

Quartz®

Health Insurance **101**



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Insurance
yog dabtsi?

Insurance yog ib daim **Contract**

Daim ntawv cog lus (contract)
ua tau dab tsis?

Qhia tias health insurer yuav
them nqi li cas rau yus cov nuj
qis kho mob



Contracts nrog thaj maum

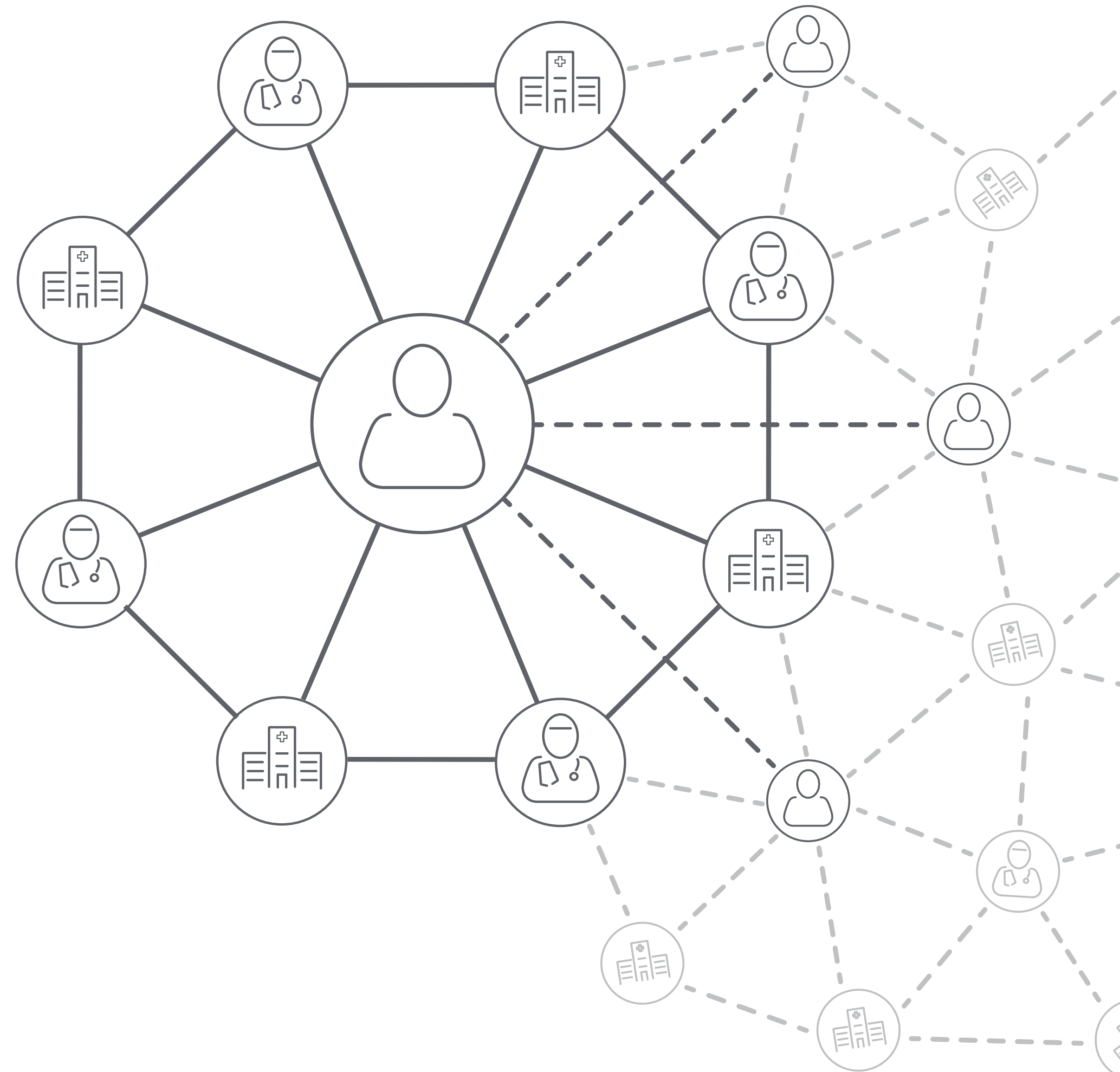
Health insurance companies
yuav ua ib daim ntawv cog lus
(contract) nrog rau cov thaj
maum thiab haus maum rau cov
neeg kho mob. Qhov no hu tias
yog provider network.



Networks of Doctors

Yog vim li cas network thiaj li tseem ceeb?

Insurance tsuas kam them nqi rau cov thaj maum uas nyob rau hauv lawv qhov network. Koj yuav tsum nug txhua zaus tias koj tus thaj maum puas nyob rau hauv koj li insurance qhov network.

