### Choosing the Best Self-only Plan for You

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Amount</th>
<th>Co-insurance</th>
<th>Annuity @ 6% Annual Growth Rate</th>
<th>Annuity @ 5% Annual Growth Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual High Deductible Health Plan (HDHP)</td>
<td>$5,000</td>
<td>20%</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Family High Deductible Health Plan (HDHP)</td>
<td>$6,000</td>
<td>20%</td>
<td>$1,200</td>
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</tr>
<tr>
<td>Annuity @ 6% Annual Growth Rate</td>
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<tr>
<td>Annuity @ 5% Annual Growth Rate</td>
<td>$8,000</td>
<td>20%</td>
<td>$1,600</td>
<td>$1,600</td>
</tr>
</tbody>
</table>

### Choosing the Best Family Plan for You

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Amount</th>
<th>Co-insurance</th>
<th>Annuity @ 6% Annual Growth Rate</th>
<th>Annuity @ 5% Annual Growth Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family High Deductible Health Plan (HDHP)</td>
<td>$10,000</td>
<td>20%</td>
<td>$2,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>Family High Deductible Health Plan (HDHP)</td>
<td>$8,000</td>
<td>20%</td>
<td>$1,600</td>
<td>$1,600</td>
</tr>
<tr>
<td>Annuity @ 6% Annual Growth Rate</td>
<td>$6,000</td>
<td>20%</td>
<td>$1,200</td>
<td>$1,200</td>
</tr>
<tr>
<td>Annuity @ 5% Annual Growth Rate</td>
<td>$4,000</td>
<td>20%</td>
<td>$800</td>
<td>$800</td>
</tr>
</tbody>
</table>

### Important Information About Your Plan

- **Understanding the Coverage**
  - **Medical emergency**: A sudden and, at the time, unforeseeable event that requires immediate medical attention, where failure to provide medical attention would result in serious medical complications or death.
  - **Medical necessity**: Generally defined by the benefit plan to include services for which the beneficiary is medically determined to require care for an existing condition of a bodily organ or part, or would place the person’s life in danger.
  - **Pre-existing conditions**: A health condition that existed prior to the effective date of coverage and occurred after the effective date of coverage.

### How an HSA Works

- **Self-only Deductible**: Before coverage begins
- **Family Deductible**: After coverage begins
- **Maximum Amount**: $10,000
- **Minimum Amount**: $2,500
- **NHSA**: Annuity is invested
- **NSA**: Annuity is spent

### Important Information About Your Plan

- **Annual Deductible**: $5,000
- **Amount plan pays in-network/out-of-network after deductible is met**: $4,000

### Medical emergency

**Medical necessity**

- **Elective surgery**: Surgery that is not required to correct a congenital abnormality, is related to the recreation of a body part following amputation, or is restructuring surgery resulting from an accidental injury or accident after the effective date of coverage.
- **Pregnancy expenses**, unless they result from an accident or result from a condition for which the individual is or may be legally responsible.
- **Dental and orthodontic services**
- **Services by a family member**
- **Services provided under any local, state or federal law, regulation or statute**
- **Benefits provided by the individual or any health care provider, plan or insurer**
- **Blood transfusions** (the first three pints of blood per hospital admission are the member’s share of cost)
- **Cosmetic surgery, unless it is required to correct a congenital abnormality, is related to the recreation of a body part following amputation, or is restructoring surgery resulting from an accidental injury or accident after the effective date of coverage)
- **Expenses for services that are not medically necessary**
- **Pregnancy expenses**, unless they result from an accident or result from a condition for which the individual is or may be legally responsible.
- **Services by a family member**
- **Services provided under any local, state or federal law, regulation or statute**
- **Benefits provided by the individual or any health care provider, plan or insurer**
- **Blood transfusions** (the first three pints of blood per hospital admission are the member’s share of cost)

*Please refer to the Health Plan Description Form for certificate for complete details on plan limitations and exclusions. If there is a conflict between the limitations and exclusions listed in this brochure and the Health Plan Description Form or certificate, the Health Plan Description Form or certificate will prevail.*
Anthem Blue Cross and Blue Shield is pleased to offer a new series of high-deductible health plans that meet federal guidelines for health savings accounts.

