HIGHMARK. NORTHEASTERN NEW YORK

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Benefit Summary for Group:

CASHIC-Cobleskill-Richmondville CSD

Effective Date: 7/1/2022

	Traditional 907 Par Plus	
	Participating	**Additional Information**
General Information		
Provider Network	Indemnity	
Additional Benefits Deductible	$150/$400	
Deductible Administration Type	Embedded deductible - once any individual has met the individual deductible, subsequent medical costs will be covered for that individual, even if the family deductible has not been satisfied.	
Additional Benefits Coinsurance	20% coinsurance	
Coinsurance Waiver	Stop Loss - $2,000 per calendar year	
Stop Loss Administration Type	Embedded - On family plans, one person cannot exceed the individual deductible and Stop Loss maximum	
Benefit Administration Date	1/1	
Combined Inpatient & Outpatient Hospital Deductible	None	
Dependent Coverage		
Dependent Age	26/26	
Dependent Coverage Ends	End of birth month	
Domestic Partner and Children	Not covered	
Prescription Drug Coverage		
Prescription Drugs	$15/$20/$20	
Mail Order	0 Copay per 90 Day Supply	
Prescription Deductible	No	

	Traditional 907 Par Plus	
	Participating	Additional Information
Physician and Other Services		
Primary Office Visit	20% coinsurance after deductible	
Specialist Office Visit	20% coinsurance after deductible	
Telemedicine	20% coinsurance after deductible	
Outpatient Surgical Procedures (in physician's office)	Covered in full	
Emergency and Urgent Care Services		
Emergency Room	Covered in full	
Ambulance - Ground & Air Ambulance	Covered in full	
Urgent Care Center	20% coinsurance after deductible	
Preventive Services		
Bone mineral density measurement or test	Covered in full	
Cholesterol Test (lipid panel)	Covered in full	
Immunizations	Covered in full	
Mammogram	Covered in full	
Pap Smear	Covered in full	
Prostate Test (Prostate Specific Antigen "PSA")	Covered in full	
Well Child Visits	Covered in full	
Hospital Services		
Inpatient Hospital	Covered in full	
Outpatient Surgical Procedure (Facility)	Covered in full	Prior auth required for certain procedures. Follow Corporate guidelines.
Skilled Nursing Facility	Covered in full	Unlimited days within 30 days of discharge
Diagnostic Testing Services		
Laboratory Tests	Covered in full	
Radiology	Covered in full	
Maternity Services		
Physician Services: Prenatal and Postnatal Care (initial visit)	Covered in full	
Inpatient Maternity	Covered in full	
Mental Health and Substance Abuse		
Inpatient Mental Health and Substance Abuse	Covered in full	
Outpatient Mental Health and Substance Abuse	Covered in full	

	Traditional 907 Par Plus	
	Participating	Additional Information
Diabetic Supplies and Services		
Diabetic Equipment and Medical Supplies	$15/$20/$20	
Insulin and Other Oral Agents	$15/$20/$20	
Rehabilitation Services		
Chiropractic Care	20% coinsurance after deductible	
Occupational Therapy	Covered in full	Unlimited Visits
Physical Therapy	Covered in full	Unlimited Visits
Speech Therapy	Covered in full	Unlimited Visits
Additional Services		
Chemotherapy - Outpatient Facility	Covered in full	
Durable Medical Equipment	20% coinsurance after deductible	
Home Health Care	Covered in full	
Hospice	Covered in full	Unlimited visits, subject to medical necessity
Prosthetics & orthotics	20% coinsurance after deductible	
Dialysis	Covered in full	
Wellness Card	Not covered	
Pediatric Vision Services		
Routine Exam	See Comments after deductible	1 every calendar year
Medical Eye Exam	20% coinsurance after deductible	
Adult Vision Services		
Routine Exam	See Comments after deductible	1 every calendar year
Medical Eye Exam	20% coinsurance after deductible	

*For paid in full benefits from non-par providers, we will pay 100% of Fee Schedule and rollover the difference between our payments and the charges, subject to deductible and reimbursed at 80%.
**For a list of Medicare Part D creditable coverage prescription drug plans, please refer to our website.
***This is a summary of covered benefits and exclusions and is not intended as an actual contract or group plan. It does not detail all benefits, limitations and exclusions that may apply