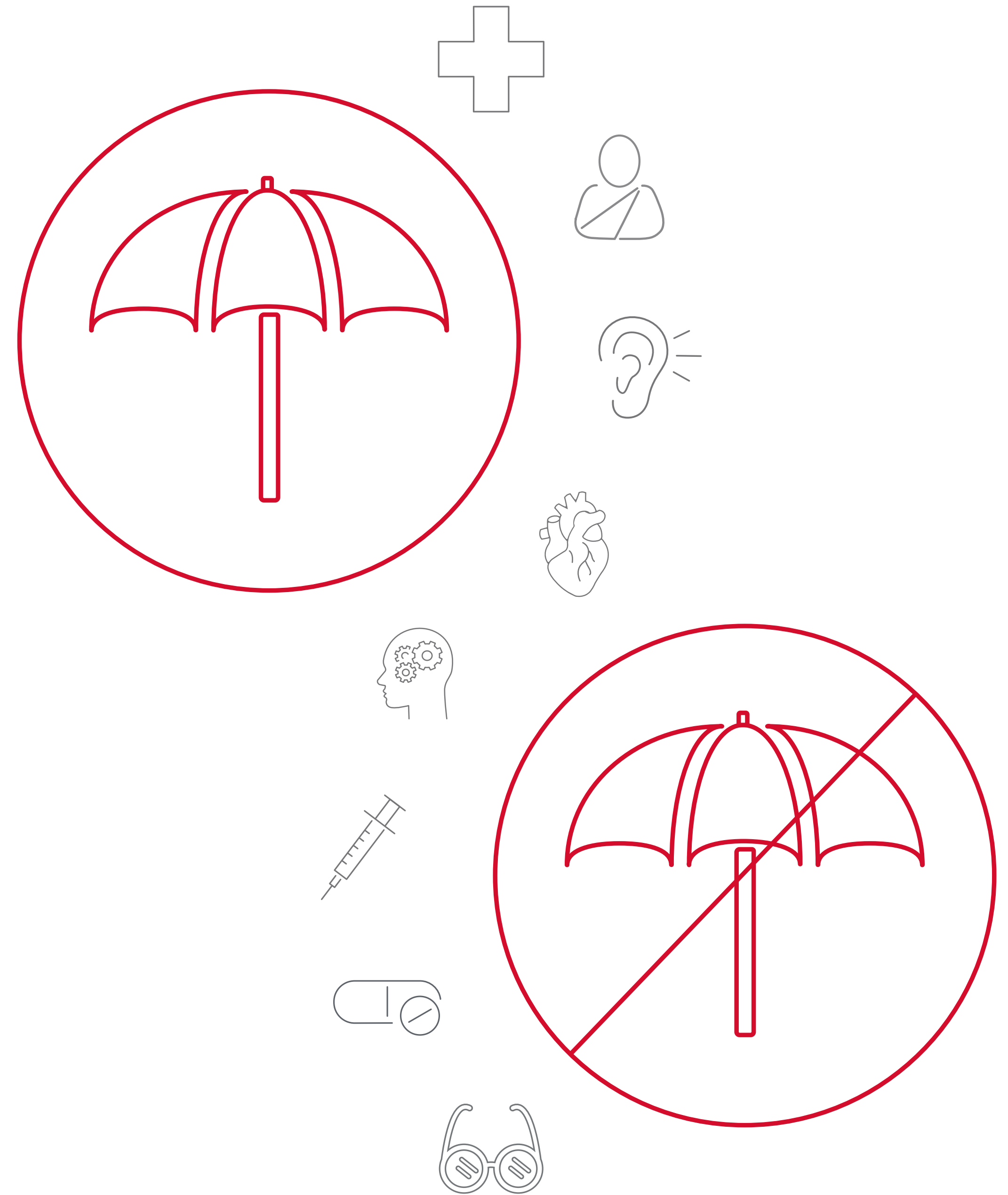


**Yuav ua li cas es kuv
thiaj paub tias Insurance
kam them dabtsi?**

Certificate of Coverage

Daim ntawv **Certificate of Coverage** qhia txog tias health insurance kam them cov nuj qis dabtsi thiab tsis kam them dabtsi.

Yuav tsum nyeem kom zoo.



SBC

Ntawm lub insurance company

li online portal, muaj ib daim

Summary of Benefits and Coverage los yog SBC yuav qhia txog koj qhov plan.

Lus tseem ceeb

Lus qhia

Vim lis cas thiaj tseem ceeb

Summary of Benefits and Coverage: What this Plan Covers & What You Pay for Covered Services
Physicians Plus Insurance Corporation: 2018 HMO Copay Standard Gold 2000
Medical Code: JZC3520GAC Rx: AYS2735M30 TM

Coverage Period: Beginning on or after 01/01/2018
Coverage for: Member/Family | Plan Type: HMO

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, visit www.pplusic.com or call 1-800-545-5015. 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 <https://www.healthcare.gov/sbc-glossary> or call 1-800-545-5015 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible?	\$2,000 Member / \$4,000 Family.	Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible.
Are there services covered before you meet your deductible?	Yes. Preventive care services, office visits, and pharmacy services are covered before you meet your deductible.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible. See a list of covered preventive services at https://www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan?	Medical and Pharmacy: \$3,000 Member / \$6,000 Family.	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan, they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit?	Premiums, balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a network provider?	Yes. See http://directory.pplusic.com/ or call 1-800-545-5015 for a list of network providers.	This plan uses a provider network. You will pay less if you use a provider in the plan's network. You will pay the most if you use an out-of-network provider, and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist?	Yes. Out-of-network specialists require prior written referral approval from the plan.	This plan will pay some or all of the costs to see a specialist for covered services but only if you have a referral before you see the specialist.

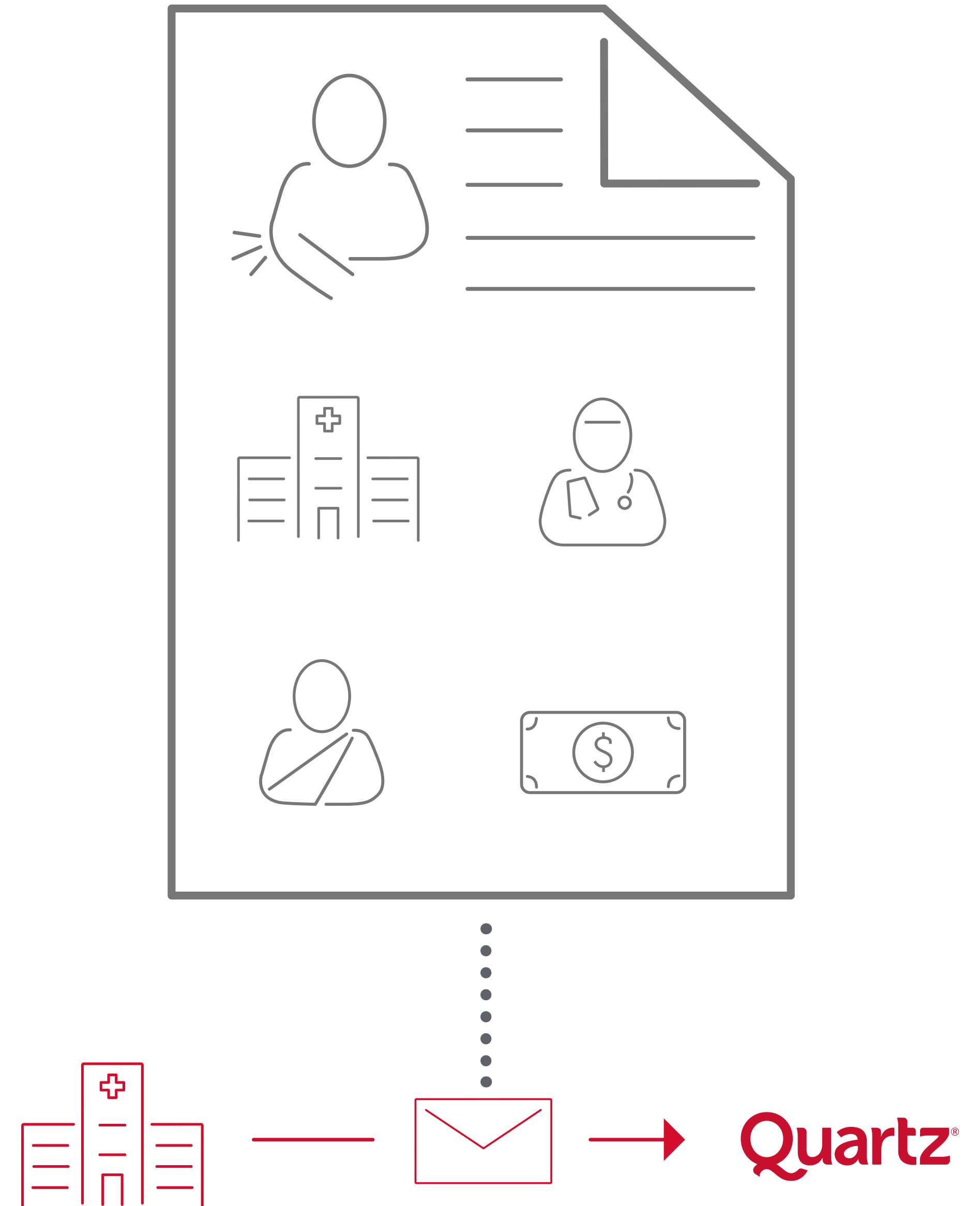
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Leej twg them dabtsi?

