

**RMT Contracting, Inc.**

<b>Benefits</b>	<b>MEC Plus Plan</b>
<b>Annual Deductible Per Person/Per Family</b>	\$0/\$0
<b>Calendar Year Maximum Out of Pocket (Includes copays)</b>	\$5,000/\$10,000
<b>Percentage Payable</b>	100%
<b>Lifetime Maximum Benefit</b>	No Limit
<b>Professional Services</b>	<b>Services must be provided by Providers within the Healthsmart Network</b>
<b>Physician office visits (Illness/Injury Related)</b>	\$25 co-pay
<b>Specialist office visit</b>	\$35 co-pay
<b>Urgent Care</b>	\$45 co-pay
<b>Lab &amp; X-ray in office</b>	\$40 co-pay
<b>Lab &amp; X-Ray Outpatient</b>	\$40 co-pay
<b>Complex Imaging – CAT, MRI, MRA/MRI &amp; PET SCANS</b>	Not Covered
<b>Preventative Services - Child &amp; Adult</b>	100%
<b>Outpatient Services</b>	
<b>Facility</b>	Not Covered
<b>Physician</b>	Not Covered
<b>Emergency Services</b>	
<b>Emergency Room – Facility and Physician</b>	Not Covered
<b>Ambulance</b>	Not Covered
<b>Hospital Benefits</b>	
<b>Facility</b>	Not Covered
<b>Physician</b>	Not Covered
<b>Mental Health</b>	Not Covered
<b>Substance Abuse</b>	Not Covered
<b>Additional Services</b>	
<b>Chemotherapy/Radiation Therapy</b>	Not Covered
<b>Skilled Nursing</b>	Not Covered
<b>Chiropractic/Acupuncture</b>	Not Covered
<b>Physical/Occupational/Speech</b>	Not Covered
<b>Mental Outpatient</b>	Not Covered
<b>Durable Medical Equipment</b>	Not Covered
<b>Sleep Disorder – Medically Necessary</b>	Not covered
<b>Substance Abuse Outpatient</b>	Not Covered
<b>Pediatric Dental &amp; Vision</b>	<b>ACA Required Benefits</b>
<b>Prescriptions</b>	
<b>Generic</b>	\$10 co-pay
<b>Brand Formulary</b>	\$45 co-pay
<b>Brand Non-Formulary</b>	Not Covered
<b>Mail Order (90 Days)</b>	
<b>Generic</b>	Not Covered
<b>Preferred</b>	Not Covered
<b>Non-Preferred</b>	Not Covered
<b>Specialty Medication</b>	Not Covered

**LIFE INSURANCE**

<b>TYPE OF COVERAGE</b>	<b>BENEFIT</b>
<b>Employee Life</b>	<b>\$5,000.00</b>
Benefits reduce 65% at age 65; 45% at age 70; 30% at age 75; Coverage terminates at retirement.	
<b>Accidental Death &amp; Dismemberment</b>	
Maximum Employee Benefit	\$5,000.00