



CoOpportunity Premier

FOR INDIVIDUALS AND FAMILIES

Plan Options: Catastrophic, Bronze, Silver, Gold
Including Cost Sharing Reduction Plans

Qualified Health Plans for Individuals and Families in Nebraska
For coverage beginning on or after January 1, 2015

2015
PPO Plans



.....
IN NEBRASKA

New World. A New Kind of Health Insurance Company.

CoOpportunity Health is a new kind of health insurance company, a CO-OP — Consumer Operated and Oriented Plan — designed for the new world of health insurance created by the Affordable Care Act. CO-OPs like CoOpportunity Health were created to give consumers more choice by adding new competition to the marketplace. What sets us apart from other health insurance companies are some pretty key differences. Take a look.

We're not about the money

We're a nonprofit — people come first. Our sole focus is to benefit our members.



We're a CO-OP

We're health insurance you don't buy — you join. We're run by members, for members. Where every member has a voice and a vote.



We're nothing like the status quo

We're a new player for a new world. And we know what we're doing — built by seasoned pros working with expert business partners and providers to deliver affordable, quality care and a better healthcare experience.



We can't wait for you to call

As a CO-OP, we exist for one purpose — to serve our members. One "universal" number gets you to the answers, advice, education and support you need — when you need it.







CoOpportunity Premier Plan Features

CoOpportunity Premier is a great fit for individuals and families who need a balance between upfront benefits and affordability. The PPO plan design offers broad provider choice with cost savings for accessing care through in-network providers. CoOpportunity Premier features the Midlands Choice Premier provider network, which includes 100 percent of hospitals and 97 percent of practitioners in Nebraska.

Plan Levels

Premiums and out-of-pocket expenses aren't the only costs to consider when enrolling in a health plan. We offer four levels of health insurance plans that vary according to benefit design features. The chart below highlights each plan by the metal level. The higher the metal level, the more

financial protection you will receive. A Bronze plan, for example, has a lower premium and will cover approximately 60 percent of your healthcare costs. On the other hand, a Gold plan will have a higher premium but will cover approximately 80 percent of your healthcare costs.

	 Catastrophic*	 Bronze*	 Silver	 Gold
Monthly Premium	\$	\$\$	\$\$\$	\$\$\$\$
Your Out-of-Pocket Costs	\$\$\$\$\$	\$\$\$\$	\$\$\$	\$\$
Cool Features	<ul style="list-style-type: none"> • \$25 for first three primary care office visits (includes behavioral health outpatient visits) • Free preventive care • Rewards for healthy behaviors 	<ul style="list-style-type: none"> • \$25 for first three primary care office visits (includes behavioral health outpatient visits) • \$10 generics with no deductible; deductible must be met for all other services • Free preventive care • Rewards for healthy behaviors 	<ul style="list-style-type: none"> • First three office visits free • \$20 primary care and behavioral health outpatient office visits • \$10 generics • Free preventive care • Rewards for healthy behaviors 	<ul style="list-style-type: none"> • First three office visits free • \$20 primary care and behavioral health outpatient office visits • \$10 generics • Free preventive care • Rewards for healthy behaviors
Who Should Consider Buying This Plan	<ul style="list-style-type: none"> • Individuals under 30 years of age • Individuals who do not have chronic health problems and do not expect to use many healthcare services • Services are not covered at 100% until deductible and out-of-pocket maximum are met 	<ul style="list-style-type: none"> • Individuals who do not have chronic health problems and do not expect to use many healthcare services • Individuals who want coverage just in case something happens 	<ul style="list-style-type: none"> • Individuals who want predictable out-of-pocket costs • Individuals who want lower monthly premiums • Individuals who typically don't use a lot of medical services • Individuals who want first-dollar coverage for office visits before deductible is satisfied 	<ul style="list-style-type: none"> • Individuals who use more medical services • Individuals who are willing to pay higher premiums for lower out-of-pocket costs • Individuals who want predictable out-of-pocket costs • Individuals who want first-dollar coverage for office visits before deductible is satisfied

Understanding Your Provider Network

GO ONLINE TO FIND NETWORK PROVIDERS

It is easy to find a local or national provider.

