

For UniCare State Indemnity Plan/Community Choice members

**Effective July 1, 2018**

“What’s a copay? A deductible? An out-of-pocket limit? How does my plan work if I have to go to a doctor?”  
Use this guide for a better idea of how it works and get some peace of mind.

### Preventive care

- We cover 100% of the allowed amount for yearly checkups, preventive tests and other things that keep you healthy.<sup>1</sup>

### Copay (copayment)

- When you see a doctor, you pay a set amount to the doctor for the visit. A copay is a fixed dollar amount you pay when you get a medical service, such as when you go to your doctor.
- Copays don't count toward your deductible.

### Deductible

- You pay a set amount toward certain covered services each year before UniCare begins paying benefits for those services.
- A medical deductible works just like the deductible for your car insurance: it's the fixed amount you have to pay before your insurance kicks in.
- Covered services that the deductible applies to include labs, X-rays and surgeons' fees.

### Coinsurance

- Some health care bills are shared between you and UniCare. This is called coinsurance.
- UniCare pays either 80% or 100% of the allowed amount, depending on what the service is.

### Out-of-pocket maximum

- To protect you from high costs, your plan has an out-of-pocket maximum. This maximum is the most you could pay for copays, deductible and coinsurance (at Community Choice hospitals) in a year.
- Once you meet your out-of-pocket maximum, we pay 100% of covered services for the rest of the plan year. (Your plan year starts on July 1 and ends on June 30 of the next year.)
- Your out-of-pocket maximum counts toward your member costs – copays, deductible and coinsurance at Community Choice hospitals. (A different limit applies to non-Community Choice coinsurance.) Your member handbook lists other costs, such as your insurance premiums, that aren't included.

## Questions?

Call UniCare Member Services at 833-663-4176  
or visit [unicarestatplan.com](http://unicarestatplan.com)

**An example of your plan in action →**

<sup>1</sup> Includes preventive services recommended by the U.S. Preventive Services Task Force. Frequency of preventive exams is based on Massachusetts Health Quality Partners (MHQP) guidelines.

# Community Choice in action: an example situation

John has UniCare State Indemnity Plan/Community Choice. His plan includes:

- ❑ \$400 medical deductible
- ❑ \$15 copay for primary care visits (with a Patient-Centered Primary Care provider)
- ❑ \$100 copay per day for high-tech imaging (such as MRIs) at Community Choice hospitals
- ❑ \$275 copay for inpatient hospital care at Community Choice hospitals
- ❑ 20% coinsurance for inpatient care at a skilled nursing facility
- ❑ \$5,000 individual out-of-pocket maximum at Community Choice hospitals

After injuring his knee in a soccer game, John calls his doctor who is affiliated with a Community Choice hospital. He makes sure to use Community Choice hospitals because they cost him the least. This example explains what happened, what John paid, and what UniCare paid.

**Important!** The charges below are examples and don't reflect accurate costs for the services listed.

| What happened   |                  | What John's costs were  |
|---|------------------|---|
| <b>John goes to the doctor</b>                                    |                  |   |
| Doctor visit (without insurance):                                 | \$200            | <b>\$15</b> – John's copay for a primary care office visit<br><i>John's doctor is a Patient-Centered Primary Care provider; otherwise, his copay would be \$20.</i>   |
| UniCare's allowed amount:   | \$120            |   |
| <b>John paid:</b>   | <b>\$15</b>      |   |
| <b>UniCare paid:</b>  | <b>\$105</b>     |   |
| <b>The doctor orders an MRI of John's knee</b>                    |                  |   |
| MRI cost (without insurance):                                     | \$1,500          | <b>\$100</b> – John's copay for the MRI (high-tech imaging)<br><b>\$400</b> – John's deductible<br><i>This satisfies all of John's medical deductible</i>   |
| UniCare's allowed amount:   | \$1,000          |   |
| <b>John paid:</b>   | <b>\$500</b>     |   |
| <b>UniCare paid:</b>  | <b>\$500</b>     |   |
| <b>The doctor recommends surgery</b>                              |                  |   |
| Hospital/surgery (without insurance):                             | \$64,000         | <b>\$275</b> – John's copay for his hospital stay at a Community Choice hospital  |
| UniCare's allowed amount:   | \$35,000         |   |
| <b>John paid:</b>   | <b>\$275</b>     |   |
| <b>UniCare paid:</b>  | <b>\$34,725</b>  |   |
| <b>John goes to a skilled nursing facility for follow-up care</b> |                  |   |
| Facility cost (without insurance):                                | \$40,000         | <b>\$4,210</b> – John's coinsurance<br><i>John's 20% coinsurance would be \$6,400, but he has a \$5,000 out-of-pocket maximum. Since he has already paid \$790 in other costs, he owes \$4,210 in coinsurance before hitting his out-of-pocket maximum.</i> |
| UniCare's allowed amount:   | \$32,000         |   |
| <b>John paid:</b>   | <b>\$4,210</b>   |   |
| <b>UniCare paid:</b>  | <b>\$27,790</b>  |   |
| <b>Summary</b>  |                  |   |
| <b>Total without insurance:</b>                                   | <b>\$105,700</b> |   |
| <b>Total John paid:</b>   | <b>\$5,000</b>   |   |
| <b>Total UniCare paid:</b>  | <b>\$63,120</b>  |   |

## UniCare State Indemnity Plan

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[unicarestatplan.com](http://unicarestatplan.com)