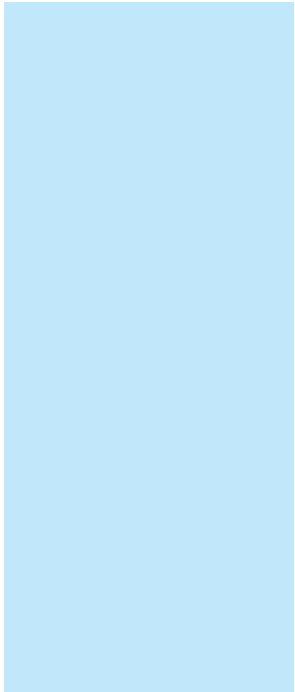


The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, www.NebraskaBlue.com. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.cciio.cms.gov or call 1-844-201-0763 to request a copy.

| Important Questions | Answers | Why this Matters: |
|--|---|--|
| What is the overall <u>deductible</u> ? | Individual/Family Enhanced <u>In-Network</u> : \$1,350/\$2,600 <u>In-Network</u> : \$1,550/\$3,100 <u>Out-of-Network</u> : \$1,950/\$3,900 | Generally, you must pay all of the costs from <u>providers</u> up to the <u>deductible</u> amount before this <u>plan</u> begins to pay. If you have other family members on the policy, they have to meet their own individual <u>deductible</u> until the overall family <u>deductible</u> amount has been met. |
| Are there services covered before you meet your | | |
| Will you pay less if you use a <u>network provider</u> ? | Yes. See www.NebraskaBlue.com/find-a-doctor or call 1-844-201-0763 for a list of <u>network providers</u> . | You pay the least if you use a <u>provider</u> in the Select <u>In-Network</u> tier. You pay more if you use a <u>provider</u> in the <u>In-Network</u> tier. You will pay the most if you use an <u>out-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider's</u> charge and what your <u>plan</u> pays (a balance bill). Be aware your <u>network provider</u> might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider</u> before you get services. |
| Do you need a <u>referral</u> to see a <u>specialist</u> ? | No. | You can see the <u>specialist</u> you choose without a <u>referral</u> . |



| Common Medical Event | Services You May Need | What You Will Pay | | | Limitations, Exceptions, & Other Important Information |
|----------------------|-----------------------|--|-----------------------------------|---|--|
| | | Enhanced Tier (You will pay the least) | In-Network Provider | Out-of-Network Provider (You will pay the most) | |
| | Children's glasses | Lenses: Not covered Frames: Not covered Contacts: Not covered | Lenses: Not covered Frames: | | covered |

