

#2393 Giles Farm Services Benefits

Benefits	
Service	MEC PLUS PLAN
Annual Deductible	
Per Person	\$250.00
Out of Pocket	\$500.00
Percentage Payable	75%
Professional Services	
Office visit	\$10 co-pay Plan Pays 100% of allowed
Specialist visit	\$40 co-pay Plan Pays 100% of allowed
Urgent Care Facility/Service	\$40 co-pay Plan Pays 100% of Allowed
Additional Services/Lab & X-ray in office	75% after Deductible
Preventative Services - Child & Adult	100%
Outpatient Lab & X-Ray Subject to deductible	75% after Deductible
Specialty Testing/Scans Subject to deductible	Not Covered
Outpatient Services Facility	Not Covered
Outpatient Services Physician	Not Covered
Emergency Services	
Emergency Room	Not Covered
Ambulance	Not Covered
Hospital Benefits	
Inpatient	Not Covered
Additional Outpatient Services	
Skilled Nursing	Not Covered
Chiropractic Services	Not Covered
Acupuncture Services	Not Covered
Rehabilitation Services Subject to deductible	\$20 co-pay Plan pays 100% of allowed
Physical/Occupational Services	Not Covered
Mental Outpatient	Not Covered
Substance Abuse Outpatient	Not Covered
Pediatric Dental & Vision	ACA Required Benefit Only
Prescriptions	
Generic	\$5.00 co-pay
Brand Formulary	Not Covered
Brand Non-Formulary	Not Covered
Specialty Medication	Not Covered