- Go to coOpportunityhealthy.com/ProviderSearch
- Choose **CoOpportunity Premier** as your product; you'll be able to search for providers that participate in Midlands Choice Premier — your network for Nebraska, Iowa and bordering states
- Choose **National Providers** if you want to search for out-of-area providers
- Enter your search information



Importance of Using In-Network Providers

You'll enjoy greater value when using in-network providers:

- Lower out-of-pocket costs because your coinsurance, deductible and out-of-pocket maximum are less when using in-network providers
- Less paperwork because in-network providers file claims on your behalf and handle all notifications for you
- Savings because in-network providers agree to accept our payment for covered services and cannot balance bill you for the difference between the allowed amount and their charge



Away From Home Care

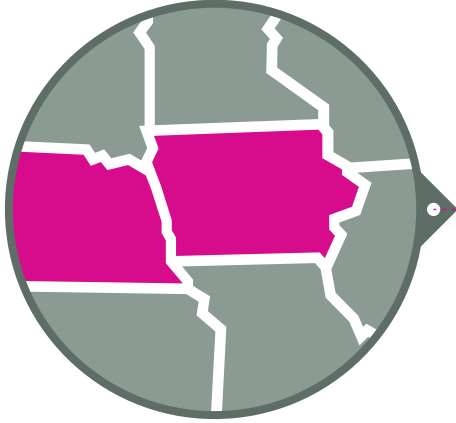
No need to worry about your health when traveling for work or while on vacation. Our seamless solution of national provider networks — the PHCS Network and the MultiPlan network — allow you to receive care from an in-network provider and receive all of the network savings.

PHCS Network

- Largest independent primary PPO network in the country with providers in all 50 states
- Includes more than 4,200 hospitals, 68,000 ancillary care facilities and 590,000 healthcare professionals

MultiPlan Network

- Nationwide network that complements the PHCS Network by giving access to an additional choice of providers at discounted rates
- Includes more than 4,600 hospitals, 93,000 ancillary care facilities and 620,000 providers



Your Local Provider Network

CoOpportunity Premier uses the Midlands Choice Premier network. This network includes providers in Nebraska and Iowa as well as bordering states, giving you a broad choice of in-network providers:

- 33,500 physicians and other healthcare professionals
- 339 hospitals
- 1,700 other healthcare facilities
- 100 percent of the hospitals and 97 percent of the clinicians in Nebraska and Iowa

TYPICAL EXAMPLES

Stay In-Network and Save

Using in-network providers is an easy way to save on your out-of-pocket costs. Look at the cost savings by staying in-network.

Primary Care Office Visit		
	In-Network	Out-of-Network
Office Visit Billed Charge	\$125	\$125
Allowed Amount (amount CoOpportunity Health uses to calculate payment)	\$80	\$80
Your Cost Share	\$20 copay	\$40 (based on 50% coinsurance off of \$80)
Amount CoOpportunity Health Pays	\$60	\$40
Amount That Can Be Balanced Billed to You	\$0	\$45
Your Total Out-of-Pocket Costs	\$20	\$85

Outpatient Surgery		
	In-Network	Out-of-Network
Surgery Billed Charge	\$2,000	\$2,000
Allowed Amount (amount CoOpportunity Health uses to calculate payment)	\$1,200	\$1,200
Your Cost Share After Deductible is Met	\$360 (based on 30% coinsurance off of \$1,200)	\$600 (based on 50% coinsurance of \$1,200)
Amount CoOpportunity Health Pays	\$840	\$600
Amount That Can Be Balanced Billed to You	\$0	\$800
Your Total Out-of-Pocket Costs	\$360	\$1,400

Hospital Stay		
	In-Network	Out-of Network
Hospital Billed Charge	\$20,000	\$20,000
Allowed Amount (amount CoOpportunity Health uses to calculate payment)	\$12,000	\$12,000
Your Cost Share	\$4,000 (\$4,000 deductible)	\$8,000 (\$8,000 deductible)
Amount CoOpportunity Health Pays	\$8,000	\$4,000
Amount That Can Be Balanced Billed to You	\$0	\$8,000
Your Total Out-of-Pocket Costs	\$4,000	\$16,000

Information provided in the charts is for illustrative purposes only. Actual benefits, coverage and costs will vary based on the plan.

