

Medical

Surest

A to Z coverage with the Surest plan

Easy to use. Upfront prices. Designed to help you find opportunities to save.

The \$ in the list below is the price tag (copayment) you must pay out of pocket for health services, as defined by the Surest plan, until you hit your out-of-pocket limit.



Annual physical (annual preventive visit)

\$(



Basic diagnostic lab tests, X-rays and ultrasounds²

\$0



Emergency room visit

\$750



Hip replacement³

\$1,500



Maternity labor and delivery

\$1,500 to \$3,500



Mental health office visit

In-office visit ... \$15 Virtual visit ... \$15



Office visit

\$15 to \$75



Out-of-pocket limit

Employee ... \$5,000 Family ... \$10,000



Physical therapy—30 visits

\$20 to \$75



Prescription drugs

30-day
\$0
\$5 to \$20
\$80
\$150



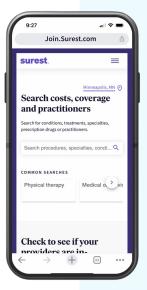
Urgent care

In-office visit ... \$100 Virtual visit ... \$0



Zero deductible

\$0



Easily search and shop for options.

Before making an appointment, check and compare costs—then choose the option that works best for your budget and lifestyle. Receive one bill for a single trip to the doctor or hospital.

To view prices or check if your doctor is in the network:

https://join.surest.com/CCSD

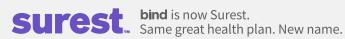
Access code: CCSD2023

Questions? 1-866-683-6440



Get started

britehr.app/CCSD2023



In-network costs only. For out-of-network costs, exclusions and limitations, see website.

1. Excludes vision, dental and elective or cosmetic procedures. Consult your employer's Summary of Benefits and Coverage to determine what services are covered under the Surest plan. 2. Our basic lab tests include any medically necessary lab that is not a genetic lab test (genetic tests can have their own distinct member cost). 3. Your Surest plan includes the flexibility to activate coverage for a set list of plannable-in-advance treatments and procedures (think: hip replacement) when and if you need it. And if you do, you simply need to activate coverage for your preferred provider at less three business days in advance of receiving the care.

The Surest plan: flexible coverage you can activate

The Surest plan lets you activate coverage during the year for certain plannable treatments, like cataract surgery or knee reconstruction. Surest calls this coverage requiring activation. Only 2% of all members activate coverage.

The cost of activating coverage is paid through paycheck deductions, for a set period of time, and may or may not require a copay at the time of service. Paycheck deductions begin once a member activates coverage. Once a member meets the cost, the deductions are complete. There is a maximum out of paycheck set by your employer to protect your check in the rare event of multiple activations.

Coverage must be activated at least three business days in advance of the covered procedure, test or treatment.

Activation is not needed in the case of an emergency or cancer treatment.

Cardiovascular (non-emergent)

- Cardiac Ablation
- Carotid Endarterectomy and Stents
- Coronary Artery Bypass Graft Surgery
- Coronary Catheterization and Percutaneous Coronary Interventions
- Pacemakers and Defibrillators
- Valve Replacement

ENT

- Sinus and Nasal Septum Surgery
- Tonsillectomy and Adenoidectomy

Gastrointestinal

- Bariatric Surgery**
- Gallbladder Removal Surgery (Cholecystectomy)
- Hernia Repair
- Reflux and Hiatal Hernia Surgery

Other

- Breast Reduction Surgery
- Cataract Surgery
- Fibroid Removal (Myomectomy)
- Hysterectomy
- Kidney Stone Abalation and Removal (Lithotripsy)
- Prostate Removal Surgery (non-cancer related)
- Sling Surgery for Female Urinary Incontinence

