



WBACC PPO Option 1

Deductible	\$200 Individual/\$600 Family
Out of Pocket Maximum	\$2,500 Individual/\$7,500
Coinsurance	80% Preferred/50% Participating
Copay	\$20
Rx	\$10/20/40, Mail Order - 90 Days \$20/40/80
Lifetime Maximum	\$2,000,000 / \$20,000 annual reinstatement

Benefits	Preferred Providers*	Participating/ Recognized Providers
Office Visits Deductible waived	100% after \$20 copay	50%
Preventive Care \$400 per calendar year, deductible waived	100% after \$20 copay	50%
Lab & X-Ray Subject to deductible	80%	50%
Hospital Services \$75 ER copay, waived if admitted	80%	50%
Maternity Not subject to preexisting condition waiting period	80%	50%
Skilled Nursing Facility 90 days per calendar year	Only Participating Providers currently available	80%
Ambulance Only Participating Providers currently available	80% Recognized Ambulance Providers Only	
Inpatient Rehab Services \$30,000 maximum per condition	80%	50%
Outpatient Rehab \$3,000 maximum per calendar year	80%	50%
Inpatient Mental Health 8 days per calendar year	80%	50%
Outpatient Mental Health 12 visits per calendar year	80%	50%
Chemical Dependency \$13,500 max every 2 years at an approved state facility	100% applicable copay will apply	50% applicable copay or coinsurance will apply
Spinal Manipulations 10 spinal manipulations per calendar year	80%	50%
Transplants 6 month waiting period, \$250,000 lifetime maximum, \$50,000 per transplant organ procurement, \$2,500 per transplant travel and lodging maximum	80%	50%
Smoking Cessation \$500 lifetime maximum	75%	75%

*To determine if a provider is "Preferred," refer to the Asuris Northwest Health provider directory or the website www.asurisnorthwesthealth.com. You may also call one of the WBACC Member Service Specialists at Asuris Northwest Health. This plan is underwritten by Asuris Northwest Health. This is a brief summary of benefits. For full coverage provisions, including a description of waiting periods, limitations and exclusions, refer to your benefits brochure.