Understanding Your Pharmacy Benefits

Prescription drug coverage is included in all CoOpportunity Premier plans. Our prescription drug coverage features a four-tier formulary called the CoOpportunity Health Drug List. The cost share you pay for each 31-day retail supply of your covered prescription drug depends on the tier or category in which your medication is listed. Search the drug list at coOpportunityhealth.com/DrugList.

TIER 1 — Formulary Generic Drugs	TIER 2 — Formulary Preferred Brand-Name Drugs	TIER 3 — Non-Preferred Drugs	TIER 4 — Specialty & High-Cost Drugs
\$10 copay	\$40 copay	\$80 copay	Coinsurance (varies by metal level)

Note: For Catastrophic and Bronze plans, prescription drug coverage is covered at 100 percent after you meet your \$6,600 deductible and out-of-pocket maximum, except for generic drugs in the Bronze plan.

Save by Using In-Network Pharmacies

MedImpact is the pharmacy benefits manager (PBM) for our prescription drug program. Here are some of the advantages of using one of the more than 65,000 retail pharmacies across the United States that contract with MedImpact:

- The pharmacist files the claim electronically for you; no paperwork is required
- The pharmacist can check for drug interactions for prescriptions filled at other network pharmacies and can see if prior authorization is needed or if there are quantity limits
- You pay the appropriate cost share based on your benefits when you pick up your prescription

Mail Order Saves Time and Money

The CoOpportunity Health mail order service is another easy way to save time and money for long-term maintenance drugs. Mail order allows you to receive a 93-day supply of medication for \$20 for Tier 1 generic drugs and \$80 for Tier 2 brand-name formulary drugs. Mail order is perfect for drugs you take on an ongoing basis such as cholesterol drugs or high blood pressure drugs. Tier 3 non-formulary drugs are available for a 93-day supply for a \$240 copayment.



Specialty Drugs for Complex Conditions

CVS Caremark Specialty Pharmacy is the CoOpportunity Health specialty drug vendor. Specialty drugs are high-cost drugs used to treat complex or rare conditions. Specialty drugs must be obtained through CVS Caremark Specialty Pharmacy and are limited to a 31-day supply per fill.

Save by Using Generics

Choosing generic drugs over brand-name drugs is one of the easiest ways to save on your out-of-pocket costs. If you choose a brand-name drug when a generic is available, you will have to pay the copayment and the difference in cost. Always ask your doctor or pharmacist if a generic drug is available and appropriate for your situation.

Rewards & Perks for Members



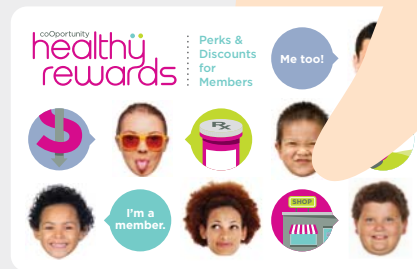
As a member of CoOpportunity Health, we want to support you in a lifetime of healthy living. All of our health plans include the CoOpportunity Healthy Rewards program. You'll get more information on how to participate when you become a member. Here's a sneak peek:



Rewards for Healthy Living

When you complete two simple steps, you'll receive a one-time \$100 Healthy Rewards gift card.*

- 1 Routine Preventive Physical Exam:** Make an appointment with your primary care physician and complete a physical exam. Building a relationship (a medical home) with a provider you trust and receiving appropriate preventive care are important in managing your overall health and well-being.
- 2 Complete Online Health Assessment:**** Sign up for access to the CoOpportunity Health secure Member website at coOpportunityhealth.com/Member. Once you're registered, log on and complete an online health assessment. Knowing your numbers like blood pressure, body mass index (BMI), and cholesterol (LDL and HDL) are helpful to complete the assessment. View your personalized report and gain access to information and programs available to you.



Discounts to Help You Save

Soon after you become a member, we'll send you a Healthy Rewards card that gives you access to discounts from popular retail and online services.

- Prescription savings program for drugs not covered through your health plan
- Vision services including eye exams, glasses and contacts
- LASIK eye surgery
- Hearing tests and supplies including name-brand hearing aids
- Diabetic supplies and drugs
- Laboratory services including blood tests
- Gym and fitness club memberships
- Weight-loss programs
- Lifestyle health coaching
- Exercise equipment and programs

Visit our website for more information about the program at coOpportunityhealth.com/HealthyRewards.

