

HSTA VEBA TRUST
"NEW" PRIMARY SELF-FUNDED 80/20 MEDICAL PLAN SUMMARY OF BENEFITS

Please contact HMA, Inc. for benefit maximums, restrictions, and additional benefit information.

Provider Network	FREE CHOICE OF PROVIDERS. Use of a participating contracted provider limits your share to your co-payment or coinsurance.
Annual Deductible	No Deductible
Annual Co-payment	\$2,500 per person \$7,500 (maximum) per Family
Lifetime Maximum	\$1,000,000.00
Extended Student Coverage	Through age 23
PHYSICIAN SERVICES	
Home, Office, Hospital	Plan pays 80% of E.C.
Emergency Room	Plan pays 80% of E.C. (for emergencies only)
Well-Child Care Visits (under age 6)	Plan pays 100% of E.C.
Well-Child Immunizations and lab tests*	Plan pays 100% of E.C.
*Limited to the following tests: two tuberculin tests, one urinalysis & two blood tests (hemoglobin or hematocrit).	
Immunizations	Plan pays 80% of E.C.
HOSPITAL SERVICES	
Room & Care (Semi-private room rate) (365 days per calendar year)	Plan pays 80% of E.C.
Intensive or Coronary Care Unit	Plan pays 80% of E.C.
Isolation or Intermediate Care Unit	Plan pays 80% of E.C.
Ambulatory Surgical Center	Plan pays 80% of E.C.
Ancillary Services	Plan pays 80% of E.C.
Emergency Room	Plan pays 80% of E.C. (for emergencies only)
SURGICAL SERVICES	
Surgery Cutting & Non Cutting Inpatient or Outpatient	Plan pays 80% of E.C.
Anesthesiologist	Plan pays 80% of E.C.

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OUTPATIENT LABORATORY & X-RAY SERVICES

X-Rays and Films	Plan pays 80% of E.C.
Laboratory services and diagnostic tests	Plan pays 80% of E.C.
Radiation Therapy or Radiotherapy for malignancies and non-malignancies	Plan pays 80% of E.C.
Pathology Services	Plan pays 80% of E.C.
Flexible Sigmoidoscopy	Plan pays 80% of E.C.
Screening Mammography Limited to one baseline ages 35-39 and one per calendar year age 40 years of age or older.	Plan pays 100% of E.C.
Tuberculin Skin Test One per calendar year	Plan pays 100% of E.C.
Pap Smears One per calendar year	Plan pays 100% of E.C.
Chlamydia Screening	Plan pays 100% of E.C.
Prostate Specific Antigen Test One per calendar year for men age 50 or older	Plan pays 100% of E.C.

MATERNITY SERVICES

Physicians Services	Plan pays 80% of E.C.
Hospital Services	See Hospital Benefits
Nurse-Midwife Services	Plan pays 80% of E.C.

MENTAL ILLNESS SERVICES

Inpatient Hospital & Facility Services	See Hospital Benefits
Physician Services Inpatient/Outpatient	Plan pays 80% of E.C.
Psychological Testing	Plan pays 80% of E.C.

SKILLED NURSING FACILITY

Inpatient Services Up to 120 days per calendar year.	Plan pays 80% of E.C.
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HOSPICE CARE SERVICES

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Inpatient and Outpatient	Plan pays 100% of E.C.
HOME HEALTH CARE	
Up to 150 visits per calendar year	Plan pays 100% of E.C.
AMBULANCE SERVICES	
Automobile (Ground)	Plan pays 80% of E.C.
Air Ambulance	Plan pays 80% of E.C.
TRAVEL BENEFIT REIMBURSEMENT (ROUND TRIP)	
When services not available on your island. Prior authorization approval and submission of receipts required.	
Air	Up to \$140.00
Ferry	Up to \$50.00
Cab	Up to \$50.00
OTHER BENEFITS	
Allergy Testing & Treatment	Plan pays 80% of E.C. (subject to benefit maximums)
Appliances & Equipment	Plan pays 80% of E.C. (subject to benefit maximums)
Blood and Blood Products	Plan pays 80% of E.C.
Evaluations for Hearing Aids	Plan pays 80% of E.C.
Hearing Aid Device	Plan pays 80% of E.C. (subject to benefit maximums)
Chemotherapy	Plan pays 80% of E.C.
Dialysis & Supplies	Plan pays 80% of E.C.
Organ Donor Services	Plan pays 80% of E.C.
Organ / Tissue Transplants	Plan pays 80% of E.C. (No coverage without prior authorization)
Outpatient Injections	Plan pays 80% of E.C.
Medical Foods/Formulas for inherited metabolic disorders	Plan pays 80% of E.C.
Newborn Circumcision	Plan pays 80% of E.C.
Physical/Occupational Therapy Outpatient/Inpatient	Plan pays 80% of E.C.
Speech Therapy Outpatient/Inpatient	Plan pays 80% of E.C.

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Growth Hormone	Plan pays 80% of E.C.(subject to benefit maximums & restrictions)
In Vitro Fertilization	Plan pays 80% of E.C.(subject to benefit maximums & restrictions)

SPECIAL BENEFITS FOR WOMEN

Contraceptive Implants	Plan pays 80% of E.C.
Contraceptive IUD	Plan pays 80% of E.C.
Well Woman Exam One exam per calendar year	Plan pays 100% of E.C.

PHYSICAL EXAMINATIONS

Additional, for ages 13 and above:

- Complete history and physical exams
- Audiogram (optional)
- Urinalysis
- Blood Count
- Chest x-ray (not more than once every two years)

Also for ages 40 and above:

- Complete history and physical exams
- Audiogram (optional)
- Urinalysis
- Blood Count
- Biochemistry Panel
- Chest x-ray (not more than once every two years)
- Electrocardiogram (EKG 12 lead)

Ages 6 -12	Plan pays up to \$90.00
Ages 13 - 18	Plan pays up to \$115.00
Ages 19 - 39	Plan pays up to \$180.00
Age 40 and above	Plan pays up to \$245.00