Claims

Thaum koj mus kho mob tag ntawm koj tus thaj maum, lub tsev haus maum yuav ua **ntaus ib daim nqi (claim)**.

Daim nqi (claim) nov yuav xa mus rau insurance company kom them koj li nuj nqis.



EOB

Explanation of Benefits or EOB

yog ib daim ntawv los ntawm koj lub company rau koj, qhia txog cov nyiaj uas insurance them thiab qhov uas koj yuav raug them rau lub tsev kho mob.

	Mus kuaj ER log yog Emergency	\$200
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	Raug tes es pav tes	\$200
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Tas Nhro:	\$400
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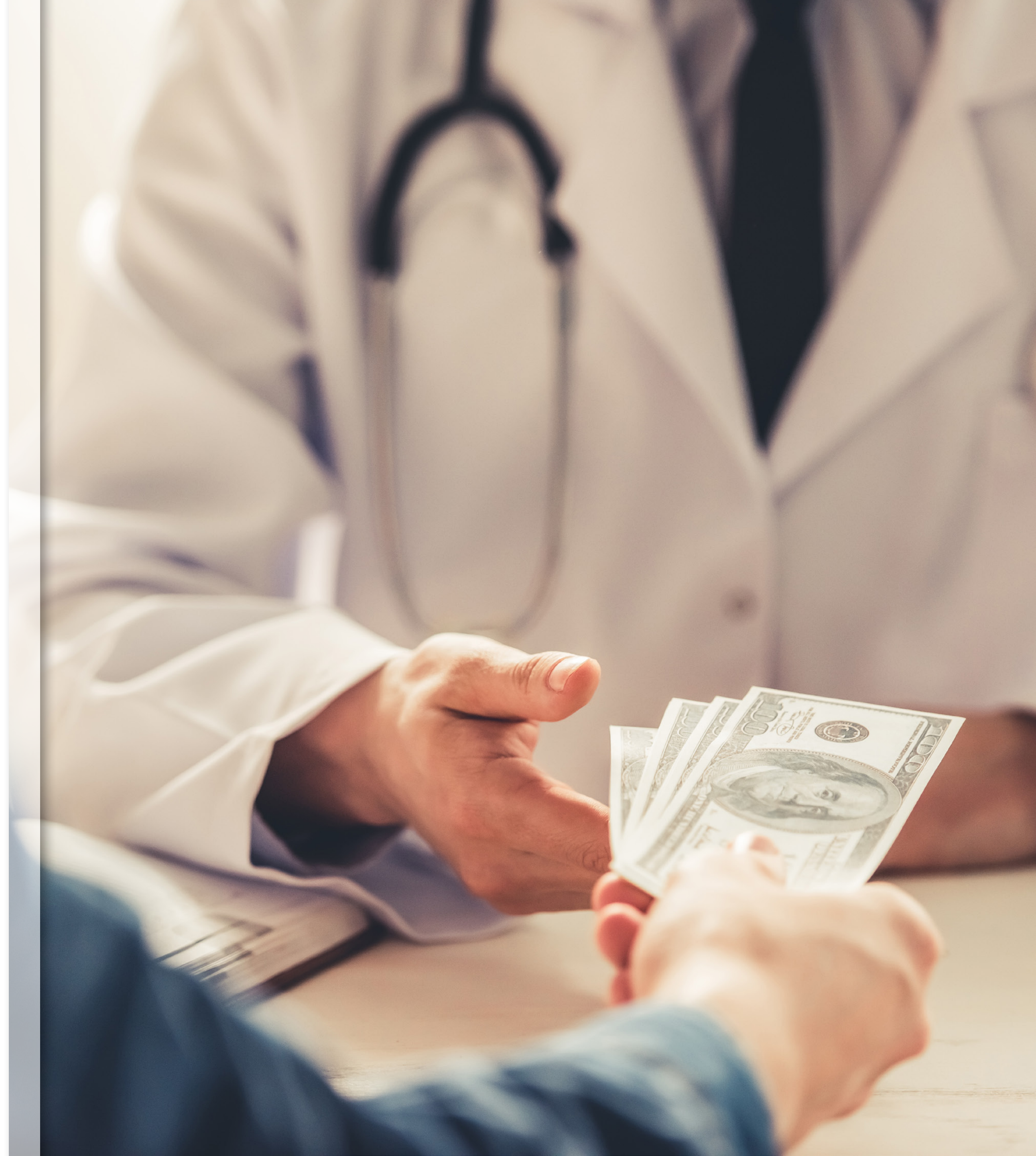
Quartz them =	\$250
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Koj them =	\$150
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Copay