*Available to members at least 18 years old; limited to two members per contract per plan year; one card per member per year.

**Health Assessment available in Spanish by contacting Member Services.

Both program steps must be completed by December 31, 2015, to receive the \$100 Healthy Rewards gift card, regardless of effective date.

Our First Priority Is You

Personal Health Support. At Your Service.

Every CoOpportunity Health member has access to personal health support to ensure that you receive extra support when you need it. One toll-free number, 1.888.324.2064, puts you in touch with personalized services customized to fit your needs. Some of our members may simply need access to quick and knowledgeable help from our CareLineSM 24/7 nurses who can help with home treatment

advice, pregnancy or new baby questions or urgent healthcare questions. Other members may work long-term with a personal nurse to help with disease or condition management. Personal health support is one of the ways CoOpportunity Health is different — with important services to guide members through their healthcare and health insurance experience.

CareLineSM 24/7

Don't forget that **Registered Nurses** are available any time of the day, 365 days a year to answer questions about treatments, medicines, urgent healthcare, pregnancy and new babies, or any question you may have after business hours.

Healthy Pregnancy

Personal Nurse Support for at-risk moms who work with a personal nurse specially trained in high-risk pregnancies.

Behavioral Health Navigators

Behavioral Health Navigators offer support with finding a mental health or chemical dependency healthcare professional and can answer questions about coverage.



Disease Support

We offer **Personal Nurse Support** for members living with a chronic condition. Our nurses can help you follow your treatment plan, find balance in your life, build skills and knowledge about your condition, and work with your clinical care team.

Case Management

Case Managers are specially-trained individuals who help members with complex health issues like a catastrophic medical or mental health condition, or a major injury.

Treatment & Decision Support

Nurse Navigators are ready to help you with decision support and coordination-of-care questions for medical issues.

Pharmacy Navigators help anticipate, research and answer complex pharmacy questions.

Convenient Web and Mobile Account Access

Public Member Website

Be sure to check out coOpportunityhealth.com/Member, our public Member website, for helpful information on using benefits, plan resources, healthy living and other important information. The public Member website doesn't require you to log in, so you can check it out now and become more familiar with CoOpportunity Health.

Personalized Member Website

Registering for coOpportunityhealth.com Member website gives you access to personalized, real-time account information. Registration is easy and takes just a few minutes. Think of it as your dashboard that gives you access to these key features:

- Sign up for online Bill Pay
- Access Live Chat with Member Services
- Look up your medical and pharmacy benefits
- See claims including deductible details and other cost breakdowns
- Read and respond to secure email messages
- Search for network providers
- Save your personal providers to your home page
- Access health assessment
- Access your ID card and sign up for paperless online delivery of health plan documents

Resources on Your Mobile Phone

You're mobile, so are we. You can access popular online tools from your smartphone. Simply go to coOpportunityhealth.com from your smartphone browser. Bookmark to your phone's home page for easy return access.

- "Help Me Find" tools: Doctors and Hospitals, Pharmacies, Drug List
- Secure account tools
- View and use your virtual ID card
- Call CareLine 24/7 or Member Services
- Symptom Checker and Health A-Z Library

Connect With Us for Questions

Member Services

Access to a Member Services representative is just a phone call away. Call toll-free 1.888.324.2064 Monday through Friday, 7 a.m. to 6 p.m. (TTY at 1.888.850.4762.)

- Questions about your health plan benefits or claims
- Help with network access or pharmacy benefits
- Check detailed account information
- Or, speak with a representative via email or Live Chat

Understanding the New Health Insurance Marketplace

Shop for Insurance Online

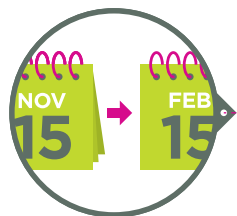
The Nebraska Health Insurance Marketplace (Exchange) is a new way to buy health insurance online. The Marketplace allows you to see the costs and benefits for various health plans so that you can easily compare options before enrolling and find the best coverage that fits your situation and your budget. You also can receive help paying for your insurance through the Marketplace.



