

MARKETPLACE

REAL HEALTH INSURANCE

2019 West Virginia




CareSource[®]



GET REAL INSURANCE

There's a lot of noise around health insurance these days. It can be difficult to know what's true about your coverage and what really matters. But at CareSource, we've seen it all. We've been around since 1989, and we're currently providing health coverage to nearly 2 million members**. We've been helping Marketplace insurance shoppers in West Virginia since 2016 and we never quit. CareSource coverage is here when you need it.

SHOPPING FOR A PLAN?

Here are some basics you should know if you're shopping for an individual or family health insurance plan. Health Insurance Marketplace-qualified plans, like the ones CareSource offers, are the only plans that are guaranteed to provide all the Essential Health Benefits required by the Affordable Care Act. These benefits include:

Ambulatory patient services (*outpatient care you get without being admitted to a hospital*)

Emergency services

Hospitalization (*like surgery and overnight stays*)

Pregnancy, maternity, and newborn care (*both before and after birth*)

Mental health and substance use disorder services, including behavioral health treatment (*this includes counseling and psychotherapy*)

Prescription drugs

Rehabilitative and habilitative services and devices (*services and devices to help people with injuries, disabilities or chronic conditions gain or recover mental and physical skills*)

Laboratory services

Preventive and wellness services and chronic disease management

Pediatric services, including dental and vision care (*but adult dental and vision coverage aren't classified as essential health benefits*)

Birth control coverage

Breastfeeding coverage



Marketplace-qualified plans have no limits on pre-existing conditions and no lifetime coverage caps.!!

This is *real* health insurance. Individual and family health plans that aren't Marketplace-qualified may not provide coverage for all of these items, so to make sure you're getting coverage for all services, purchase a Marketplace-qualified health plan.

CareSource's Marketplace-qualified Dental & Vision plans cover more than the essential health benefits, including adult dental, adult vision and a fitness program with access to multiple fitness centers or home fitness kits.

OUR PLANS ARE COMPREHENSIVE

There are no lifetime maximums, no medical review to be eligible and we cover an extensive list of prescription drugs.

SILVER

CareSource has three different Silver plans to choose from so you can pick the plan that fits your budget – Low Premium, Low Deductible or balance premiums and deductibles with the Standard plan. These are the only plans[#] that offer CSRs in addition to premium tax credits. If you qualify for a CSR, the cost of most benefits listed below will be reduced. See our Benefits Guide for more detail.

Low Premium – lower monthly premium, higher cost of benefits

Low Deductible – higher monthly premium, lower cost of benefits

Standard – balanced approach to monthly premium and cost of benefits

| | SILVER LOW PREMIUM | SILVER STANDARD | SILVER LOW DEDUCTIBLE |
|--|--------------------|-----------------|-----------------------|
| Deductible | \$6,400 | \$5,700 | \$4,400 |
| Out-of-Pocket Maximum | \$7,900 | \$7,700 | \$7,500 |
| Coinsurance | 15%* | 20%* | 30%* |
| Primary Care or Retail Clinic Visit | \$25 | \$15 | \$10 |
| Specialist Visit | \$50 | \$40 | \$60 |
| Urgent Care Visit | \$75 | \$75 | \$75 |
| Emergency Room Visit | \$500* | \$500* | \$500* |
| Generic Prescription Drug Coverage (Retail/90-day Mail) † | \$20 / \$50 | \$15 / \$37.50 | \$10 / \$25 |

*After deductible.

In the chart above, amounts using a dollar sign (\$) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.

All services (except ER and Urgent Care) must be received by in-network providers in order for the cost shares listed to apply. All Silver levels are based upon eligibility for Cost Sharing Reductions as determined by the Health Insurance Marketplace at healthcare.gov.

BRONZE

Generally a good choice if you do not expect to have a lot of doctor appointments, don't need many prescription medications or need other health services. Plus, the Health Savings Account (HSA)-eligible plan provides a tax-free way to save for healthcare costs. It can be used in conjunction with an HSA from the bank of your choice.

| | BRONZE | BRONZE HSA- ELIGIBLE |
|--|-------------|----------------------------|
| Deductible | \$7,400 | \$5,200 |
| Out-of-Pocket Maximum | \$7,900 | \$6,650 |
| Coinsurance | 40%* | 50%* |
| Primary Care or Retail Clinic Visit | \$35 | 50%* |
| Specialist Visit | 40%* | 50%* |
| Urgent Care Visit | 40%* | 50%* |
| Emergency Room Visit | 40%* | 50%* |
| Generic Prescription Drug Coverage (Retail/90-day Mail) ‡ | \$30 / \$75 | 50%* / 50%* |

*After deductible.

