

DC37 MED-TEAM

This program is offered to DC37 Med-Team active members living in New York and New Jersey. The DC37 Med-Team plan gives you the freedom to choose in-network or out-of-network doctors. You can see any network doctor without a referral. In most cases, when you see a network doctor, your cost will just be a copay.

Key Plan Features

DC37 Med-Team offers great coverage everyone can afford. You get:

- Coverage for in-network and out-of-network services
- No payroll deduction
- No required primary care physician (PCP)
- Low copays for in-network services
- No referrals for in-network doctors
- Broad vision benefits

Plus, your coverage includes EmblemHealth Preferred Dental, which features more than 8,000 participating dental practitioners in New York and New Jersey. You are covered in-network for preventive and basic services at a \$2,500 annual maximum; and out-of-network benefits are available with a 20 percent coinsurance and a small deductible for preventive and basic services.

Also included is coverage for oral surgery, endodontics, anesthesia, major restorative services, and fixed and removable prosthodontics.

The DC37 Med-Team Program will enhance coverage to provide for in-network preventative services (such as those listed below):

- Routine physicals
- Immunizations
- Colonoscopies
- Mammograms
- Birth control prescriptions and other preventative prescriptions as listed on emblemhealth.com

Provider Coverage: In and Out of Network

No matter where you live or work, it's a short trip to a DC37 Med-Team network doctor. You can get care from many of the region's leading doctors, clinicians and facilities, including hospitals and urgent care centers. With the DC37 Med-Team plan, you never need a referral to see network doctors. You can also use the QualCare network in New Jersey.

Besides our network, you can get covered care from any doctor you choose, offering you the widest possible choice. Covered services from out-of-network doctors do, however, have deductibles and coinsurance. Also note that some services may require prior approval. The best way to make use of DC37 Med-Team and save on your out-of-pocket costs is to see a doctor within the network. Your out-of-pocket costs are lowest — in most cases, just a copay — when you see network doctors.

Have you considered an AdvantageCare Physicians (ACPNY) doctor?

Call your ACPNY Gold Service Line at **1-646-680-3000** for more information.

Maximum Out-of-Pocket (MOOP) — MOOP refers to the maximum amount of in-network cost-sharing expenses that you will pay in each calendar year (or in 2016, in the period from July 1 through December 31, 2016) for covered services/essential health benefits received from Participating Providers under this plan. MOOP includes deductibles, coinsurance and copay charge amounts that you must pay for covered in-network services and any applicable riders in a calendar year (or in 2016, in the period from July 1 through December 31, 2016). Cost-sharing amounts attributable to services received from Non-Participating Providers generally do not count toward MOOP. Amounts incurred for non-covered services and other non-covered expenses, such as amounts in excess of plan allowances as well as any financial penalties do not count toward MOOP. Premiums and/or premium contributions also do not count toward MOOP. The MOOP amount may change from calendar year to calendar year*.

For July 1, 2016 – December 31, 2016

| | Individual MOOP | Family MOOP |
|------|------------------------|--------------------|
| MOOP | \$3,425 | \$6,850 |

*For calendar years beginning January 1, 2017 – December 31, 2017
(Subject to indexing by the federal government)

| | Individual MOOP | Family MOOP |
|------|------------------------|--------------------|
| MOOP | \$7,150 | \$14,300 |

| Benefits Summary: DC37 Med-Team | | |
|--|---|--|
| Medical Care | Your In-Network Cost | Your Out-of-Network Cost |
| PCP office visit | \$25 copay | Reimbursement subject to out-of-network deductible. Coinsurance maximum noted below. |
| Diagnostic lab/X-ray | \$25 copay | |
| High-tech radiology | \$50 copay | |
| Routine physical exam | \$0 copay | |
| Well child care | \$0 copay | |
| Outpatient mental health | \$25 copay | |
| Urgent care | \$50 copay | |
| Ambulatory surgery | \$50 copay | |
| Ambulance | Reimbursement at 100% of the allowed charge | |
| Inpatient hospital care | \$0 copay | |
| Emergency room | \$150 copay (waived if admitted) | \$150 copay (waived if admitted) |
| Cost Sharing | In-Network | Out-of-Network |
| Annual deductible | \$0 | \$1,000 individual/\$3,000 family |
| Annual coinsurance | \$0 | 30% to \$2,700 individual/6,750 family |
| Out-of-network annual maximum | Not applicable | Unlimited |
| Out-of-network lifetime maximum | Not applicable | Unlimited |

Medicare-Eligible Retirees

DC37 MED-TEAM

If you are a Medicare-eligible retiree, you have the option of enrolling in the DC37 Med-Team Senior Care program, a Medicare Supplement program. Under this plan, DC37 Med-Team supplements Medicare for the following services:

- Office visits
- In-home nursing services
- In-hospital medical care
- Inpatient hospital stays
- Laboratory tests
- Outpatient hospital services
- Radiation therapy
- Specialist consultations
- Speech therapy
- Surgery and anesthesia
- X-ray examinations

Customer Service — DC37 Med-Team

emblemhealth.com/city

Information line for prospective members:

1-800-447-6929, Monday to Friday, 8 am to 6 pm (closed weekends.) If you have a hearing or speech impairment and use a TDD, call 711.

Customer Service for existing members:

1-800-447-8255, Monday to Friday, 8 am to 6 pm (closed weekends.) If you have a hearing or speech impairment and use a TDD, call 711.

Choosing DC37 Med-Team

Customer Service representatives are available to answer any questions about DC37 Med-Team in your language. Call us to find out if DC37 Med-Team is the right health plan for you.

Are you happy with your current doctors, but want to switch your plan? Your doctors may be in our network. Ask a Customer Service representative or use *Find a Doctor* on emblemhealth.com.

Once you're ready to join DC37 Med-Team, you'll need to complete a *NYC Health Benefits Application*. Contact your Payroll or Personnel office for information on how to obtain an application.

If you're already enrolled in the DC37 Med-Team program, you don't need to do anything. Your coverage will continue automatically.

The information above is intended to provide general information and highlights regarding the DC37 Med-Team plan. It does not provide a complete benefit description. DC37 Med-Team plan coverage is subject to all terms, conditions and limitations contained in the certificate of insurance. Refer to GHI policy form PLH-5339A.