

# AvMed HSA-Qualified

**AvMED**  
INDIVIDUAL HEALTH

The AvMed HSA-Qualified Plan is a high-deductible health plan (HDHP) that can be paired with a Health Savings Account (HSA)<sup>1</sup>. An HSA is a tax-free account that you can use as a long-term savings fund for health care expenses. The AvMed HSA-Qualified Plan puts you in control. Use AvMed's easy Online Consumer Tools to make informed and cost-conscious health care decisions.

## Features:

- In- and out-of-network benefits
- Access to a broad network of doctors and hospitals in Florida
- Emergency worldwide coverage
- No referral to see a specialist
- 100% after deductible plans available
- No charge or waiting period for preventive benefits
- Prescription drug coverage available



## The AvMed and HealthEquity Health Savings Account Advantage

The AvMed Consumer HSA is our completely integrated approach to managing your medical and financial transactions. The HSA account is offered through our partnership with HealthEquity<sup>2</sup>, a leader in HSA administration.

## Features:

- Triple tax-advantaged HSA account
  - Tax-Free Contributions
  - Tax-Free Growth
  - Tax-Free Disbursement
- No fees for account set-up, monthly maintenance or investment transactions
- Quick and easy access to HSA funds
- Flexible and convenient contribution process that allows contributions to your FDIC-insured HSA via check or direct deposit
- HSA Visa<sup>®</sup> debit cards and easy online payment tool
- Access to live 24/7 HealthEquity consultants
- Investment options in mutual funds are available once account balance reaches \$2,000
- Simplified record keeping for medical expenses with monthly statements and tax reporting

1. Subject to IRS regulation

2. [www.healthequity.com](http://www.healthequity.com)

This is only a partial description of the many benefits and services provided or authorized by AvMed Individual Health, the brand name used by AvMed, Inc. These products are medically underwritten and have exclusions and limitations. The amount of benefits provided depends upon the plan selected and premiums will vary. For Individuals age 19 and over, a 12/24-month preexisting condition limitation applies to all services. AvMed Individual Health is offered only in Miami-Dade, Broward and Palm Beach counties. Members must live in either of these counties at least six months out of the year in order to qualify. All plans will be administered in accordance with the requirements of Health Care Reform.

# AvMed HSA-Qualified

## AvMed HSA-Qualified 2,500/5,000

	In-Network	Out-of-Network
<b>Calendar Year Deductible (CYD)</b>		
Single	\$2,500/\$5,000	\$5,000/\$10,000
Family <sup>2</sup>	\$5,000/\$10,000	\$10,000/\$20,000
<b>Out-of-Pocket Max</b> (includes deductible and co-insurance)		
Single	\$5,000	\$10,000/\$15,000
Family <sup>2</sup>	\$10,000	\$20,000/\$30,000
Co-insurance <sup>1</sup>	20%/0%	40%/20%
<b>Office Services</b>		
Primary Care Physician	CYD and co-insurance	CYD and co-insurance
Specialist	CYD and co-insurance	CYD and co-insurance
<b>Emergency Medical Care</b>		
Urgent Care Centers	CYD and co-insurance	Same as in-network
Emergency Room	CYD and co-insurance	Same as in-network
Prescription Drug Rider	Included at the in-network benefit level	
<b>Preventive Care</b>		
Routine Adult Exams & Immunizations	No charge	\$70 PCP/ \$100 SPC
Well Woman Exam	No charge	\$70 PCP/ \$100 SPC
Mammograms	No charge	\$70 PCP/ \$100 SPC
Well Child	No charge	\$70 PCP/ \$100 SPC
<b>Outpatient Diagnostic Services</b>		
Outpatient Radiology		
Complex	CYD and co-insurance	CYD and co-insurance
Other	CYD and co-insurance	CYD and co-insurance
Outpatient Pathology	CYD and co-insurance	CYD and co-insurance

1. 0% co-insurance in-network and 20% after deductible out-of-network applies only to \$5,000 deductible plan

2. The Family Deductible and Out-of-Pocket Maximum are non-embedded, meaning no individual in the family has satisfied the Deductible or Out-of-Pocket Maximum until the entire family amount has been satisfied.