In the chart above, amounts using a dollar sign (\$) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.

All services (except ER and Urgent Care) must be received by in-network providers in order for the cost shares listed to apply.



GOLD

This may be a good choice for you if you expect to have a lot of doctor appointments, need many prescription medications or need other health services. Gold plans have:

Higher premiums. You pay more each month for a Gold plan than you would for another metal level.

Lower out-of-pocket costs. With a Gold plan, the amount you pay each time you get a health service, such as seeing a doctor or filling a prescription, is less than what you'd pay if you have a traditional Bronze or Silver plan.

| CARESOURCE GOLD PLANS | COPAY (\$) OR COINSURANCE (%) |
|--|-------------------------------|
| Deductible | \$2,000 |
| Out-of-Pocket Maximum | \$6,500 |
| Coinsurance | 20%* |
| Primary Care or Retail Clinic Visit | \$0 |
| Specialist Visit | \$35 |
| Urgent Care Visit | \$75 |
| Emergency Room Visit | 20%* |
| Generic Prescription Drug Coverage (Retail/90-day Mail) † | \$10 / \$25 |

*After deductible.

In the chart above, amounts using a dollar sign (\$) refer to copays (except for Deductible, Out-of-Pocket Maximum). Amounts using a percentage (%) refer to coinsurance.

All services (except ER and Urgent Care) must be received by in-network providers in order for the cost shares listed to apply.



ENHANCED BENEFITS PACKAGE

Our Enhanced Benefits packages add Dental and Vision benefits to our Gold, Silver and Bronze[†] plans for adults over the age of 19. If you choose a Dental & Vision plan, you pay one premium for health, dental and vision coverage. Plus, CareSource Dental & Vision plans include the FREE Active&Fit[®] fitness program which gives you access to multiple fitness centers and gyms – without a long-term contract – or two home fitness kits every benefit year.

FIRST STEPS:

To make your application process as smooth as possible, you'll need to collect the following information for each family member you are enrolling:

Social Security number or document number for legal immigrants

Employer and income information, for example, wage and tax statements from pay stubs or W-2 forms

If currently covered by health insurance, the **policy number**

If eligible for employer health insurance coverage (even if the coverage is through another person like a spouse or parent), **information about the employer's health insurance plan**



HOW TO ENROLL:

Head to **enroll.CareSource.com** to find out if you qualify for CSRs or APTCs, shop and compare plans, and enroll in the plan that best fits your needs!

You can also visit **CareSource.com** to view current plan documents and see what medications are covered in our drug formulary.

Or find CareSource in-network doctors and hospitals at **<https://findadoctor.caresource.com>**.

QUESTIONS?

CALL US AT

1-844-539-1733

(TTY: 1-800-982-8771 or 711)



**Based on members enrolled in all CareSource product lines across all service areas as of August 15, 2018.

†Excluding HSA-Eligible plan.

‡Applicable only to drugs in the generic tier on the formulary.

#CSRs also applicable on Limited and Zero plans, available only to members of federally recognized tribes and ANCSA corporation shareholders.

|| Lifetime coverage limit applies to pediatric orthodontia.

The Active&Fit program is provided by American Specialty Health Fitness (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). All programs and services are not available in all areas.

At CareSource, your privacy matters to us. Learn more about our Privacy Practices at [CareSource.com](https://www.caresource.com).

This is a solicitation for health insurance. CareSource Marketplace plans have exclusions, limitations, reductions and terms under which the policy may be continued in force or discontinued. Premiums, deductibles, coinsurance and copays may vary based upon individual circumstances and plan selection. Benefits and costs vary based upon plan selection.

Not all plans and products offered by CareSource cover the same services and benefits. Covered services and benefits may vary for each plan. For costs and complete details of coverage, please review CareSource's 2019 Evidence of Coverages and Schedules of Benefits documents at [CareSource.com/marketplace](https://www.caresource.com/marketplace).

CareSource complies with applicable state and federal civil rights laws and does not discriminate on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status or public assistance status.

If you, or someone you're helping, have questions about CareSource, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-855-202-0622 (TTY: 1-800-982-8771 or 711).

Si usted o alguien a quien ayuda tienen preguntas sobre CareSource, tiene derecho a recibir esta información y ayuda en su propio idioma sin costo. Para hablar con un intérprete, llame al 1-855-202-0622 (TTY: 1-800-982-8771 or 711).

如果您或者您在帮助的人对 CareSource 存有疑问，您有权免费获得以您的语言提供的帮助和信息。如果您需要与一位翻译交谈，请致电 1-855-202-0622 (TTY: 1-800-982-8771 or 711)。

CareSource is a Qualified Health Plan issuer in the



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