How Do I Know If I Qualify for Assistance?

Follow these easy steps to find out if you can get help with costs:

- 1 Go to healthcare.gov to fill out an application to find out if you can receive help to pay for your insurance costs or if you qualify for other insurance programs such as Medicaid
- 2 After you register and submit your information, you'll find out if you'll receive help paying for your health insurance based on your income, family size and age
- 3 Any help paying for your health insurance is called a tax credit; if you receive a tax credit, you'll need to purchase your health insurance on the Nebraska Health Insurance Marketplace (Exchange)



How to Enroll

To receive the tax credit, you'll need to enroll on the Nebraska Health Insurance Marketplace.

If you do not qualify for a tax credit, there are four ways you can compare plans and enroll in our health insurance:

- 1 Directly from CoOpportunity Health — call our Individual Sales Hotline toll-free at 1.866.217.6111; we're open Monday through Friday from 8 a.m. to 6 p.m. CT
- 2 Or on our website at coOpportunityhealth.com
- 3 From your local broker or agent who is appointed with CoOpportunity Health
- 4 On the Nebraska Marketplace (Exchange)

Types of Enrollment

Single Coverage: Provides coverage to the policyholder only.

Family Coverage: Provides coverage to the policyholder and eligible family members.

When You Can Enroll

Open Enrollment Period






The annual open enrollment period for 2015 coverage is November 15, 2014 through February 15, 2015. January 1, 2015 is the earliest coverage will begin.

If your application is submitted by the 15th of the month, coverage will start the first day of the next month. If your application is submitted on or after the 16th of the month, coverage will start the first day of the following month. For example, an application submitted on January 15 will have a February 1 effective date. An application submitted on January 16 will have a March 1 effective date.

When open enrollment is closed (between February 16 and November 14), special enrollment periods apply if you or your dependents have a qualifying event. Check the CoOpportunity Premier Outline of Coverage for a detailed listing or visit our website at coOpportunityhealth.com.

Ready to Choose a Health Plan?

Thank you for considering CoOpportunity Health. Selecting the right insurance plan for you and your family can be a confusing process, particularly with all the new changes in products, tax credits and cost sharing, and ways to enroll. We stand ready to help you with advice, education and the support you need to make the right choice for you and your family.

SEVERAL WAYS TO GET ENROLLED				
If you are working with an agent or broker		If you are shopping and enrolling on your own		
				
Get personalized assistance from your trusted adviser. Or call 1.866.217.6111 to find an agent appointed with us.	Go to coOpportunity health.com where you can rank what's important to you, compare plans, and enroll online.	Find us on the Nebraska Health Insurance Marketplace (Exchange) where you can shop for insurance and enroll in plans. Go to healthcare.gov and follow the steps.	Call our Individual Sales Hotline toll-free at 1.866.217.6111 , Mon.-Fri., 8 a.m. to 6 p.m., Central. Our enrollment specialists can help you with healthcare reform questions and help you complete your application.	Individual enrollment specialists are available to help you at sales@coOpportunity health.com .



CoOpportunity Premier Plan Comparison Chart

Out-of-Pocket Costs for CoOpportunity Premier Qualified Health Plans Available on the Nebraska Health Insurance Marketplace (Exchange) and Off-Exchange