Thov koj mus kuaj hau maum, nyob ntawm koj daim policy, koj yuav raug them ib qho nqi hu ua “**copay.**”

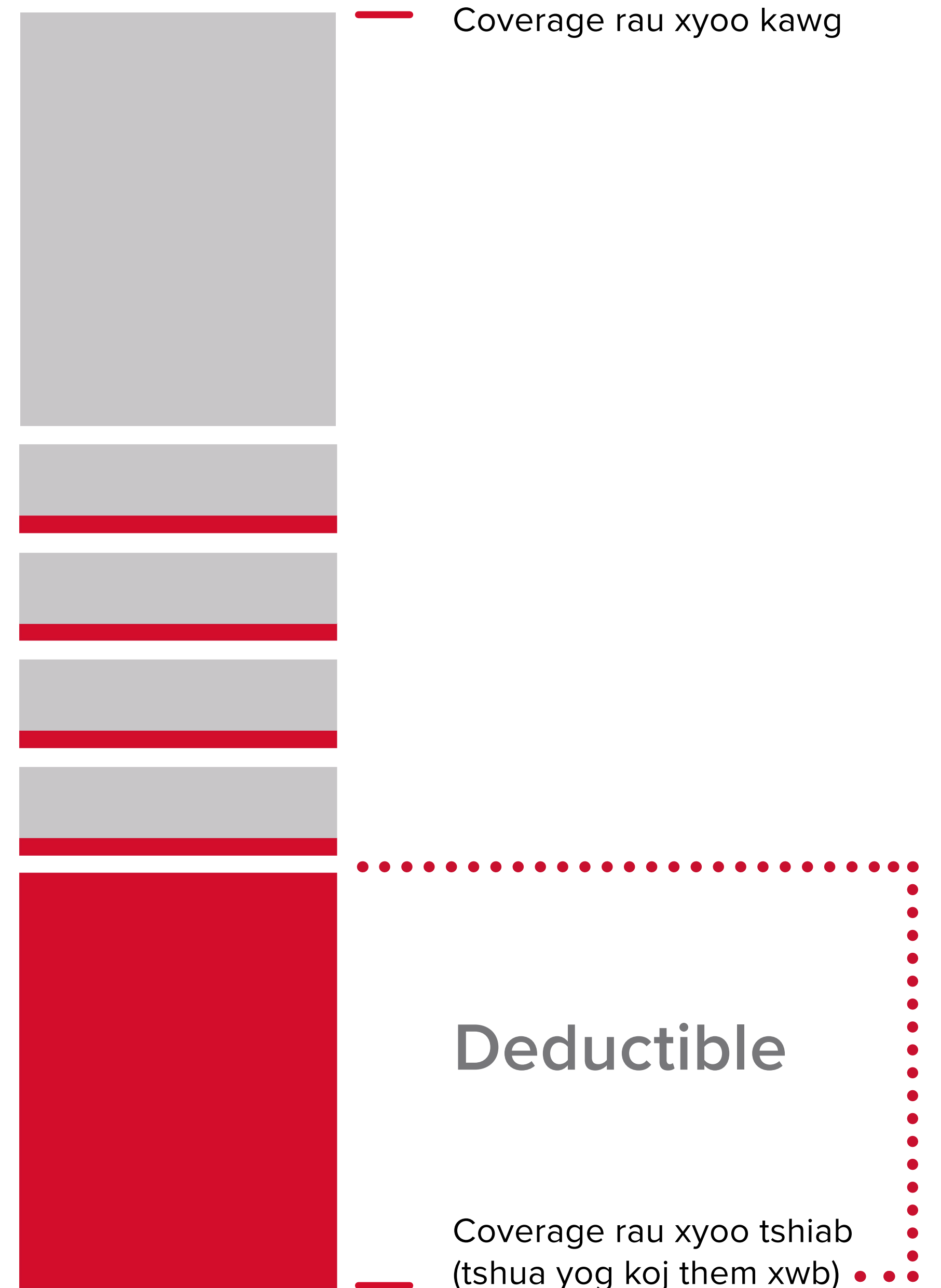
Tus nqi ntawd tej zaum yuav raug li \$20 los \$30, los ntau tshaj ntawv, nyob ntawm tus kws kho mob koj mus ntsib.



