NEW HAMPSHIRE INTERLOCAL TRUST

HMO Super $25/$50 $2000

Harvard Pilgrim (MD20282)

In-Network

Benefits Covered in Full (no cost to the member)	
Preventive Care Routine physical, gynecological, and well child exams; immunizations; age appropriate screenings.	Covered in Full
Laboratory Tests	
X-rays	
Chemotherapy & Radiation Therapy	
Routine Maternity Care - Prenatal and Postpartum Counseling about alcohol and tobacco use, services to promote breastfeeding, routine urinalysis and screenings for complications.	
Inpatient Mental Health & Substance Abuse	
Home Health Care	
Oxygen & Respiratory Equipment	

Benefits Covered after a Copayment	
Tier 1 Copayment Professional Visits:	$25 Copay
PCP Office Visit	
Routine Annual Eye Exam (1 per year)	
Acupuncture; 20 visit limit	
Chiropractic Care; unlimited visits	
Outpatient Mental Health & Substance Abuse	
Tier 2 Copayment Professional Visits:	$50 Copay
Specialist Office Visit	
Physical/Occupational/Speech Therapy; unlimited visits	
Allergy Injections	$5 Copay
Emergency Room (waived if admitted)	$150 Copay
Prescription Drugs: Retail (30 day Supply)	$5/$15/$30/$50
Mail Order (90 day Supply)	$5/$15/$30/$50

Benefits Covered after a Deductible	
Best Buy Deductible: Limit one per year	$2,000 Deductible ($6,000 Family Maximum)
Hospital Inpatient	Deductible; then Covered in Full
Maternity Care - Delivery	
Advanced Radiology; CT Scans & MRIs	
Outpatient Surgery	
Skilled Nursing Facility & Inpatient Rehabilitation; combined 100 day limit per year	
Ambulance - Emergency Transport	
Durable Medical Equipment	Separate $100 Deductible; then 20% Coinsurance
Out of Pocket Maximum: Medical	$3,000 ($7,000 Family)
Prescription Drugs	$3,000 ($6,000 Family)

Deductible Year: Calendar Year (January-December) **Deductible Carry-Over Provision:** Yes **Lifetime Benefit:** Unlimited

Extraction of teeth impacted in bone is not a covered benefit.

This is only a summary of benefits, please consult the corresponding schedule of benefits. Exceptions & exclusions apply.

Benefit limits, deductibles and out of pocket maximums are based on a calendar year.

Jan-2020