

*my*  
**Vantage**  
*high deductible plan*  
*Individual Health Insurance*

*Making healthcare work!*



**VANTAGE HEALTH PLAN, INC.**  
*Making Healthcare Work!*



## Great Service since 1994

Vantage Health Plan, Inc. was established in 1994 by physicians to lower the cost of healthcare in Louisiana. Vantage is a Louisiana health plan with its corporate office in downtown Monroe, LA. Our goal is to make quality healthcare accessible to our members and keep them healthy through preventive care. Care is provided by local healthcare professionals that you know and trust as well as several Centers of Excellence, such as:

- M.D. Anderson Cancer Center
- University of Alabama at Birmingham
- Louisiana State University Medical Center - Shreveport
- St. Jude Children's Research Hospital
- Arkansas Children's Hospital
- Children's Hospital in New Orleans

Vantage has been providing affordable quality health insurance to Louisiana for over a decade. We're proud of our Louisiana history and Louisiana connection, and we are always working to serve you better.

## Individual Health Insurance

Knowing how important quality healthcare coverage is, Vantage has designed health plans for individuals, families, self-employed entrepreneurs, students, early retirees and the uninsured. These plans offer a cost-effective approach to healthcare when you use our participating provider network. The Vantage network offers you convenient access to over 2,500 primary care and specialty care physicians. You can avoid paperwork because our network providers have agreed to bill us directly and not you, the member. Our members are always welcome to visit our office during business hours to learn more about their benefits or seek assistance with their health plan.

## My High Deductible Plan

My High Deductible Plan is a qualified health plan that works with a health savings account.

## Health Savings Account (HSA)

A health savings account, usually referred to as an HSA, is a personal tax-deferred savings account to which contributions are made to cover medical expenses. To participate in the HSA, individuals must be covered by a qualified high deductible health plan and open a health savings account with a financial institution. They may then deposit a percentage of their deductible into their HSA on a tax-deferred basis. Money in an HSA can be used to pay for medical care and, with tax and penalty, may also be withdrawn for non-medical expenses. Check with your tax advisors about eligibility and potential tax savings.

## Preventative/Wellness Benefits

(Does not apply toward the deductible.)

- Annual Routine Physical Exams
- Routine Eye Exams (1 every 2 benefit periods)
- Immunizations
- Annual Pap Test
- Prostate Screening
- Colorectal/Colonoscopy Screening
- Mammography Screening
- Bone Density Screening

## Additional Benefits

- Occupational & Speech Therapy
- Home Health Care
- Accidental Dental
- Rehabilitation
- Allergy Services
- Physical Therapy
- Nutritional Counseling
- Mental Health & Chemical Dependency
- Emergency Coverage Worldwide

# My High Deductible Plan\*



Single Deductible	\$1,500	\$2,500	\$5,500
Family Deductible	\$3,000	\$5,000	\$11,000
In-Network Co-insurance	20%	20%	0% †
Out-of-Network Co-insurance	40%	40%	40%
In-Network Out-of-Pocket Max (single)	\$5,500	\$5,500	\$5,500
In-Network Out-of-Pocket Max (family)	\$11,000	\$11,000	\$11,000
Out-of-Network Out-of-Pocket Max (single and family)	No Maximum (out-of-network services do not apply to the out-of-pocket maximum)		
Maternity	Not Covered		
Lifetime Max	\$5,000,000		
Supplementary Benefits (In-Network only)	Deductible then 40% Co-insurance		

## My Rx Plan\*\*

Prescription Drug Copays (after deductible)	\$15 Generic \$40 Preferred Brand \$75 Non-preferred Brand 25% Coinsurance for Specialty Drugs
Mail-Order Prescription Drug Copays	Generic: \$30 for 90-day supply Non-generic: 3 copays for 90-day supply

\* These are the benefits for the High Deductible Plan with prescription drug coverage. Prescription drugs and medical services share a combined deductible and a combined In-Network Out-of-Pocket maximum.

\*\* This prescription plan covers drugs when a network pharmacy fills the prescription. Prescription drug benefits apply after the deductible has been satisfied.

† Certain benefits such as in-network routine eye exams, immunizations, colorectal/colonoscopy screening and annual routine physical exams are paid at 80% of the Vantage Allowable, even if the deductible has not been met. Refer to the Member Certificate of Coverage for complete plan details.

## Plan Exclusions

- Weight loss or treatment for obesity
- Treatment of eating disorders
- Fertility or impotence drugs
- Dental services
- Services not medically necessary
- Cosmetic services, supplies, and surgery
- Cases covered under workers' compensation and employer liability laws
- Any condition or diseases listed as a general exclusion in the Member Certificate of Coverage

(This document contains a general summary of benefits, exclusions, and limitations. Please refer to the Member Certificate of Coverage for the actual terms and conditions that apply.)



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