Deductible

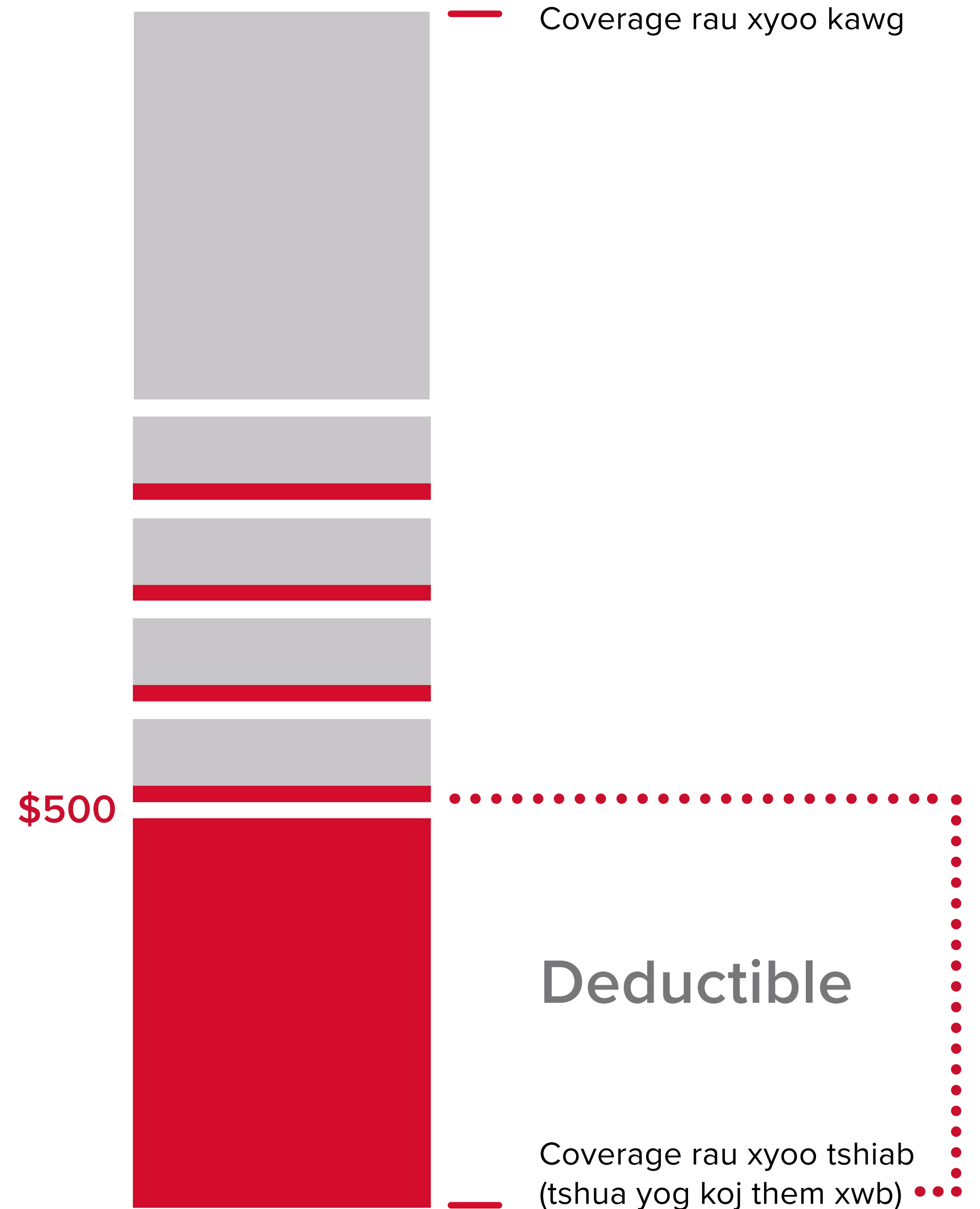
Yog koj daim policy muaj ib qho deductible, koj lub insurance company yuav tsis kam them koj cov nuj nqi ntawd. Yuav kom thaj maum xav cov nuj nqi ntawd ua rau kom ua ntej.

Koj yuav tsum them cov nuj nqi kom txog koj qhov deductible ua ntej tso.



Them kom txog koj qhov deductible

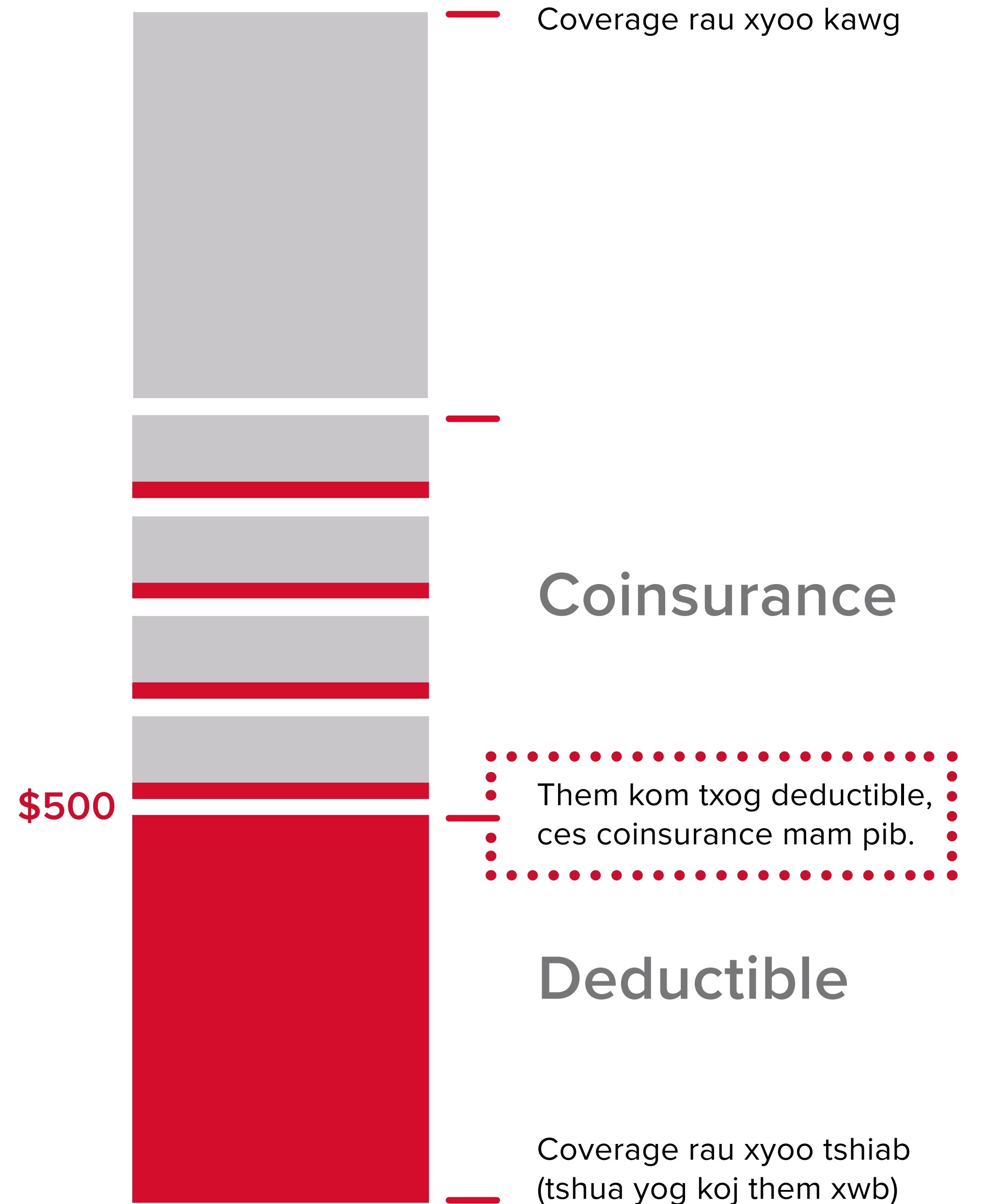
Yog tias koj qhov deductible yog **\$500** ib xyoo, koj yuav tsum them \$500 nqis kws kho mob los yog tsev kho mob ua ntej.



