

Simple. Seamless.

SafeGuard[®]

Self-Funding for the small to mid-size employer

Benefit Overview

Plan Type	Member Share Percentage (In-Network / Out-of-Network)	Member Deductible In-Network (Single / Family)	Coinsurance Maximum In-Network (Single / Family)	Rx Options (Select One)
Traditional PPO <i>Member pays deductible, then member-share percentage up to coinsurance limit (if applicable). Copays apply.</i>	SafeGuard Pinnacle 0% / 30%	\$1000 / \$2000 \$2000 / \$4000 \$3500 / \$7000 \$5000 / \$10000	N/A	Traditional Plans: Employer Selects Desired Rx Options <i>(Six packages available)</i>
	SafeGuard Peak 20% / 50%	\$500 / \$1000 \$1000 / \$2000 \$2000 / \$4000 \$3500 / \$7000 \$5000 / \$10000	\$2500 / \$5000 \$2500 / \$5000 \$2500 / \$5000 \$2500 / \$5000 \$1350 / \$2700	
Traditional EPO <i>Member pays deductible, then member-share percentage up to coinsurance limit (if applicable). Copays apply.</i>	SafeGuard Pinnacle 0% / Not Covered	\$1000 / \$2000 \$2000 / \$4000 \$3500 / \$7000 \$5000 / \$10000	N/A	Traditional Plans: Employer Selects Desired Rx Options <i>(Six packages available)</i>
	SafeGuard Peak 20% / Not Covered	\$500 / \$1000 \$1000 / \$2000 \$2000 / \$4000 \$3500 / \$7000 \$5000 / \$10000	\$2500 / \$5000 \$2500 / \$5000 \$2500 / \$5000 \$2500 / \$5000 \$1350 / \$2700	
High Deductible Health Plan PPO <i>Member pays deductible, then member-share percentage up to coinsurance limit (if applicable). HSA qualified.</i>	SafeGuard HDHP Pinnacle 0% / 30%	\$1500 / \$3000* \$2700 / \$5400 \$4000 / \$8000 \$5000 / \$10000	N/A	High Deductible Health Plans: Rx Coverage Embedded
	SafeGuard HDHP Peak 20% / 50%	\$1500 / \$3000* \$2700 / \$5400 \$4000 / \$8000 \$5000 / \$10000	\$2500 / \$5000 \$2500 / \$5000 \$2350 / \$4700 \$1350 / \$2700	
High Deductible Health Plan EPO <i>Member pays deductible, then member-share percentage up to coinsurance limit (if applicable). HSA qualified.</i>	SafeGuard HDHP Pinnacle 0% / Not Covered	\$1500 / \$3000* \$2700 / \$5400 \$4000 / \$8000 \$5000 / \$10000	N/A	High Deductible Health Plans: Rx Coverage Embedded
	SafeGuard HDHP Peak 20% / Not Covered	\$1500 / \$3000* \$2700 / \$5400 \$4000 / \$8000 \$5000 / \$10000	\$2500 / \$5000 \$2500 / \$5000 \$2350 / \$4700 \$1350 / \$2700	

*Plan includes an Aggregate Deductible: For family coverage, the entire family deductible must be met prior to any individual family member receiving plan benefits. All other plans include an Embedded Deductible: Each covered family member only needs to satisfy his or her individual deductible, not the entire family deductible, prior to receiving plan benefits.

For more detailed information, reference plan schedules.

To learn more about SafeGuard, visit www.safeguardwisconsin.com

Plan Packages

Copays - Traditional PPO and EPO Plans

	Pinnacle	Peak
Office Visit - Primary Care Physician	\$20 Copay	\$30 Copay
Office Visit - Specialist Physician	\$40 Copay	\$60 Copay
Emergency Room	\$150 Copay	\$150 Copay
Urgent Care Physician	\$50 Copay	\$75 Copay
Spinal Manipulation	\$40 Copay	\$60 Copay
Allergy Testing & Injections	\$20 Copay	\$30 Copay

Rx Options - Traditional PPO and EPO Plans

Rx Copay Tiers	Rx 1	Rx 2	Rx 3	Rx 4	Rx 5	Rx 6
Generic	\$10	\$10	\$10	\$15	\$20	\$25
Brand Formulary	\$20	\$25	\$40	\$30	\$40	\$50
Brand Non-Formulary	\$40	\$50	\$70	\$50	\$60	\$75
Specialty	20%	20%	20%	20%	20%	30%

Preventive Care

No charge for in-net preventive care and screening services and immunizations for children, adolescents and adults that have a rating of A or B in the current United States Preventive Services Task Force recommendations, or are recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, or are provided for in comprehensive guidelines supported by the Health Resources and Services Administration, with respect to the individual involved. Includes annual routine vision exam as part of a physical to determine vision loss. Consult recommendations for age, frequency and other guidelines.

Available Riders

24-Hour Work-Related Coverage
Subject to underwriting approval
 Covers claims for work-related illness and injuries for those not covered under group workers comp policy