

Premier Health
SCHEDULE OF BENEFITS



Your peace of mind plan

On and Off Island Benefits

SCHEDULE OF BENEFITS: EFFECTIVE 1ST JANUARY, 2020



HEALTH CARE BENEFITS

Medical cover for Health care is extended to Insured Employees and their eligible Insured Dependents.

Overall Lifetime Maximum Per Insured:		US\$2,000,000
Annual Deductible	Individual:	US\$200
	Family:	US\$400
Annual Out-of-Pocket (OOP) Maximum (excludes Deductible)	Individual:	US\$2,000
	Family:	US\$4,000

OVERSEAS NETWORK DETAILS

United States: For information on In Network facilities in the US, go to www.aetna.com/asa and click "START A NEW SEARCH". Prior to ALL US inpatient admissions, you or your provider must call 1-800-423-9130 Option 1.

Puerto Rico: For information on In Network facilities, contact Coralisle Insurance (BVI): 1-284-494-8450 (8:30 am - 5:00 pm Local Time) or Coralisle Medical Insurance, Bermuda: 1-441-296-3200 (8:30 am - 5:00 pm Atlantic Time).

Canada, Europe & Worldwide (excl. BVI, USA and Puerto Rico): Call 1-317-927-6820 (collect) for medical assistance. Please refer to the Policy for further explanation including definitions, exclusions and covered services.

All reimbursement levels are based on Reasonable and Customary (R&C) charges.

Medical Health Care Benefits (Deductible & OOP Maximum Apply)	On Island & Off Island/ In Network	Off Island/ Out of Network
Hospital Inpatient & Surgery (pre-certification required) Room and Board: Hospital's average semi private charge per day of confinement	100%	80%
Physician Office visits & Specialist Fees	80%	80%
Surgeon Fees Assistant Surgeon: 20% of Surgeon Fee	100%	80%
Outpatient Surgery & Services (pre-certification required)	100%	80%
Emergency Room (Within 48 hours of accident)	100%	80%
Non-Emergency Treatment in E.R.	80%	50%
X-ray, Lab, MRI, Sonograms and CT Scans (pre-certification required for MRI, Sonograms and CT Scans)	80%	80%
Chiropractor \$400 calendar year max.	\$20 max/visit	\$20 max/visit
Physiotherapy \$400 calendar year max.	\$30 max/visit	\$30 max/visit
Private Duty Nursing (referral by doctor required) \$1,500 calendar year max. 30 day max.	100%	80%
Extended Care Facility (referral by doctor required) \$6,000 lifetime max. 120 day max.	\$50 max/day	\$50 max/day
Home Health/Hospice Care (referral by doctor required) \$6,000 lifetime max. 120 day max.	\$50 max/day	\$50 max/day
Durable Medical Equipment/Medical Supplies \$15,000 lifetime max.	80%	80%
AIDS, HIV, ARC \$25,000 lifetime max.	100%	80%

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Medical Health Care Benefits (Deductible & OOP Maximum Apply)	On Island & Off Island/ In Network	Off Island/ Out of Network
Maternity Expense For employees and eligible spouses only. This benefit is not extended to dependent children. 10 month waiting period. \$24,000 lifetime max Hospital Inpatient & Outpatient Services Physician's Fees & Diagnostic Fees	100% 80%	80% 80%
Infertility Covers testing to determine the diagnosis of infertility. Excludes treatment, prescription drugs, methods to bypass (In-vitro) and pregnancy as a result of fertility treatment	80%	80%
Newborn and Congenital Disabilities Includes Routine, Premature and all complications thereof. \$25,000 lifetime max.	100%	80%
Mental Health/Substance Abuse Outpatient: 15 visits/calendar year at \$25/visit Inpatient: 60 days/calendar year \$25,000 lifetime max. \$10,000 calendar year max.	50%	50%
Prescription Program Oral Contraceptives: \$500 calendar year max. Excludes expenses for contraceptive devices, prenatal vitamins, smoking cessation products and over the counter medications.	80% 75% OOP does not apply	80% 75% OOP does not apply
Preventative Care - Adult: Subject to a 3 month waiting period. Annual Physical - office visit, routine physical and associated diagnostic procedures; GYN, mammography and immunizations. \$300 calendar year max. Optometrist Visit - One visit/calendar year	100% \$60 max/visit	100% \$60 max/visit
Preventative Care - Child: Health history, physical examinations, development assessments, anticipatory guidance, appropriate immunizations (detailed below) and laboratory tests. Subject to the following Calendar Year Maximums: Child - Birth to age 12 months: \$300 calendar year max. Child - 13 months through age 17: \$100 calendar year max. Child - 18 to 25 (if full time student): \$200 calendar year max.	100%	100%
Child Immunizations & Routine Medical Exams: for children from birth to age 18 for immunization against diphtheria, hepatitis B, measles, mumps, pertussis, polio, rubella, tetanus, varicella, haemophilus influenza B, and hepatitis A.	100%	100%
Ground Ambulance Benefit \$750 calendar year max.	100%	Not applicable
Air Ambulance (referral by doctor required) \$20,000 calendar year max.	100%	Not Applicable
Air Transportation Benefit (referral by doctor and pre-certification required) Treatment must be medically necessary and not available in BVI. Maximum of 2 tickets reimbursable based on medical necessity.	\$350 max/ticket	Not Applicable

Medical Health Care Benefits (Deductible & OOP Maximum Apply)	On Island & Off Island/ In Network	Off Island/ Out of Network
Overseas Allowance Benefit Hotel Accommodations, Car Rental, Taxi Hire or a combination of these. Treatment must be medically necessary and not available in BVI. Referral by doctor and pre-certification required. 75 day calendar year max.	\$120 max/day	Not Applicable
Transplant Procedures (referral by doctor and pre-authorization required) (IoE = Institute of Excellence) \$250,000 lifetime max.	100% in IoE	60% outside IoE OOP does not apply

Please Note: On all services where pre-certification is required (including inpatient services, outpatient surgery, MRIs, CT Scans, Ultrasounds, Chemotherapy, Radiation), a Non-certification Penalty of 50% applies to Out of Network services and a penalty of 25% applies to In Network services.

IMPORTANT NUMBERS

Coralisle Insurance (BVI) (8:30 am - 5:00 pm Local Time)..... 1-284-494-8450
 Coralisle Medical Insurance, Bermuda (8:30 am - 5:00 pm Atlantic Time).....1-441-296-3200
 Prior to ALL US inpatient admissions, you or your provider must call:1-800-423-9130 (Opt.1)
 For access to medical providers outside of BVI, US or Puerto Rico, please call:.....(collect) 1-317-927-6820
 24/7 Nurseline (in the event of an emergency, dial 911) 1-800-423-9130 (Opt.2) or 1-800-356-0810

