



**Canton Regional Chamber Health Fund  
Heartland - 1500/100A - HSA Compatible  
Schedule of Health Insurance Benefits**

Medical Benefits	Network	Non-Network
<b>Calendar Year Deductible</b>		
Employee	\$1,500	\$4,500
Family	\$3,000	\$9,000
<b>Medical Plan Out-of-Pocket Maximum</b>		
Employee	\$1,500	\$9,000
Family	\$3,000	\$18,000
<b>Physician Office Visits and Telemedicine</b>		
Illness/Injury	100%	80% RBP
Psychotherapy Office	100%	80% RBP
<b>Prescription Drugs</b>	100%	
<b>Preventive Health Services</b>		
As defined by the Affordable Care Act. See www.healthcare.gov for additional information.	100%	50% RBP
<b>Maternity Care</b>	100%	80% RBP
<b>Inpatient Hospital Services</b>	100%	80% RBP
<b>Emergency Services</b>	100%	100% RBP
<b>Urgent Care</b>	100%	100% RBP
<b>Diagnostic Services (Labs, X-rays)</b>	100%	80% RBP
<b>Outpatient Therapy Services</b>	100%	80% RBP
<b>Other Services (Refer to Summary Plan Description)</b>	100%	80% RBP
<b>Ambulance</b>	100%	100% RBP
<b>Annual Plan Maximum</b>	UNLIMITED	UNLIMITED

**Deductible and Out-of-Pocket Maximum are Non-Integrated.** Therefore, Deductible and Out-of-Pocket amounts met for Network Providers **DO NOT** apply to Deductible and Out-of-Pocket amounts met for Non-Network Providers.

**Unembedded Deductible.** Family Deductibles are per family; there is no per-person Deductible. Therefore, if you have family coverage, one or more persons must satisfy the family Deductible amount.

**Appropriate Deductible must be satisfied before any benefit is paid except as noted.**

**Deductible is waived for Network Preventive Health Services.**

The Medical Plan Out-of-Pocket Maximum amount includes the Deductible.

Pre-Approval is recommended for all Inpatient admissions.

*Not all benefit descriptions and exclusions are included in this document. Complete benefit descriptions and exclusions are continued in the AultCare Insurance Company Medical Plan document which will govern.*

**Contact AultCare**  
www.aultcare.com  
330-363-6360  
1-800-344-8858

This information is intended to provide a summary of products offered by AultCare.



**Canton Regional Chamber Health Fund  
Heartland - 2500A - HSA Compatible  
Schedule of Health Insurance Benefits**

Medical Benefits	Network	Non-Network
<b>Calendar Year Deductible</b>		
Employee	\$2,500	\$7,500
Family	\$5,000	\$15,000
<b>Medical Plan Out-of-Pocket Maximum</b>		
Employee	\$2,500	\$15,000
Family	\$5,000	\$30,000
<b>Physician Office Visits and Telemedicine</b>		
Illness/Injury	100%	80% RBP
Psychotherapy Office	100%	80% RBP
<b>Prescription Drugs</b>	100%	
<b>Preventive Health Services</b>		
As defined by the Affordable Care Act. See <a href="http://www.healthcare.gov">www.healthcare.gov</a> for additional information.	100%	50% RBP
<b>Maternity Care</b>	100%	80% RBP
<b>Inpatient Hospital Services</b>	100%	80% RBP
<b>Emergency Services</b>	100%	100% RBP
<b>Urgent Care</b>	100%	100% RBP
<b>Diagnostic Services (Labs, X-rays)</b>	100%	80% RBP
<b>Outpatient Therapy Services</b>	100%	80% RBP
<b>Other Services (Refer to Summary Plan Description)</b>	100%	80% RBP
<b>Ambulance</b>	100%	100% RBP
<b>Annual Plan Maximum</b>	UNLIMITED	UNLIMITED

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