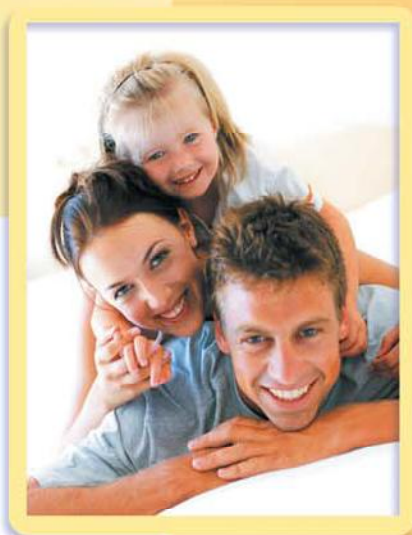


100% COINSURANCE OPTIONS

IFOCUS Health Benefit Plans



It's Your Health

IFOCUS PLANS

 **VALON**
HEALTHCARE

IFOCUS on QUALITY HEALTHCARE

It's Your Health



Personal Member Service

Call Avalon Member services and you will always talk to a live customer service representative during regular business hours. Monday - Friday: 8 am to 6 pm EST.



Lower Medical Costs

Find out the cost of each procedure before you pay for it through the Avalon CareSupport Program, and when possible, we can help you find a lower price.



Best Doctors

One phone call to Avalon's CareSupport Program will get you detailed information on physician and hospital outcomes data.



Pharmacy Choice

Pick a plan that fits your needs, decide for yourself if you want or need a pharmacy benefit attached to your healthcare plan.



Unlimited Doctor Visits

Visit your primary physician or specialist as many times as you want with just a co-pay.



Child Plans

Children-Only Plans are available and no other carrier is as "mother-to-be" friendly.



Wide Choice of Hospitals and Physicians

Avalon has one of the largest networks of hospitals and doctors throughout the state of Florida.

IFOCUS PLANS	CO-PAY SELECT PLANS	
	D3	D5
	Individual/Family	Individual/Family
Deductible and Max Out-of-Pocket	\$3,500/\$7,000	\$5,000/\$10,000
Hospital In-Patient/Out-Patient Co-Pay	\$500 or \$1,000	\$500 or \$1,000
Primary Care Co-Pay	\$ 25	\$ 25
Specialist Co-Pay	Deductible	Deductible
Adult Physical Exam ²	\$ 25	\$ 25
Well Child Care	\$ 25	\$ 25
Mammography Exam	Covered 100%	Covered 100%
X-Ray and Lab ³	Deductible	Deductible
Emergency Room ⁴	Deductible	Deductible
Complex Imaging (MRI, MRA, etc.)	Deductible	Deductible
Home Healthcare & Durable Medical Equipment	Deductible	Deductible
Lifetime Maximum	\$5 Million	\$5 Million

Coverage - All prices are based on in-network services. Out-of-Network services are those from a provider that do not participate in one of Avalon Healthcare's regional networks and will result in reduced benefits.

We all know that when it comes to healthcare, the individual needs to focus on his or her own special needs to live a fulfilling and happy life. At Avalon Healthcare we offer health insurance products that provide appropriate benefit plans for discerning individuals who take an active interest in their own well-being. You know, people like you.

Avalon IFOCUS Health Benefit Plans put the individual first. We offer a variety of plan options that address the specific needs of each individual and allow for personal customization based upon healthcare requirements. Our IFOCUS Plans even let the individual customize their plan based upon family size.

IFOCUS HEALTH BENEFIT PLANS - 100% COINSURANCE OPTIONS

CO-PAY BALANCE PLANS				HSA HEALTHSAVER PLANS		
A6S	D1S	D3S	D5S	A4	A6	A7
Individual/Family	Individual/Family	Individual/Family	Individual/Family	Individual/Family	Individual/Family	Individual/Family
\$2,000/\$4,000	\$2,500/\$5,000	\$3,500/\$7,000	\$5,000/\$10,000	\$2,500/5,000	\$3,750/7,500	\$5,000/10,000
Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
\$ 25	\$ 25	\$ 25	\$ 25	Deductible	Deductible	Deductible
\$ 50	\$ 50	\$ 50	\$ 50	Deductible	Deductible	Deductible
\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25
\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25	\$ 25
Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
Deductible	Deductible	Deductible	Deductible	Deductible	Deductible	Deductible
\$5 Million	\$5 Million	\$5 Million	\$5 Million	\$5 Million	\$5 Million	\$5 Million

Coverage - All prices are based on in-network services. Out-of-Network services are those from a provider that do not participate in one of Avalon Healthcare's regional networks and will result in reduced benefits.