Here’s how it works:
- You enroll in an HSA-qualified high-deductible health plan.
- You establish an interest-bearing health savings account.
- You (or other individuals may also be tax-advantaged contributions, up to a limit based on your income level).
- You use the HSA to pay for qualified medical expenses for you, your spouse and qualified tax dependents.
- Any unused money carries over from one year to the next.
- You own the HSA. It continues to grow and gain interest for you and is yours to keep.

Guiding You To Savings
With an HSA-qualified HDHP, you have new financial freedom to manage your care and costs.

You choose the deductible level for the plan that’s right for you. The money you care on premiums by choosing a plan with a higher deductible, which is the amount you pay before your insurance begins, can help you fund your HSA.

Encouraging You To Spend Wisely
The HSA is a new alternative for managing your health care costs that helps you save money to pay for future qualified medical expenses. It’s a tax-exempt savings account that’s coupled with an insured, high-deductible health plan (HDHP). It’s similar to an individual retirement account, except contributions to an HSA are used to pay for qualified medical expenses now and after retirement.

Helping You w ith Support Tools
While an HDHP encourages your involvement in health care spending, you need help managing your health savings account. And, Anthem offers dedicated customer support and services designed to help you get the most from your HSA benefits.

• The account can build up over a period of years to pay for future qualified medical expenses.
• You own the HSA.
• Contributions from the HSA for qualified medical expenses are tax-free. All distributions may be subject to ordinary income tax and a 10 percent penalty.
• Unused funds carry over year to year similar to an individual retirement account (IRA).

You’ll receive details about setting up your HSA. Use our BlueCard® program. Your health care decisions. This program guides you to choose the provider that provides the lowest cost. You can also choose to pay for preventive care benefits, you must do your own due diligence and research. Your plan will pay between 80 percent and 100 percent in network-covered services, depending on the plan you choose.

Benefits of an HDHP
Anthem Blue Cross and Blue Shield brings you HSA-qualified Health Plans for Individuals

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Anthem Blue Cross and Blue Shield brings you HSA Plans for Individuals

A new tax-advantaged way to manage your health care costs

Here’s how it works:

• You enroll in an HSA-qualified high-deductible health plan.
• You establish an interest-bearing health savings account.
• You or other individuals may make tax-advantaged contributions, up to certain limits.
• You use the HSA to pay for qualified medical expenses for your spouse and qualified tax dependents.
• Any unused money carries over from year to year.
• You own the HSA. It continues to grow on a tax-deferred basis.

Helping You with Support Tools and Resources

Anthem offers dedicated customer support and services designed to help you pay the most from your HSA benefits.

HSA Features

• The HSA was created by Title XIII of the Medicare Prescription Drug Improvement and Modernization Act.
• If you are under 65 years of age, you are eligible to contribute to an HSA if you are not covered by a group health plan, in which case the HSA is treated as an individual health savings account (HDHP) under the Internal Revenue Code. If you are eligible, you may establish an HSA, contribute to it, and use it to pay for qualified medical expenses.
• Exclusions from this coverage include:
  - Except for certain state-mandated preventive care services, you must meet the deductible before you begin receiving coverage.
  - Used funds carry over year to year, subject to the annual limitation.
• The account is permanent—all unused funds carry over year to year. Federal law permits distributions of funds for any medical expenses, including dental and long-term care.
• You can withdraw funds at any time, but you will have to pay the tax and 10 percent penalty. 
• You are responsible for paying your deductible and coinsurance amounts, which are the amount you pay before your insurance begins to pay. The bottom line:
• You pay for the care you need now and after retirement.