Plan Benefits	Catastrophic*		Bronze*		Silver		Gold	
Deductible (Individual/Family)	\$6,600/\$13,200		\$6,600/\$13,200		\$4,000/\$8,000		\$1,600/\$3,200	
Coinsurance	0%		0%		30%		20%	
Out-of-Pocket Max (Individual/Family)	\$6,600/\$13,200		\$6,600/\$13,200		\$6,600/\$13,200		\$3,200/\$6,400	
Medical Benefits	✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies	
Preventive Care/Screenings/Immunizations	\$0		\$0		\$0		\$0	
First Three Office Visits Free (Includes Primary Care, Specialists & Outpatient Behavioral Health)	No		No		Yes		Yes	
Primary Care Visits	\$25 for first 3 visits; then deductible applies	✔	\$25 for first 3 visits; then deductible applies	✔	\$20		\$20	
Specialist Visits	\$0	✔	\$0	✔	\$40		\$40	
Behavioral Health (Inpatient)	\$0	✔	\$0	✔	30%	✔	20%	✔
Behavioral Health (Outpatient)	\$25 for first 3 visits; then deductible applies	✔	\$25 for first 3 visits; then deductible applies	✔	\$20		\$20	
Habilitative & Rehabilitative Services (Physical Therapy, Occupational Therapy, Speech Therapy)	\$0	✔	\$0	✔	\$20 (Primary Care) \$40 (Specialist)		\$20 (Primary Care) \$40 (Specialist)	
Laboratory Services (Outpatient)	\$0	✔	\$0	✔	30%	✔	20%	✔
X-Ray/Diagnostic Imaging	\$0	✔	\$0	✔	30%	✔	20%	✔
High-Tech Imaging (MRI/CT/PET)	\$0	✔	\$0	✔	30%	✔	20%	✔
Emergency Room Services (Waived If Admitted)	\$0	✔	\$0	✔	\$250 plus coinsurance	✔	\$250 plus coinsurance	✔
Home Health Care	\$0	✔	\$0	✔	30%	✔	20%	✔
Inpatient Admission	\$0	✔	\$0	✔	30%	✔	20%	✔
Outpatient Services	\$0	✔	\$0	✔	30%	✔	20%	✔
Skilled Nursing Care	\$0	✔	\$0	✔	30%	✔	20%	✔
Hospice	\$0	✔	\$0	✔	30%	✔	20%	✔
Durable Medical Equipment	\$0	✔	\$0	✔	30%	✔	20%	✔
Temporomandibular Disorders (TMD) (Inpatient & Outpatient)	\$2,500 Benefit Period Maximum	✔	\$2,500 Benefit Period Maximum	✔	\$2,500 Benefit Period Maximum	✔	\$2,500 Benefit Period Maximum	✔
Prescription Drug Benefits	✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies	
Preferred Generic Drugs	\$0	✔	\$10		\$10		\$10	
Preferred Brand Drugs	\$0	✔	\$0	✔	\$40		\$40	
Non-Preferred Generic & Brand Drugs	\$0	✔	\$0	✔	\$80		\$80	
Specialty & High-Cost Drugs	\$0	✔	\$0	✔	30%		20%	
Routine Pediatric Vision Services	✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies		✔ = Deductible Applies	
Eye Exam	\$0		\$0		\$0		\$0	
Prescription Glasses & Frames (Limit One Pair Per Year)	\$0	✔	\$0	✔	30%	✔	20%	✔
Out-of-Network Benefits								
Deductible (Individual/Family)	\$13,200/\$26,400		\$13,200/\$26,400		\$8,000/\$16,000		\$3,200/\$6,400	
Coinsurance	0%		0%		50%		40%	
Out-of-Pocket Max (Individual/Family)	\$13,200/\$26,400		\$13,200/\$26,400		\$16,000/\$32,000		\$6,400/\$12,800	

CoOpportunity Premier plans do not include pediatric dental services. This coverage is available on the Nebraska Health Insurance Marketplace and can be purchased as stand-alone coverage.

*For Catastrophic and Bronze plans, services are covered at 100% after you meet the \$6,600 individual or \$13,200 family deductible and out-of-pocket maximum. The family deductible and out-of-pocket maximum can be met through any combination of family members.

Deductibles, copays and coinsurance apply toward the out-of-pocket maximum.

CoOpportunity Premier Plan Comparison Chart

Out-of-Pocket Costs for CoOpportunity Premier Cost Sharing Reduction Qualified Health Plans Available ONLY Through the Nebraska Health Insurance Marketplace (Exchange)

CoOpportunity Premier benefit designs displayed below are available for enrollment ONLY through the Nebraska Health Insurance Marketplace. You must meet income requirements in order to enroll in these plans.