1. Network varies by region. Services assume regional network provider delivers care.
2. A six month waiting period applies. Additionally, there is a \$250 maximum per calendar year per person.
3. These services require pre-certification from Avalon. Failure to pre-certify prior to receiving services will result in a reduction in benefits by 50% of the allowed amount.
4. Must notify Avalon Medical Management within 24 hours or reasonably thereafter.

This is a benefit summary. It is intended for informational purposes only, and does not represent a full description of benefits provided. For a complete description of benefits and exclusions, please refer to the insurance policy certificate and schedule of benefits.

HELPFUL TOOLS FOR CONSUMERS

Along with our Co-Pay and HSA Plans, we offer the tools to help you get the most out of your healthcare plan. Tools such as *One Voice*, where **you will always speak to a trained Member service representative**, or *Optum 24*, where you can speak to a trained nurse 24 hours a day.

We also provide online tools to help you make important healthcare decisions, like selecting a doctor or hospital online, searching for a pharmacy or gathering information from our Learning Center.

One Voice Talk to a live member services representative that can answer your questions from A to Z. Your call will never go through voice prompts or recording during business hours.



Learning Center Connect via the web and get the information you need to understand the changing medical and financial healthcare landscape.



CareSupport Call the Avalon CareSupport Program to obtain pricing for medical procedures at hospitals and for medical outcomes data.



OptumHealth Speak to a trained nurse 24 hours a day, seven days a week via telephone.



PHARMACY

SUMMARY OF DRUG RIDERS

Step 1: Select Co-Pay Plan

IFOCUS Co-Pays

15 SERIES PLAN

Retail Generic	\$ 15
Retail Formulary	\$ 50
Retail Non-Formulary	\$ 75
Mail Order 90-Day Supply	2.5 x Retail

20 SERIES PLAN

Retail Generic	\$ 20
Retail Formulary	\$ 60
Retail Non-Formulary	\$ 100
Mail Order 90-Day Supply	2.5 x Retail

DEDUCTIBLE OPTIONS

Step 2: Select Deductibles

IFOCUS Rx PLAN	Deductible
A	\$ 0
B	\$ 250
C	\$ 500
D	\$ 750
E	\$ 1,000
F	\$ 1,250
G	\$ 1,500
H	\$ 1,750
I	\$ 2,000
J	\$ 2,500
K	\$ 3,000
L	\$ 3,500
M	\$ 3,750
N	\$ 4,000
O	\$ 5,000

Note: All benefit cost-sharing subject to the allowance as defined in the Plan.

Notes on RX Plans:

Co-Pay Plans -

- Any Rx Rider may be purchased with any health benefit plan.
- The deductible applies to retail (in-network), mail order and out-of-network charges.
- The Rx deductibles exist as separate from medical deductibles.
- There is no OOP maximum for Rx costs.

HSA Plans -

- The elected Rider must have the same deductible as the health benefit plan.
- Medical claims and Rx claims contribute towards the Plan deductible.
- The Plan in-network deductible and OOP applies to retail (in-network) and mail order Rx.
- The Plan out-of-network deductible and OOP applies to out-of-network charges.
- Once Plan in-network deductible is met, co-pays do not count toward the Plan in-network OOP maximum.

MATERNITY*

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Pre-Natal & Post-Natal Care:		
Physician Services & Midwives - PCP Office Visits	Plan Deductible & Coinsurance	Plan Deductible & Coinsurance
Physician Services & Midwives - Specialists Office Visits	Plan Deductible & Coinsurance	Plan Deductible & Coinsurance
Hospital/Birthing Center:		
Normal/Cesarean Section Delivery	Plan Deductible & Coinsurance	Plan Deductible & Coinsurance

* Maternity coverage is effective fifteen (15) months after the individual's effective date of coverage under rider.

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