



Texas  
 UniCare Life & Health Insurance Company (UniCare)  
 Short-Term Health Insurance Plan  
 \$1000 Deductible

This Individual Short-Term (limited duration) health insurance plan with Preferred Provider (PPO) benefits features a \$2 million per member lifetime maximum in benefits.

This matrix is intended to help you review some of the Short-Term Individual health insurance plan benefits from UniCare Life & Health Insurance Company (UniCare) and reflects your share of costs for covered expenses after you have met any applicable deductible. When you use UniCare participating (in-network) providers, your costs are based on a specially negotiated fee for UniCare that may save you money. When you use nonparticipating (out-of-network) providers, your costs are based on charges deemed by UniCare to be reasonable for that service and area. Reasonable charges may be less than your provider's billed charges and often result in higher costs to you.

This summary of benefits provides a very brief description of the important features of the plan. This is not the insurance contract and only the actual plan provisions apply. The Plan booklet sets forth, in more detail, the benefits, limitations, and exclusions. If there are any conflicts between the terms of the plan and the information in this overview, the terms of the Plan booklet will prevail.

Amounts shown below are UniCare's share of costs for covered expenses after any applicable deductibles are met.

Plan Features	Participating Provider	Nonparticipating Provider
<b>Deductible<sup>1</sup></b>	\$1000 per Insured, per plan.	
<b>Out-of-Pocket Maximum</b>	\$1,000 plus the medical deductible per Insured, per plan.	
<b>Plan Maximum</b>	Once UniCare has paid \$2 million in claims, benefits cease.	
<b>Professional Services</b>		
• Surgery, anesthesia, radiation therapy, in-hospital doctor visits, diagnostic x-ray and lab work	80%	50%
• Office visits	80%	50%
<b>Preventive Care</b>		
• Babies/children through age 6 (childhood immunizations- UniCare pays 100% for both participating and non-participating providers and are not subject to the deductible)	80%	50%
• Adults (routine pap smears, annual mammograms, colorectal cancer screening, PSA for men and associated office visits/ examinations)	80%	50%
<b>Physical Therapy, Occupational Therapy, Acupuncture/Acupressure</b>	\$30 per visit; combined maximum of six visits per Insured, per plan term.	
<b>Mental, Emotional or Functional Nervous Disorders</b>		
• Inpatient hospital charges	\$100 per day with a maximum \$2,500 per Insured during the plan term.	
• In- or Outpatient professional charges	\$30 per visit (up to six visits per Insured, per plan).	
<b>Durable Medical Equipment</b>	80%	50%
<b>Inpatient Hospital Services<sup>2</sup></b>	80%	50% less a \$500 deductible for non-emergency stays.
<b>Initial Care of a Medical Emergency</b>	80%	80% (until transferable to a participating hospital then 50% subject to a \$500 deductible once transferable per continuing hospital confinement)

## Texas Short-Term Health Insurance Plan \$1000 Deductible Overview (continued)

Plan Features	Participating Provider	Nonparticipating Provider
<b>Outpatient Medical Care</b> <sup>4,5</sup>	80%	50%
<b>Ambulance Service</b> Maximum covered expense of \$750 per person per trip (air or ground)	80%	50%
<b>Retail Pharmacy</b> (maximum 30 day supply) <sup>6</sup> <b>Generic Drugs</b>	You pay a \$15 copay	You pay 50% of the average wholesale price (AWP) and charges in excess of AWP.
<b>Brand Name Drug Deductible</b>	\$500 per insured	
<b>Brand Name Drugs</b>	You pay 40%	You pay 50% of the average wholesale price (AWP) and charges in excess of the AWP.
<b>Brand Name Drug Maximum</b>	Once UniCare has paid \$1,000 for brand name prescription drugs, your brand name drug prescriptions will no longer be covered. However, you may still get the UniCare network discount when you present your UniCare ID card at the pharmacy.	
<b>Self-Injectable Drugs</b>	You pay 50%	You pay 50% of the average wholesale price (AWP) and charges in excess of the AWP.

<sup>1</sup>All benefits are subject to the plan's deductible.

<sup>2</sup>Services require preservice review or you will be subject to a \$500 penalty. Penalty is waived on emergency admissions; however, utilization review is still required.

<sup>3</sup>Until transferable to a participating hospital then 50% subject to a \$500 deductible once transferable per continuing hospital confinement.

<sup>4</sup>Emergency room visits that do not result in patient admissions will be subject to an additional \$60 charge.

<sup>5</sup>Services require preservice review or authorization by UniCare or you will be subject to a reduction in benefits.

<sup>6</sup>Certain prescription drugs require prior authorization by UniCare.