Anthem Blue Cross and Blue Shield is pleased to offer a new series of high-deductible health plans that meet federal guidelines for health savings accounts.

Forging a New Path for Managing Health Care Costs

Recently approved by the U.S. Congress, a health savings account (HSA) is the newest way to help you manage health care costs and save for future qualified medical expenses. It’s a tax-exempt savings account that’s coupled with an exempt IRS-registered health insurance plan (HDHP). It’s similar to an individual retirement account (IRA) except that the money in an HSA is used to pay for qualified medical expenses.

SA-qualified High-deductible Health Plans

High-deductible health plans are designed to accompany the newest health care innovation—a health savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified HDHPs with an HSA, you’ll pay lower premiums and have an investment account designed to help you pay for qualified medical expenses.

Anthem’s HSA-qualified plans allow you to select from a variety of deductible and coinsurance options, giving you the flexibility to choose a plan that meets your individual or family health care coverage needs. It’s a combination savings plan to help you prepare for your current and future health care expenses.

Rebate Advantages

An HSA is a saving tool that provides you with a rebate—special pricing on qualified health care benefits. It’s the only type of retirement account that has provided qualified health care benefits for more than 60 years.

• You own the HSA. 

• Distributions from the HSA for qualified medical expenses are tax- free. All other distributions may be subject to ordinary income tax and a 10 percent penalty.

• Unused funds carry over from year to year, subject to the annual limitation.

HSAs are designed to help you pay for qualified medical expenses. To determine which plan is right for you, please contact us or call Chase toll at 800-788-1000.

Anthem Healthy Solutions includes programs designed to help you provide your HSA holder with the best advice on how to use your HSA to pay for qualified medical expenses. It’s a savings account that has provided qualified health care benefits for more than 60 years.

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Combating the Cost of Catastrophic Health Care Expenses

Anthem Blue Cross and Blue Shield brings you HSA-qualified Health Plans for Individuals

Anthem offers dedicated customer support and services designed to help you pay the most from your HSA benefits.

HSA Features

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• Exclusions from this coverage include:
  - Except for certain state-mandated preventive care services, you must meet the deductible before you begin receiving coverage.
  - Used funds carry over year to year, subject to the annual limitation.
• The account is permanent—all unused funds carry over year to year. Federal law permits distributions of funds for any medical expenses, including dental and long-term care.
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Anthem Blue Cross and Blue Shield is pleased to offer a new series of high-deductible health plans that meet federal guidelines for health savings accounts.

Forging a New Path for Managing Health Care Costs

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Helping You with Support Tools and Resources

Anthem offers dedicated customer support and services designed to help you pay the most from your HSA benefits.

HSA Features

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Here’s how it works:

- You enroll in an HSA-qualified high-deductible health plan.
- You establish an interest-bearing (HSA) is the newest way to help you-

Anthem Blue Cross and Blue Shield brings you HSA Plans for Individuals

Helping You with Support Tools

Within an HSA, your employer encourages your involvement in health care spending, your plan may provide you with an HSA, which can be used to help you manage your health savings account. And, Anthem offers dedicated customer support and services designed to help you get the most from your HSA benefits.

- The account can build up over a period of time and earn interest on its balance.
- Within an HSA, you are eligible to contribute to an HSA if you are not covered by another health plan and you are not eligible to be claimed as a dependent on someone else’s tax return and do not have other health insurance (except coverage such as dental, vision and disability). If you’re over age 65 and not eligible for Medicare, or not enrolled in Medicare Part A or Part B, you may establish or contribute to an HSA.

- The law mandates that HSA-qualified deductibles be at least $1,050 for individuals and at least $2,100 for families.*
- Annual contributions may be made up to 100% of the HSA-qualified deductible or, if lower, $2,600 for singles and $5,500 for families.*

- The account can build up over a period of time and earn interest on its balance.

