Options in the columns next to each plan design.

	Ultimate		Plan Deviations - Ultimate Plan	Be	st
BENEFITS	In Network	Out of Network		In Network	Out of Network
Deductible					
Single / Family	None	\$500		\$250	\$750
Coinsurance	None	80% After Deductible		80% After Deductible	80% After Deductible
Out-of-Pocket Limit					
Single / Family	\$1,400	\$2,800		\$1,800	\$5,000
Includes Deductible	No	No		No	No
_ifetime Maximum	Unlimited			Unlim	ited
Physician Services					
PCP Office Visits	\$25	80% After Deductible		\$25	80% After Deductible
Specialist Visits (Cardiology, Endocrinology, Oncology, Infectious Disease)	\$25 Co-Pay first 4 visits/cal yr per specialty, then no copay	80% After Deductible		80% After Deductible	80% After Deductible
Preventive Care Services	No Copay			No Copay	
Outpatient Diagnostic / Lab	None			80% After Deductible	
Hospital Services					
Hospital Inpatient	Plan Pays 100%	\$250, then Ded. & Coins.		Ded. & Coin.	\$750, then Ded. & Coins.
Hospital Outpatient	\$100 Copay	80% After Deductible		\$150 Ded, then 80% Coins	80% After Deductible
Emergency Room	\$100 Copay	\$250, then 80% After Deductible		\$150 Ded, then 80% Coins	\$350, then 80% After Deductible
Urgent Care Center	\$25 Copay	80% After Deductible		80% After Deductible	80% After Deductible
Outpatient Therapy	Level 1: \$0 Visits 1-5, \$25/visit beyond. Level 2: \$25 per Visit	80% After Deductible		80% After Deductible	80% After Deductible
Hospice- Licensed Facility					
Maximum Lifetime Benefit	\$50,000	\$50,000		\$50,000	\$50,000
Impatient Care	100% Contracted Rate	80% After Deductible		100% Contracted Rate	80% After Deductible
Pre-Certified by Med Mgmt	Yes			Yes	
Chiropractic Services, including	g Spinal Manipulation				
Copay per Visit	\$25	N/A		N/A	N/A
Coinsurance	None	80% After Deductible		80% After Deductible	80% After Deductible

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Plan Deviati	ons - Best Plan	Bet	ter	Plan Deviation	s - Better Plan	Ba	sic	Plan Deviation
In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network
		\$500	\$1,000			\$1,000	\$2,000	
		75% After Deductible	75% After Deductible			50% After Deductible	50% After Deductible	
				[1]
		\$2,400	\$7,200			\$5,000	\$10,000	
		No	No			No	No	
		Unlin	nited			Unlir	nited	
		None	75% After Deductible			bi	50% After Deductible	
		None	75% After Deductible			None	50% After Deductible	
		75% After Deductible	75% After Deductible			50% After Deductible	50% After Deductible	
		No Copay				N/A		
		75% After Deductible				50% After Deductible		
		Ded. & Coin.	\$1000, then Ded. & Coins.			Ded. & Coin.	\$2000, then Ded. & Coins.	
		\$200 Ded, then 75% Coins	75% After Deductible			\$300 Ded, then 50% Coins	50% After Deductible	
		\$200 Ded, then 75% Coins	\$500, then 80% Coins			\$300 Ded, then 50% Coins	\$750, then 50% Coins	
		75% After Deductible	75% After Deductible			50% After Deductible	50% After Deductible	
		75% After Deductible	75% After Deductible			50% After Deductible	50% After Deductible	
		\$50,000	\$50,000			\$50,000	\$50,000	
		100% Contracted Rate	75% After Deductible			100% Contracted Rate	50% After Deductible	
	1	Yes				Yes		
		N/A	N/A			N/A	N/A	
		75% After Deductible	75% After Deductible	l		50% After Deductible	50% After Deductible	





Geo Access Request for Manatee County Government

Please complete the below worksheet for the all plans provided based on the parameters be in this workbook:

Practice Specialty	Number of Providers Available	Miles from Employees Residence
Adult Physicians (Family Practice, General Practice, General Internal Medicine)	2	8
General Pediatricians	2	8
Obstetricians/Gynecologists	2	8
Acute Care Hospitals	1	10

Provide the following information for the Ultimate plan quoted:

Practice Specialty	Specific Parameters	Total Number of Employees	Employee: Number
Adult PCP	2 in 8 miles	3265	
General Pediatricians	2 in 8 miles	3265	
Obstetricians/Gynecologists	2 in 8 miles	3265	
Acute Care Hospitals	1 in 10 miles	3265	

Provide the following information for the Best plan quoted:

Practice Specialty	Specific	Total Number	Employee
Fractice Specialty	Parameters	of Employees	Number
Adult PCP	2 in 8 miles	3265	
General Pediatricians	2 in 8 miles	3265	
Obstetricians/Gynecologists	2 in 8 miles	3265	
Acute Care Hospitals	1 in 10 miles	3265	

Provide the following information for the Better plan quoted:

Practice Specialty	Specific Parameters	Total Number of Employees	Employee: Number
Adult PCP	2 in 8 miles	3265	
General Pediatricians	2 in 8 miles	3265	
Obstetricians/Gynecologists	2 in 8 miles	3265	
Acute Care Hospitals	1 in 10 miles	3265	

Provide the following information for the Basic plan quoted:

Practice Specialty	Specific	Total Number	Employee:
	Parameters	of Employees	Number
Adult PCP	2 in 8 miles	3265	

General Pediatricians	2 in 8 miles	3265	
Obstetricians/Gynecologists	2 in 8 miles	3265	
Acute Care Hospitals	1 in 10 miles	2592	

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How utilizing the Geo Access Census contained

s Matched	Employees Not Matched		
Percent	Number	Percent	

s Matched	Employees Not Matched		
Percent	Number	Percent	

s Matched	Employees Not Matched			
Percent	Number	Percent		

s Matched	Employees Not Matched		
Percent	Number	Percent	



Census