	Available only on Nebraska Health Insurance Marketplace					
Plan Benefits	Silver CSR94		Silver CSR87		Silver CSR73	
Deductible (Individual/Family)	\$275/\$550		\$750/\$1,500		\$2,500/\$5,000	
Coinsurance	30%		30%		30%	
Out-of-Pocket Max (Individual/Family)	\$550/\$1,100		\$1,500/\$3,000		\$5,000/\$10,000	
Medical Benefits	✓ = Deductible Applies		✓ = Deductible Applies		✓ = Deductible Applies	
Preventive Care/Screenings/Immunizations	\$0		\$0		\$0	
First Three Office Visits Free (Includes Primary Care, Specialists & Outpatient Behavioral Health)	Yes		Yes		Yes	
Primary Care Visits	\$20		\$20		\$20	
Specialist Visits	\$40		\$40		\$40	
Behavioral Health (Inpatient)	30%	✓	30%	✓	30%	✓
Behavioral Health (Outpatient)	\$20		\$20		\$20	
Habilitative & Rehabilitative Services (Physical Therapy, Occupational Therapy, Speech Therapy)	\$20 (Primary Care) \$40 (Specialist)		\$20 (Primary Care) \$40 (Specialist)		\$20 (Primary Care) \$40 (Specialist)	
Laboratory Services (Outpatient)	30%	✓	30%	✓	30%	✓
X-Ray/Diagnostic Imaging	30%	✓	30%	✓	30%	✓
High-Tech Imaging (MRI/CT/PET)	30%	✓	30%	✓	30%	✓
Emergency Room Services (Waived If Admitted)	\$250 plus coinsurance	✓	\$250 plus coinsurance	✓	\$250 plus coinsurance	✓
Home Health Care	30%	✓	30%	✓	30%	✓
Inpatient Admission	30%	✓	30%	✓	30%	✓
Outpatient Services	30%	✓	30%	✓	30%	✓
Skilled Nursing Care	30%	✓	30%	✓	30%	✓
Hospice	30%	✓	30%	✓	30%	✓
Durable Medical Equipment	30%	✓	30%	✓	30%	✓
Temporomandibular Disorders (TMD) (Inpatient & Outpatient)	\$2,500 Benefit Period Maximum	✓	\$2,500 Benefit Period Maximum	✓	\$2,500 Benefit Period Maximum	✓
Prescription Drug Benefits	✓ = Deductible Applies		✓ = Deductible Applies		✓ = Deductible Applies	
Preferred Generic Drugs	\$10		\$10		\$10	
Preferred Brand Drugs	\$40		\$40		\$40	
Non-Preferred Generic & Brand Drugs	\$80		\$80		\$80	
Specialty & High-Cost Drugs	30%		30%		30%	
Routine Pediatric Vision Services	✓ = Deductible Applies		✓ = Deductible Applies		✓ = Deductible Applies	
Eye Exam	\$0		\$0		\$0	
Prescription Glasses & Frames (Limit One Pair Per Year)	30%	✓	30%	✓	30%	✓
Out-of-Network Benefits						
Deductible (Individual/Family)	\$550/\$1,100		\$1,500/\$3,000		\$5,000/\$10,000	
Coinsurance	50%		50%		50%	
Out-of-Pocket Max (Individual/Family)	\$1,100/\$2,200		\$3,000/\$6,000		\$10,000/\$20,000	

The family deductible and out-of-pocket maximum can be met through any combination of family members. Deductibles, copays and coinsurance apply toward the out-of-pocket maximum.

For individuals and families of American Indian or Alaska Native ethnicity

If you are a member of a federally recognized Indian tribe or Alaska Native tribal entity, you qualify to enroll in unique, low cost health insurance products that are only available to American Indians or Alaska Natives. CoOpportunity Health offers these special plans on the Health Insurance Marketplace (Exchange). Please go to the Nebraska Health Insurance Marketplace at healthcare.gov to enroll.

Benefits Loaded With Value

Many people think health insurance is to protect them when they are sick. At CoOpportunity Health, we believe health insurance should also help you stay healthy. That's why our plans have a strong foundation of preventive care and primary care with rewards for healthy behaviors. When you choose a CoOpportunity Health plan, you receive immediate value from your health insurance.

No-Cost Benefits Ready for You Day One

You have 100 percent coverage for preventive care services. There's no cost-sharing and your deductible doesn't apply as long as you use in-network providers, including:*

- Routine exams and periodic health assessments
- Appropriate immunizations for men, women and children
- Routine screening for colorectal, breast and cervical cancer
- Routine prenatal and postnatal services, exams, screenings, tests and counseling
- Routine and appropriate screenings for adults and children
- Routine eye and hearing exams for children
- Obesity screening and nutrition counseling for adults and children
- Screenings and cessation interventions for tobacco users



*A detailed listing of ACA-required preventive services provided at no cost-share for adults, women and children is available at coOpportunityhealth.com/PreventiveCare.