Thaum twg Insurance mam li them

Thom qab ntawd, thaum twg koj mus ntsib thaj maum, lub insurance company mam them ib seem ntawm cov nqi.

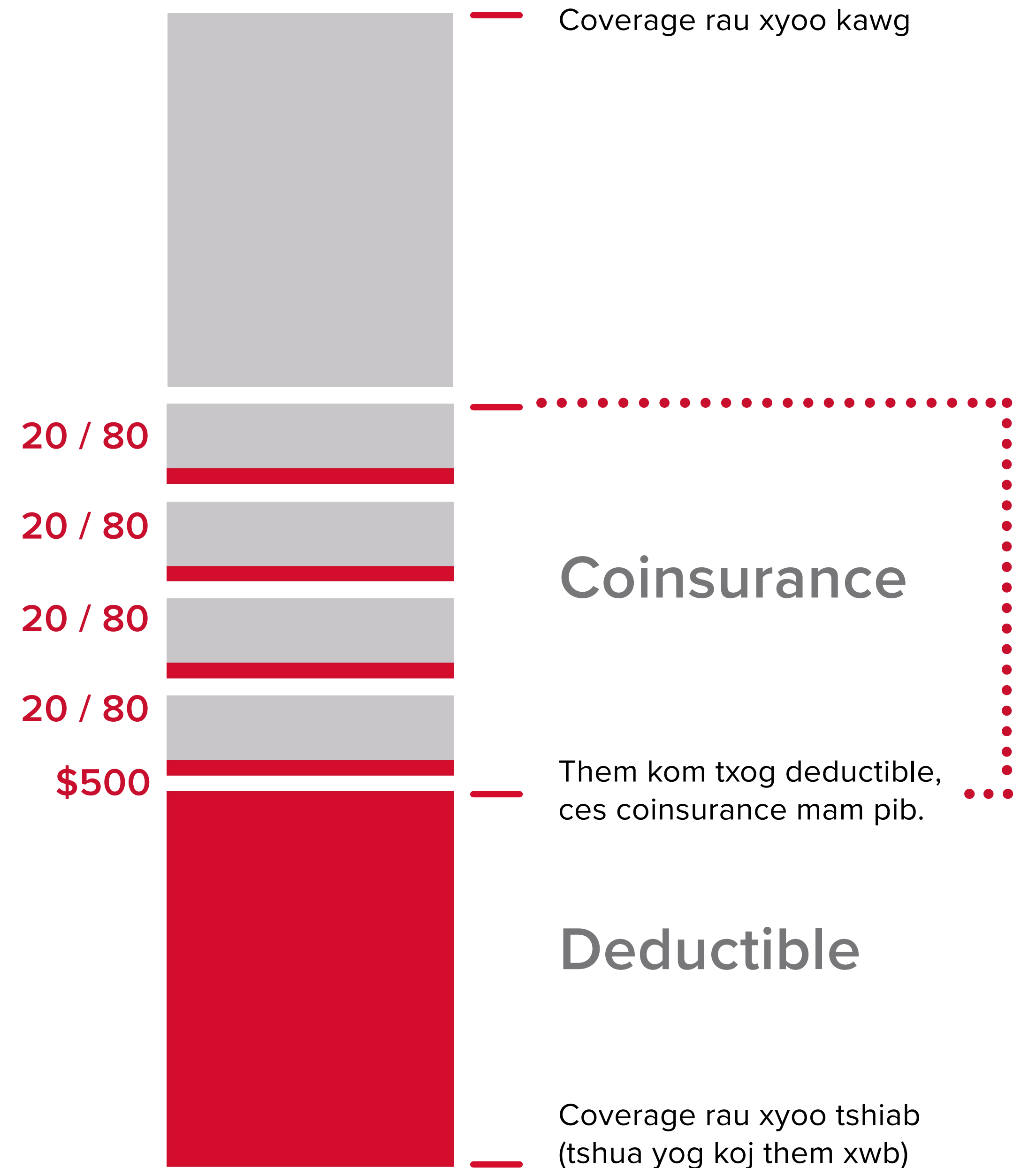
Lub insurance company mam them tus thaj maum thiab qhia rau tus thaj maum tias lawv yuav xa raim nqi li cas rau koj



Coinsurance

Tom qab koj them tag koj qhov deductible, koj tseem yuav raug them qhov coinsurance los yog ib feem ntawm daim nqi.

