

Preventive Care

Preventive care services are generally covered with no cost-sharing and are not subject to copayments, deductibles or annual limits when received only from an in-network provider. For more information please refer to your official plan documents.

A complete list of preventive care services recommended under the U.S. Preventive Services Task Force (USPSTF) is available online at www.uspreventiveservicestaskforce.org/

Prescription Drug

Traditional and Copay Plans

Employer Selects Desired Rx Options
(Six packages available)

High Deductible Health Plans

Rx Coverage Embedded

To learn more about

SafeGuard Wisconsin, visit
www.safeguardwisconsin.com

*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.

Excess loss insurance policies and EPO/PPO insurance plans underwritten by US Health and Life Insurance Company. SafeGuard plans administered by US Health and Life Insurance Company. © US Health and Life Insurance Company. All rights reserved.

	Plan	Member Share Percentage (In-Net/Out-of-Net)	Member Deductible In-Net Single/Family	Coinsurance Maximum In-Net Single/Family	Copay Office Visit PCP/Specialist
Traditional	SafeGuard Pinnacle \$1000	100%/70%	\$1000/\$2000	N/A	\$20/\$40
	SafeGuard Pinnacle \$2000	100%/70%	\$2000/\$4000	N/A	\$20/\$40
	SafeGuard Pinnacle \$2750	100%/70%	\$2750/\$5500	N/A	\$20/\$40
	SafeGuard Pinnacle \$3500	100%/70%	\$3500/\$7000	N/A	\$20/\$40
	SafeGuard Pinnacle \$5000	100%/70%	\$5000/\$10000	N/A	\$20/\$40
	SafeGuard Peak \$500	80%/50%	\$500/\$1000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$1000	80%/50%	\$1000/\$2000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$2000	80%/50%	\$2000/\$4000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$2750	80%/50%	\$2750/\$5500	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$3500	80%/50%	\$3500/\$7000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$5000	80%/50%	\$5000/\$10000	\$1350/\$2700	\$30/\$60
	SafeGuard Zenith \$500	60%/50%	\$500/\$1000	\$2500/\$5000	\$20/\$40
	SafeGuard Zenith \$1000	60%/50%	\$1000/\$2000	\$2500/\$5000	\$20/\$40
	SafeGuard Zenith \$2000	60%/50%	\$2000/\$4000	\$2500/\$5000	\$20/\$40
	SafeGuard Zenith \$2750	60%/50%	\$2750/\$5500	\$2500/\$5000	\$20/\$40
SafeGuard Zenith \$3500	60%/50%	\$3500/\$7000	\$2500/\$5000	\$20/\$40	
SafeGuard Zenith \$5000	60%/50%	\$5000/\$10000	\$1350/\$2700	\$20/\$40	
High Deductible Health Plan	SafeGuard HDHP Pinnacle \$1500	100%/70%	\$1500/\$3000*	N/A	N/A
	SafeGuard HDHP Pinnacle \$2800	100%/70%	\$2800/\$5600	N/A	N/A
	SafeGuard HDHP Pinnacle \$4000	100%/70%	\$4000/\$8000	N/A	N/A
	SafeGuard HDHP Pinnacle \$5000	100%/70%	\$5000/\$10000	N/A	N/A
	SafeGuard HDHP Peak \$1500	80%/50%	\$1500/\$3000*	\$2500/\$5000	80% after deductible
	SafeGuard HDHP Peak \$2800	80%/50%	\$2800/\$5600	\$2400/\$4800	80% after deductible
	SafeGuard HDHP Peak \$4000	80%/50%	\$4000/\$8000	\$2350/\$4700	80% after deductible
	SafeGuard HDHP Peak \$5000	80%/50%	\$5000/\$10000	\$1350/\$2700	80% after deductible
Copay	SafeGuard Pinnacle Copay \$1000	100%/70%	\$1000/\$2000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$2000	100%/70%	\$2000/\$4000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$2750	100%/70%	\$2750/\$5500	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$3500	100%/70%	\$3500/\$7000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$5000	100%/70%	\$5000/\$10000	N/A	\$30/\$60
	SafeGuard Peak Copay \$500	80%/50%	\$500/\$1000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$1000	80%/50%	\$1000/\$2000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$2000	80%/50%	\$2000/\$4000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$2750	80%/50%	\$2750/\$5500	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$3500	80%/50%	\$3500/\$7000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$5000	80%/50%	\$5000/\$10000	\$1350/\$2700	\$30/\$60

Preventive Care

Preventive care services are generally covered with no cost-sharing and are not subject to copayments, deductibles or annual limits when received only from an in-network provider. For more information please refer to your official plan documents.