Cool Features of CoOpportunity Premier

- Silver and Gold plans include Three-for-Free, first three office visits free with primary, specialty or behavioral health clinicians
- Low \$10 copay for generics
- Rewards for getting a routine preventive exam and taking an online survey about your health
- Perks like discounts to popular retail and online services including fitness clubs



Important Information About CoOpportunity Health Individual Plans

Summary of Health Management Programs

CoOpportunity Health case and utilization management programs help ensure effective, accessible and high quality healthcare. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of healthcare services using best practice guidelines. These programs include:

- Inpatient care coordination to support timely care and ensure a safe and timely transition from the hospital
- Complex case management to provide care coordination
- The CareCheck® program to coordinate out-of-network hospitalizations and certain services

Prior Approvals

We require prior approval for a small number of services and procedures. For a complete list, go to coOpportunityhealth.com/MedicalPolicies or call Member Services toll-free at 1.888.324.2064.

Out-of-Network Services

You must call CareCheck® at 1.800.316.9807 to receive maximum benefits when using out-of-network providers for inpatient hospital stays: same-day surgery; new or experimental or reconstructive outpatient technologies or procedures: durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. We will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. Benefits will be reduced by 20 percent if CareCheck® is not notified.

Protecting Your Privacy and Personal Health Information

CoOpportunity Health complies with federal and state laws regarding the confidentiality of medical records and personal information about our members. Our policies and procedures help ensure that the collection, use and disclosure of information complies with the law. When needed, we get consent and authorization from our members (or an approved member representative when the member is unable to give consent or authorization) for release of personal information. We give members

access to their own information consistent with applicable laws and standards. Our policies and practices support appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, while being sensitive to privacy. For a copy of our Notice of Privacy Practices, please visit coOpportunityhealth.com or call Member Services toll-free at 1.888.324.2064.

Understanding Plan Coverage Details

Before choosing a health plan, please review the coverage details outlined in these important documents — provided for your consideration at the time of enrollment. You may access these documents at coOpportunityhealth.com, view on the Nebraska Health Insurance Marketplace (Exchange), request from your agent or broker or call our enrollment hotline at 1.866.217.6111.

- CoOpportunity Premier Outline of Coverage
- Summary of Benefits Coverage (SBC)

When you become an enrolled member with CoOpportunity Health, you will receive an ID card and information about how to access your Individual Policy and Benefits Chart. These are important contract documents that provide greater detail about coverage, limitations, exclusions, notification requirements and other information to assist you in accessing your health insurance benefits.

We Can't Wait for You to Call

We want you to be happy with your health plan. Serving our members is our number one priority! In fact, it's what sets us apart from other insurance companies. Because we are a CO-OP, we exist only to serve our member-owners.

Member Services is available to help you with benefits questions and services from 7 a.m. to 6 p.m. CT, Monday through Friday. Call toll-free at 1.888.324.2064.

Live Chat is available when you are registered for our secure Member website, 8 a.m. to 5 p.m. CT, Monday through Friday.

CareLine 24/7 services are available to help you anytime of the day, 365 days a year, at 1.888.324.2064. Call with questions about treatments, medicines, urgent healthcare advice, pregnancy and new baby questions or just about any kind of question you may have after business hours.

For costs and further details of the coverage, including exclusions, any reduction or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. This is a solicitation for business and a response to this brochure will generate communication by a licensed producer.



For more information: coOpportunityhealth.com

Individual Sales Hotline: 1.866.217.6111

Email: sales@coOpportunityhealth.com

Connect with us    

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CoOpportunity Health is a Qualified Health Plan issuer in the Nebraska Health Insurance Marketplace. CoOpportunity Health does not discriminate on the basis of age, color, creed, disability, gender identity, health status, national origin, race, religion, sex or sexual orientation in the administration of its products and plans, including enrollment and benefit determinations. CoOpportunity Health has contracted with HealthPartners Administrators, Inc. to provide claims processing, medical management and certain other administrative services.