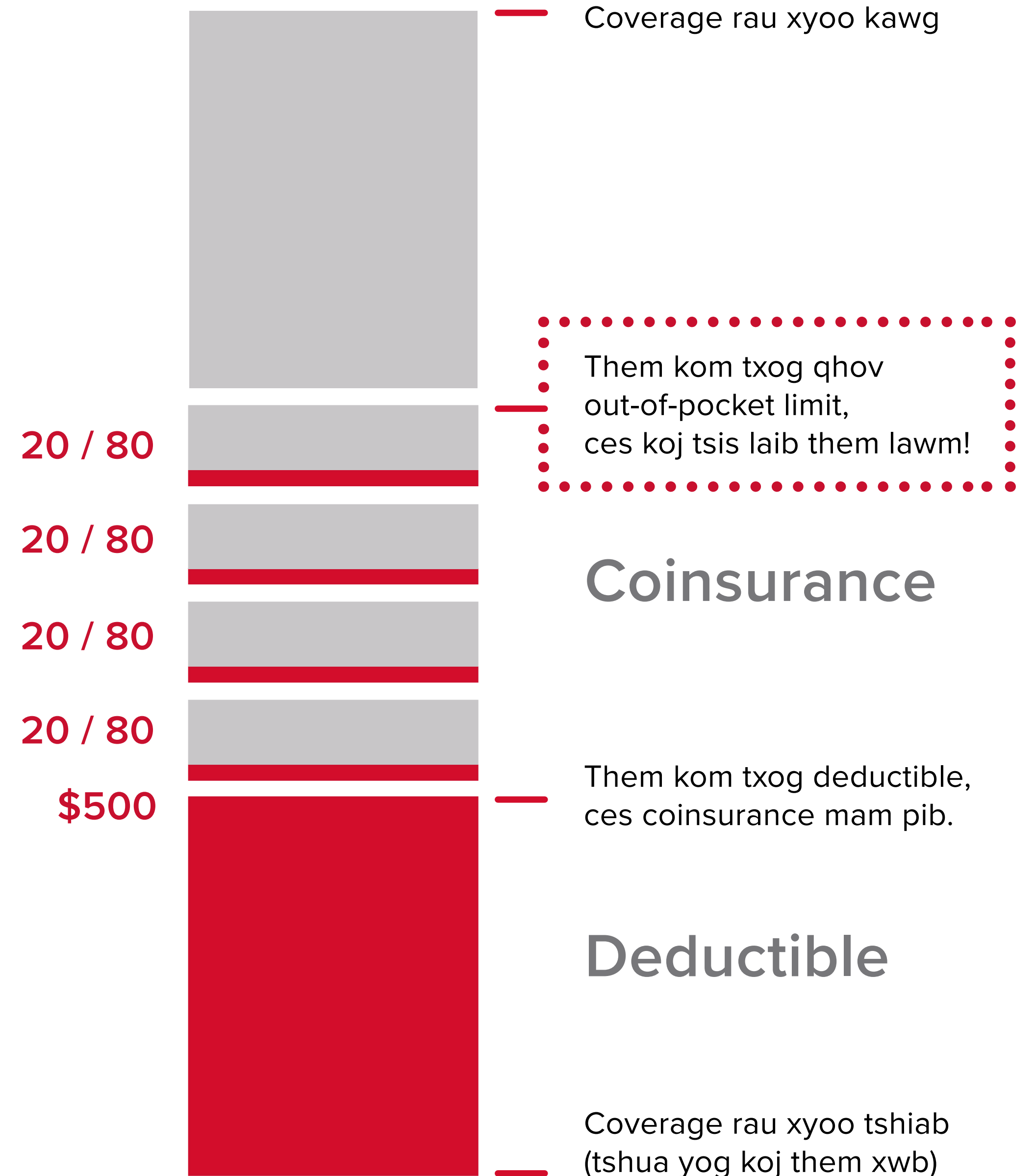
Piv xam tias koj li coinsurance yog 20%, ces koj yuav them 20% ntawm daim nqi, ces lub insurance company mam them 80%.



OOP

Tiam sis, koj tsuas them txog ib tug nqi xwb!
Feem ntau ntawm txhua cov plan, koj tsuas
ib feem (coinsurance) nuj qis kom txog koj
qhov OOP.

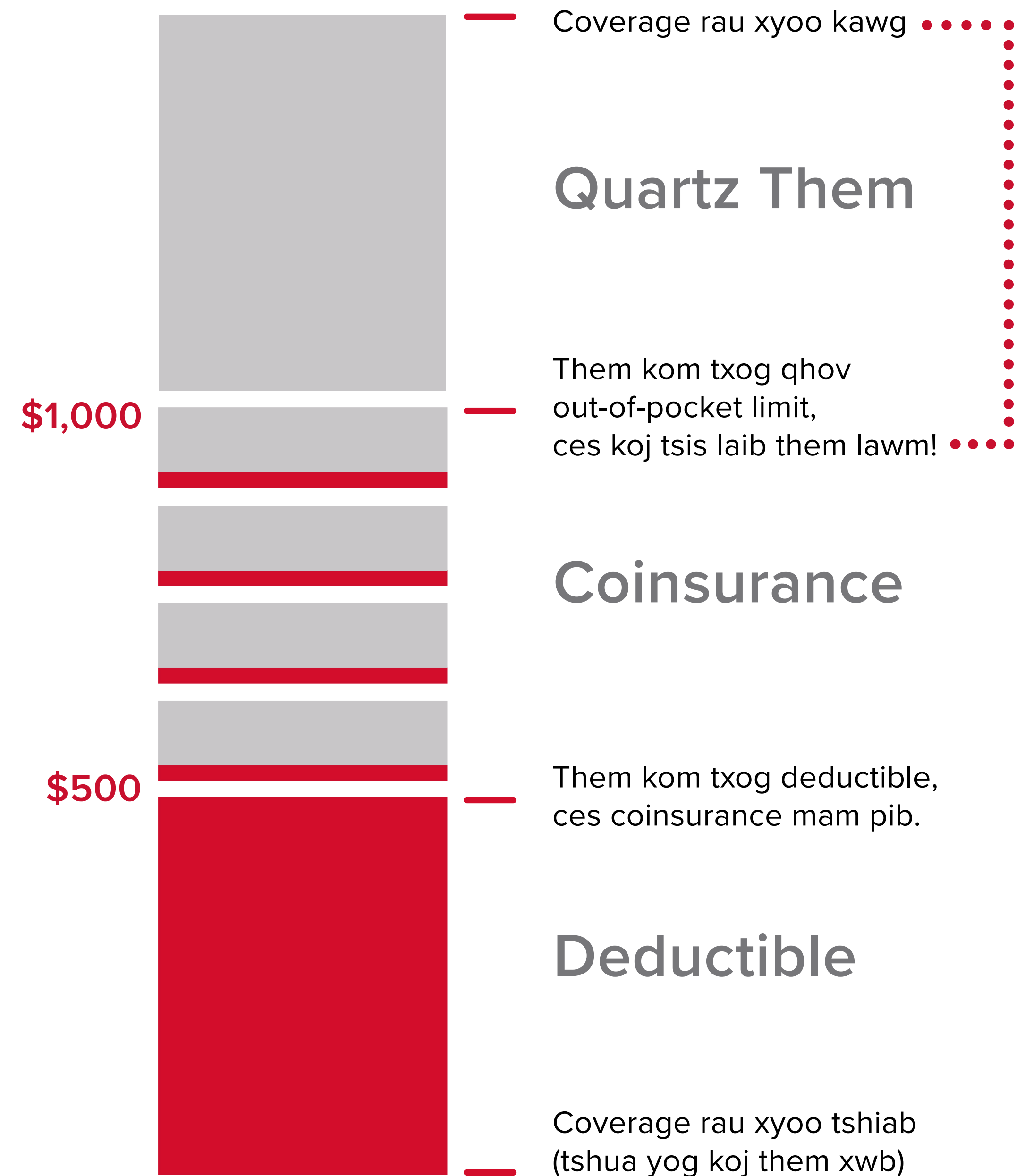
OOP yog dabtsis? Nws yog tus nqi uas koj
them tsis tshaj ntawd lawm (Out of Pocket).
Thaum koj them txog tus policy's OOP, ces
koj yuav tsis laib them ib feem (coinsurance)
ntxiv rau xyoo ntawd lawm. Saib koj daim
certificate los yog SBC kom pom qhov OOP
kom tseeb.