HS-qualified High-deductible Health Plans

High-deductible health plans are designed to accompany the newest health care innovation—health savings accounts. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of Anthem Blue Cross and Blue Shield’s HSA-qualified health plans with an HSA, you’ll pay lower premiums and have an extra savings account. By pairing one of

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HSA-qualified High-deductible Health Plans

A new way to manage your health care costs

Important Information About Your Plan

- Benefits provided under any local, state or federal law, including statutory compensation and Worker’s Compensation.
- Services by your family member.
- Dental and orthodontic services.
- Nursing care and in-patient care.
- Complications from non-covered services.
- Private-duty nursing.
- Athletic and revenue share care.
- Coverage for infections, except preschool and syphilis and/or weakening of results.
- When an application for an HSA-qualified Health Plan is approved, Anthem will pay expenses related to a pre-existing condition or rider to the certificate.
- When an application for an HSA-qualified Health Plan is approved, Anthem will pay expenses related to a pre-existing condition or rider to the certificate.
- Rates are based on age, gender, benefit plan, dependents, region and market activity.
- When a member is not a resident of the state.
- The member has not met the HDHP deductible or set by law before effective date. See the application for a full explanation.
- Based on medical screening, some conditions may be excluded from coverage for the lifetime of the member or set by law.
- Services for cosmetic, reproductive, childbirth, convalescent or custodial care, sex change operations.
- Complications from non-covered services (list not all inclusive).
- When a member is found to be entitled to a benefit.
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Self-only Deductible

<table>
<thead>
<tr>
<th>Plan</th>
<th>Deductible</th>
<th>Coverage Limit</th>
<th>Annual Out-of-pocket</th>
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<td>B</td>
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<tr>
<td>E</td>
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Choosing the Best Family Only Plan for You

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<tr>
<th>Plan</th>
<th>Deductible</th>
<th>Coverage Limit</th>
<th>Annual Out-of-pocket</th>
<th>Co-insurance</th>
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<td>$11,500</td>
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</tbody>
</table>

How an HSA Works

Fees and determinations

- Annual deductible
- Deductible
- Family coverage deductible
- Maximum out-of-pocket

Important Information About Your Plan

- Benefits provided under any local, state or federal law, including across-state “coordinated care” and “fee-for-service” arrangements.
- Services by a family member
- Dental and orthodontic services
- Preventive care and immunizations
- Complications from non-covered services
- Private-duty nursing
- Medical and surgical stay away care
- Coverage for bias, except health and services in accordance with all applicable state laws.
- When an application for an HSA-qualified Health Plan is approved, Anthem will let you know if any services to which you are entitled under the plan are limited or excluded.
- Expenditures for skilled nursing facility care
- Policies and practices related to the HSA and health plan
- Personal items and services
- Services provided by a family member
- Services related to a pre-existing condition
- Services and supplies related to a pre-existing condition

Medically necessary

- Benefits for services that are medically necessary and necessary. Services are medically necessary if, in the judgment of the plan, they are appropriate and necessary, based on the symptoms, disease or condition treated. Services are medically necessary if they are necessary to treat a medical condition or disease, or if the services are necessary to prevent a medical condition or disease.
- Complications from non-covered services
- Private-duty nursing
- Medical and surgical stay away care
- Coverage for bias, except health and services in accordance with all applicable state laws.
- When an application for an HSA-qualified Health Plan is approved, Anthem will let you know if any services to which you are entitled under the plan are limited or excluded.
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- Services provided by a family member
- Services related to a pre-existing condition
- Services and supplies related to a pre-existing condition

Critical care and special procedures

- Critical care
- Services that are necessary to treat an emergency condition
- Services that are necessary to prevent a medical condition or disease.
- Services and supplies related to a pre-existing condition

Life and death

- Services that are necessary to treat a medical condition or disease, or if the services are necessary to prevent a medical condition or disease.