A complete list of preventive care services recommended under the U.S. Preventive Services Task Force (USPSTF) is available online at www.uspreventiveservicestaskforce.org/

Prescription Drug

Traditional and Copay Plans

Employer Selects Desired Rx Options
(Six packages available)

High Deductible Health Plans

Rx Coverage Embedded

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

*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.

Excess loss insurance policies and EPO/PPO insurance plans underwritten by US Health and Life Insurance Company. SafeGuard plans administered by US Health and Life Insurance Company. © US Health and Life Insurance Company. All rights reserved.

	Plan	Member Share Percentage (In-Net/Out-of-Net)	Member Deductible In-Net Single/Family	Coinsurance Maximum In-Net Single/Family	Copay Office Visit PCP/Specialist
Traditional	SafeGuard Pinnacle \$1000	100%/0%	\$1000/\$2000	N/A	\$20/\$40
	SafeGuard Pinnacle \$2000	100%/0%	\$2000/\$4000	N/A	\$20/\$40
	SafeGuard Pinnacle \$2750	100%/0%	\$2750/\$5500	N/A	\$20/\$40
	SafeGuard Pinnacle \$3500	100%/0%	\$3500/\$7000	N/A	\$20/\$40
	SafeGuard Pinnacle \$5000	100%/0%	\$5000/\$10000	N/A	\$20/\$40
	SafeGuard Peak \$500	80%/0%	\$500/\$1000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$1000	80%/0%	\$1000/\$2000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$2000	80%/0%	\$2000/\$4000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$2750	80%/0%	\$2750/\$5500	\$2500/\$5000	\$30/\$60
	SafeGuard Peak \$3500	80%/0%	\$3500/\$7000	\$2500/\$5000	\$30/\$60
SafeGuard Peak \$5000	80%/0%	\$5000/\$10000	\$1350/\$2700	\$30/\$60	
High Deductible Health Plan	SafeGuard HDHP Pinnacle \$1500	100%/0%	\$1500/\$3000*	N/A	N/A
	SafeGuard HDHP Pinnacle \$2800	100%/0%	\$2800/\$5600	N/A	N/A
	SafeGuard HDHP Pinnacle \$4000	100%/0%	\$4000/\$8000	N/A	N/A
	SafeGuard HDHP Pinnacle \$5000	100%/0%	\$5000/\$10000	N/A	N/A
	SafeGuard HDHP Peak \$1500	80%/0%	\$1500/\$3000*	\$2500/\$5000	80% after deductible
	SafeGuard HDHP Peak \$2800	80%/0%	\$2800/\$5600	\$2400/\$4800	80% after deductible
	SafeGuard HDHP Peak \$4000	80%/0%	\$4000/\$8000	\$2350/\$4700	80% after deductible
	SafeGuard HDHP Peak \$5000	80%/0%	\$5000/\$10000	\$1350/\$2700	80% after deductible
Copay	SafeGuard Pinnacle Copay \$1000	100%/0%	\$1000/\$2000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$2000	100%/0%	\$2000/\$4000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$2750	100%/0%	\$2750/\$5500	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$3500	100%/0%	\$3500/\$7000	N/A	\$30/\$60
	SafeGuard Pinnacle Copay \$5000	100%/0%	\$5000/\$10000	N/A	\$30/\$60
	SafeGuard Peak Copay \$500	80%/0%	\$500/\$1000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$1000	80%/0%	\$1000/\$2000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$2000	80%/0%	\$2000/\$4000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$2750	80%/0%	\$2750/\$5500	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$3500	80%/0%	\$3500/\$7000	\$2500/\$5000	\$30/\$60
	SafeGuard Peak Copay \$5000	80%/0%	\$5000/\$10000	\$1350/\$2700	\$30/\$60