An Explanation of Your Multiple Tier Medical Plan Design

Understanding the structure of your medical plan is essential for making informed decisions about your healthcare and managing costs. This document provides a breakdown of your **multiple-tier medical plan**, which includes different levels of in-network and out-of-network providers and facilities. Each tier has a varying cost structure, with the cost of care increasing as you move from **Tier 1** to **Tier 2** to **Tier 3/ Out-of-Network.**

Below is an overview of the different tiers in your plan, how your deductible works, and where you can find important information about your plan's costs and coverage through the HealthEZ member portal and mobile app.

- **Tier 1 $:** The lowest cost option, which includes preferred doctors and hospitals.
- **Tier 2 $$:** A slightly more expensive option, which includes other in-network providers and facilities.
- **Tier 3 / Out-of-Network $$$:** The most expensive option, which includes out-of-network providers and facilities.

Each **tier** has an associated deductible for individual and family plans. When a claim is received, it will be assigned to a tier based on the provider/facility and applied **toward** the deductible associated with that tier. Once you meet the deductible for the tier, **future claims will be adjudicated** according to your plan design, with the plan covering a greater portion (or all) of the claim. Your **Summary of Medical Benefits**, located in the HealthEZ member portal, provides the specifics for your plan. You can access your plan benefits within the HealthEZ member web portal.

The HealthEZ member web portal and mobile app **display** your deductible accumulations in numerous places.

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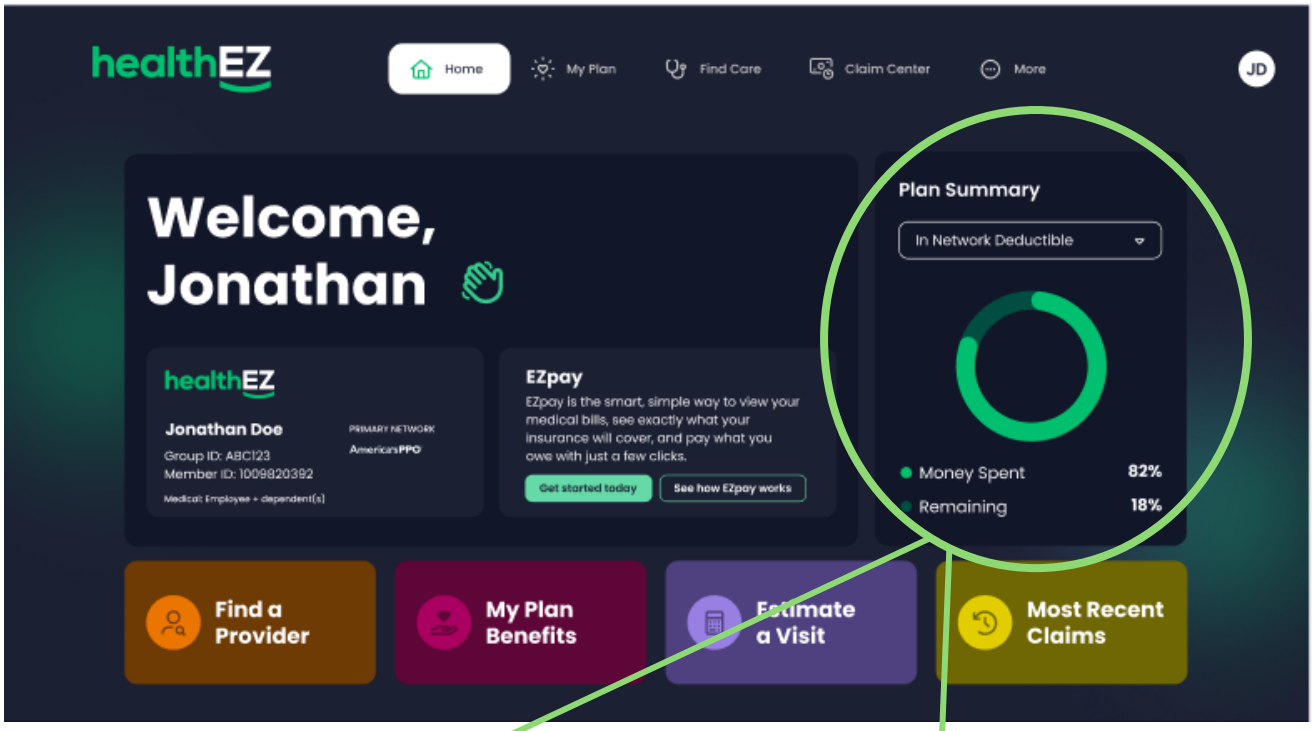
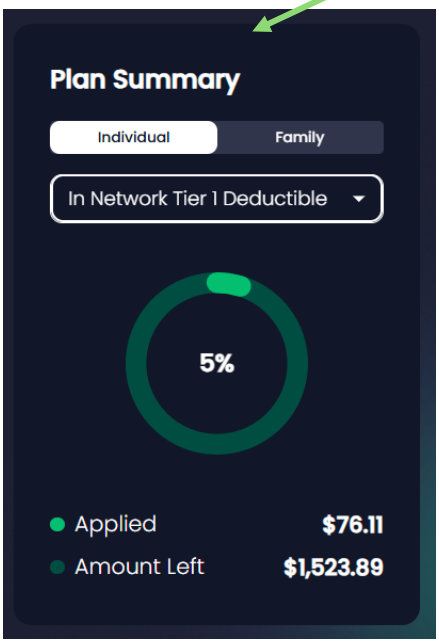
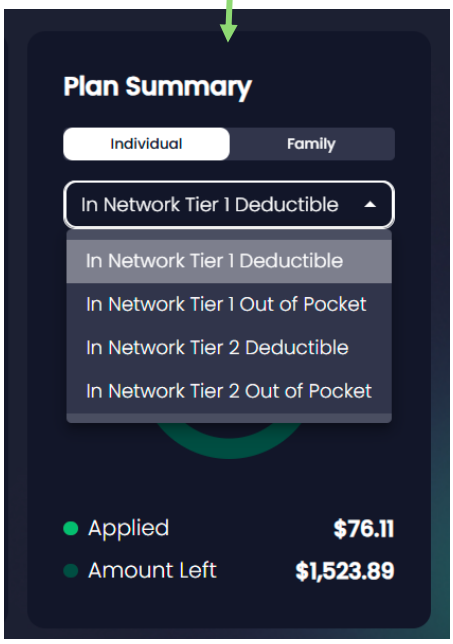
The Home Page displays the following:

Individual and Family Data:

- In-Network **Tier 1** Individual Deductible
- In-Network **Tier 1** Individual Out-of-Pocket
- In-Network **Tier 2** Individual Deductible
- In-Network **Tier 2** Individual Out-of-Pocket







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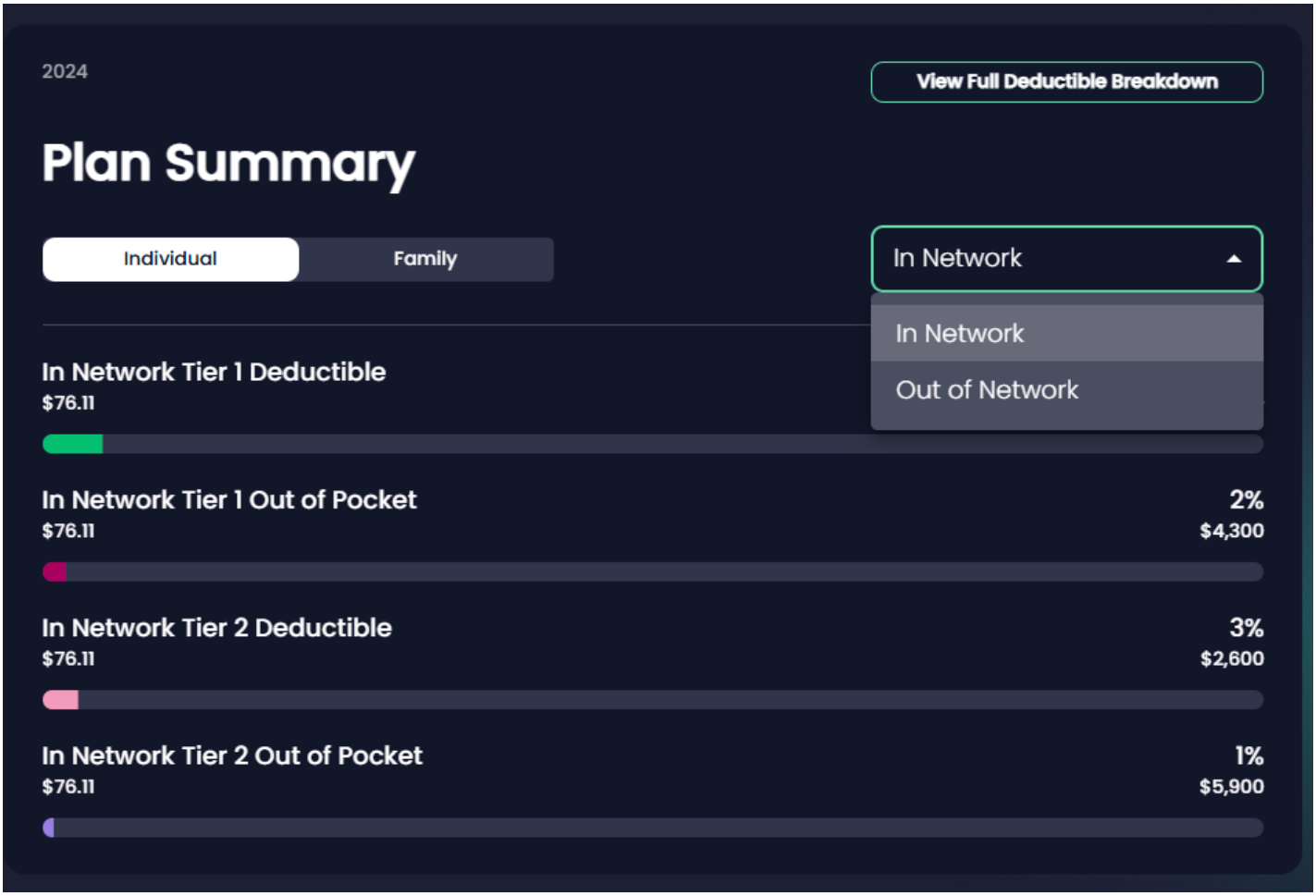
My Plan page displays the following under the Plan Summary section:

Individual and Family Data:

- In-Network **Tier 1** Deductible
- In-Network **Tier 1** Out-of-Pocket
- In-Network **Tier 2** Deductible
- In-Network **Tier 2** Out-of-Pocket
- Out-of-Network Deductible
- Out-of-Network Out-of-Pocket



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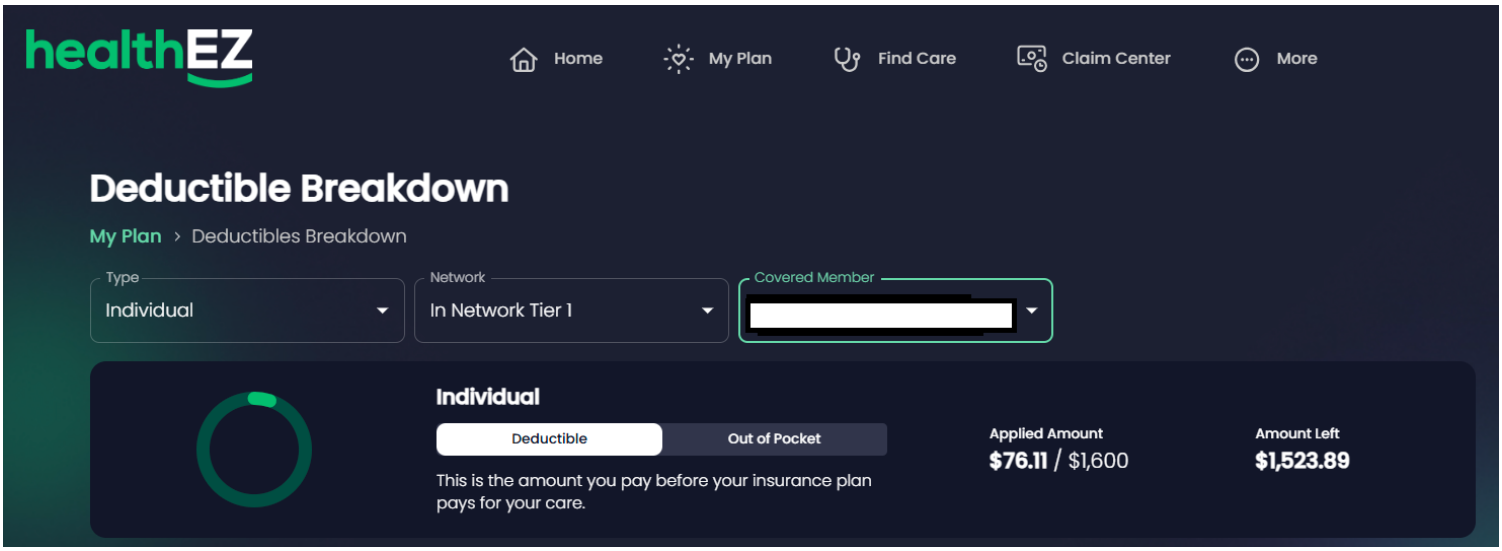
Full <u>Deductible Breakdown</u> page displays the following:

Individual and Family (or a specific family member) Data:

- In-Network **Tier 1** Deductible: *balance and remaining*
- In-Network **Tier 1** Out-of-Pocket: *balance and remaining*
- In-Network **Tier 2** Deductible: *balance and remaining*
- In-Network **Tier 2** Out-of-Pocket: *balance and remaining*
- Out-of-Network Deductible
- Out-of-Network Out-of-Pocket



If you have questions regarding your deductibles or need assistance locating providers, please contact the HealthEZ Member Experience Team at 1-844-204-3757, or by using the email contact option on the HealthEZ member portal.