SCMA MEMBERS' INSURANCE TRUST

EPO Core 3			
Plan Features	**In-Network**		**Out-of-Network**
Aggregate Deductible	$7,000/Individual	$14,000/Family	Out-of-Network claims are not covered
Aggregate Maximum Out-of-Pocket Expense	$9,950/Individual	$19,900/Family*	Out-of-Network claims are not covered
Coinsurance (plan pays after deductible)	50%		Out-of-Network claims are not covered
**Individual maximum of $9,950 is embedded for covered individuals with Dependent coverage.*			
Preventative Services Benefits	**In-Network**		**Out-of-Network**
HCR Preventative Services	100%		0%
Adults (19+): Urinalysis, CBC, cholesterol, EKG, hemoglobin, vitamin D levels	100%		0%
Children (0-18): Urinalysis, CBC, hemoglobin	100%		0%
Enhancement Package	**In-Network**		**Out-of-Network**
Office Visit Co-pay for General/Family/ Internal/Pediatrics/OBGYN/Psychiatry/Psychologist	$45		0%
Office Visit Co-pay for Specialist (excludes any other procedures performed at the visit.)	$65		0%
Urgent Care	$65		0%
Prescription Drug	**In-Network**		**Out-of-Network**
Generic, Preferred, Non-Preferred	50%		0%
Specialty EHB Drug	50%		0%
Specialty Non-EHB Drug	100% coverage is available through SaveOnSP Program Participation.		
Total Trust Perks			
Life Insurance	$15,000 on primary insured (SunLife)		
Accident Insurance	Standard plan on primary insured with $25 wellness benefit (SunLife)		
Critical Illness	$5,000 on primary insured with $25 wellness benefit (SunLife)		
Virtual Urgent Care	$15 fee (MUSC)		
Employee Assistance Programs (EAP)	Wellthy end-of-life planning support.		
Health Management Programs	Prevention and Wellness, Chronic Condition Care, Maternity Wellness, Case Management		

See the Summary Plan Description (SPD) for more plan details.