Pay Up to the OOP

Piv xam li koj tus nqi OOP yog **\$1,000**.

Thaum koj them tag **\$1,000** rau nqi kho mob (deductible thiab coinsurance), koj them txog koj tus nqi OOP lawm, ces lub insurance company mam them **100%** rau koj cov nuj qis.



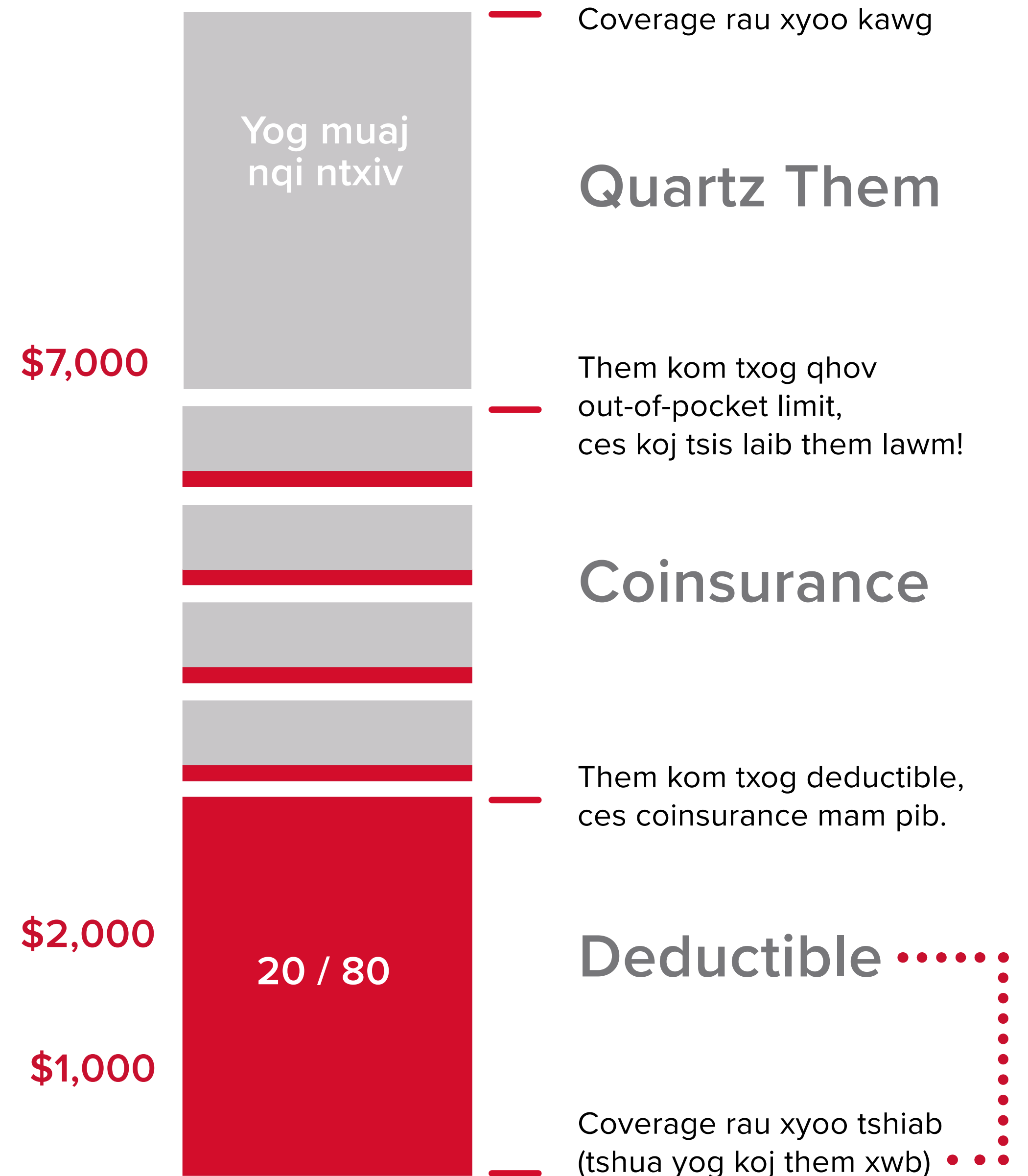
OOP Example

YKoj li OOP tiaj zaum yog **\$1000**.

Piv xam tias koj mus kuaj hau maum, es koj li nqi hau maum yog **\$7,000**. Koj li plan qhov **deductible** yog **\$1,000**, **20%** yog ib feem (coinsurance), thiab **\$2,000 OOP**.

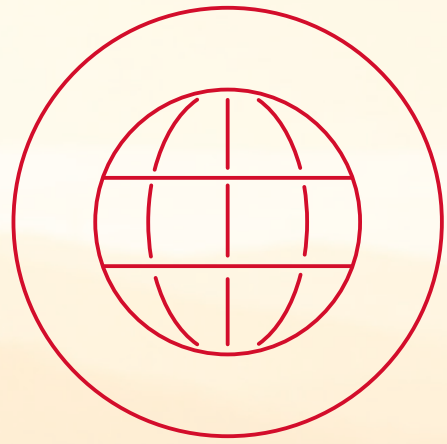
Ntawm koj qhov plan, koj tsuas them kom txog **\$2,000**.

Koj tsuas them **\$1,000 deductible + \$1,000 ib feem (coinsurance)** kom txog koj qhov **OOP**. Tom qab koj them txog koj li OOP, lub health insurance company mam them tag nrho koj cov nuj qis rau xyoo ntawd.



Puas muaj lus nug?

NCO NTSOOV



Kuv tus thaj maum puas nyob hauv qhov network? Yuav kom paub, ces salb koj li insurance qhov website los yog hu rau customer service.



Ntawm kuv txoj kev kho mob, kuv li insurance puas them? Saib koj daim certificate of coverage los hu rau customer service.



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Ua tsaug!