

# UT SELECT Plan Highlights

Effective September 1, 2013



	UTSW Network	Network	Non-Network
<b>Deductible</b> (per plan year)	Waived except as noted	\$350 per individual \$1,050 per family	\$750 per individual \$2,250 per family
<b>Out-of-Pocket Maximum</b> (per plan year; does not include copays)	Waived except as noted	\$2,500 per individual \$7,500 per family	\$5,000 per individual \$15,000 per family
<b>Coinsurance</b> Plan pays (up to the allowable amount) Participant pays (after deductible)	Waived except as noted	80% 20%	60% 40%
<b>Office Visit Copay</b> Participant pays	\$10 for primary \$10 for specialist	\$30 for primary \$35 for specialist	40% after deductible
<b>Preventive Care</b> See reverse side for a list of covered services	No copay (plan pays 100%)	No copay (plan pays 100%)	40% after deductible
<b>Inpatient Hospital (facility charges)</b> Participant pays	No copay (plan pays 100%)	\$100 copay per day, plus 20% after deductible ( <i>\$500 maximum copay per admission</i> )	40% after deductible
<b>Inpatient Hospital (physician charges)</b> Participant pays	No copay (plan pays 100%)	20% after deductible	40% after deductible
<b>Emergency Room</b> Participant pays	\$150 copay ( <i>copay waived if admitted</i> )	\$150 copay ( <i>copay waived if admitted</i> )	40% after deductible
<b>Outpatient Lab and X-Ray</b> Participant pays	No copay (plan pays 100%)	No copay (plan pays 100%)	40% after deductible
<b>Outpatient Surgery (facility charges)</b> Participant pays	No copay (plan pays 100%)	\$100 copay per visit plus 20% after deductible	40% after deductible
<b>Outpatient Surgery (physician charges)</b> Participant pays	No copay (plan pays 100%)	20% after deductible	40% after deductible



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# UT SELECT – Preventive Care

## Preventive Care Services

Evidence-based items or services that have in effect a rating of “A” or “B” in the current recommendations of the United States Preventive Services Task Force (USPSTF).

Immunizations recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC) with respect to the individual involved.

Evidence-informed preventive care and screenings provided for in the comprehensive guidelines supported by the Health Resources and Services Administration (HRSA) for infants, children, and adolescents. Additional preventive care and screenings for women, not described above, as provided for in comprehensive guidelines supported by the HRSA.

For purposes of this benefit, the current recommendations of the USPSTF regarding breast cancer screening and mammography and prevention will be considered the most current (other than those issued in or around November 2009).

The preventive care services described above may change as USPSTF, CDC and HRSA guidelines are modified.

Examples of covered services included are routine annual physicals (one per year); immunizations; well-child care; breastfeeding support, services and supplies; cancer screening mammograms; bone density test; screening for prostate cancer and colorectal cancer (including routine colonoscopies); smoking cessation counseling services and healthy diet counseling; and obesity screening/counseling. Examples of covered services for women with reproductive capacity are female sterilization procedures and specified FDA approved contraception methods with a written prescription by a health care practitioner, including cervical caps, diaphragms, implantable contraceptives, intra-uterine devices, injectables, transdermal contraceptives and vaginal contraceptive devices. Prescription contraceptives for women are covered under the pharmacy benefits administered by Express Scripts. To determine if a specific contraceptive drug or device is included in this benefit, contact Customer Service at 1-800-818-0155. The list may change as FDA guidelines are modified.

## Network Benefits

When Using Network Providers  
(Provider must bill services as “preventive care”)

Plan pays 100%  
(no copay required)



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Please visit [healthcare.gov](http://healthcare.gov) for additional information on preventive care services.