



KERN LEGACY

Max Choice

ANTHEM NETWORK HEALTH PLAN

Out-of-Pocket Maximum

What is an Out-of-Pocket Maximum?

A set dollar amount deemed as the most that you'll have to pay out-of-pocket during a plan year. It serves as a reassurance that regardless of the out-of-pocket expenses for you in one Plan year, you will never owe more than the set out-of-pocket maximum. Knowing this can help you in budgeting for your healthcare needs.

How is it calculated?

Each time the Plan deems a covered expense your responsibility to pay, these expenses are being applied toward the Out-of-Pocket Max accumulator. Once you accumulate your designated out-of-pocket maximum amount, the Plan will begin to cover benefits without any additional member out-of-pocket costs.

What does this mean?

After the out-of-pocket is met, you will not be responsible for any copays or coinsurances for the remainder of the plan year (January 1 - December).

Annual Out-of-Pocket Max:

Medical: \$5,000 per Individual | \$10,000 per Family

Member copays and coinsurances for covered services and supplies will be applied to the Medical Out-of-Pocket Max.

Pharmacy: \$1,000 per Individual | \$3,000 per Family

Member copays for drugs covered under the Pharmacy Benefit will be applied to the Pharmacy Out-of-Pocket Max.

Expenses paid toward the health plan premiums and non-covered services will not be applied toward an out-of-pocket max.