Musculoskeletal

- Ankle and Foot Bone Fusion
- Ankle Arthroscopy and Ligament Repair
- Ankle Replacement and Revision
- Bunionectomy and Hammertoe Surgery
- Carpal Tunnel Surgery
- Cervical Spine Disc Decompression
- Cervical Spine Fusion
- Elbow Arthroscopy and Tenotomy
- Elbow Replacement and Revision
- Ganglion Cyst Surgery
- Hip Arthroscopy and Repair
- Hip Replacement and Revision
- Knee Arthroscopy and Repair
- Knee Replacement and Revision
- Lumbar Spine Disc Decompression
- Lumbar Spine Fusion
- Morton's Neuroma Surgery
- Plantar Fasciitis Surgery
- Shoulder Arthroscopy and Repair
- Shoulder Replacement and Revision
- Spinal Cord Stimulator
- Wrist and Hand Joint Replacement
- Wrist Arthroscopy and Repair



*Surest 2020 self-funded book of business. 147_V03. **Coverage for bariatric surgery varies. A complete list of exclusions and limitations can be found on the sample Summary of Benefits and Coverage and in the Certificate of Coverage. Insurance coverage for fully insured plans is provided by All Savers Insurance Company (for FL, GA, OH, UT and VA) or by UnitedHealthcare Insurance Company (for AZ, MO, MI, SC and TN). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. Administrative services for insurance products underwritten by All Savers Insurance Company and UnitedHealthcare Insurance Company, and for self-funded plans, are provided by Bind Benefits, Inc. [dba Surest], its affiliate United HealthCare Services, Inc., or by Bind Benefits Administrators Services [dba Surest] in CA. Stop loss insurance for level funded plans is underwritten by United Healthcare Insurance Company. © Bind Benefits, Inc., dba Surest. All rights reserved. 175800_22-Al-179605

Top 5+ Surest FAQs

Am I covered in an emergency?

YES! If you go to the emergency room, you pay the emergency room copay. If you need emergency surgery and/or need to be admitted to the hospital, the emergency room copay is waived, and you will be responsible for the inpatient hospital emergency admit copay. The applicable copay covers the care from X-rays and labs to anesthesiologists.

What's covered under the Surest plan?

With the Surest plan, you get what you'd expect from a health plan, only with price visibility to check and compare costs and options. Even better, lower costs are an indication of higher-value care.

Here's how it works: Health services are assigned a price tag (copay). For preventive care, the copay is typically \$0. For office visits and many procedures—from having an MRI to having a baby—you see one price. By grouping these services together—combining the labs and X-rays that go along with a medical procedure or test into one price—we're trying to make it easier for our members to know what they'll pay in advance.

The Surest plan covers:

- Preventive care (your annual checkup, some health screenings, vaccinations)
- Primary and specialty care
- · Maternity care
- · Mental and behavioral health services
- Hospital services
- Urgent and emergency services
- Cancer care
- Treatment for chronic conditions
- Substance use disorders
- Most diagnostic testing (ultrasounds, bloodwork, etc.)
- · Durable medical equipment
- Prescription drugs
- · And more

Is there an out-of-pocket limit? What applies?

Yes. There is an out-of-pocket limit, or the most money you'll pay in a given year for health care benefits your plan covers. Visit Join.Surest.com or your benefit site for details.

All copays count toward the out-of-pocket limit, from prescriptions to office visits to surgery. Monthly premiums and out-of-network expenses don't count toward out-of-pocket limits.

HSA and FSA accounts—what can I use?

To be eligible for a health savings account (HSA), you must have a high deductible health plan. HSAs were established to help people cover the costs of health care. At Surest, we believe you should be able to maximize your health care dollars now, not after chipping away at a deductible first. At Surest, there is no deductible.

And because there is no deductible, you can't contribute to an HSA. If you already have existing HSA funds, however, those are yours to keep. And you can keep using your HSA funds for out-of-pocket medical expenses while on the Surest plan.

Under the Surest plan, you can put money aside—tax-free—in a flexible spending account (FSA) to pay for qualified out-of-pocket medical expenses. Sign up for an FSA during annual enrollment.

Is my doctor in-network?

Your network is a group of hospitals, doctors, labs, specialists and pharmacists who have a partnership (and contract) with your health insurance company to be part of your plan. Your doctor is likely in-network—we access the national UnitedHealthcare Choice Plus network and Optum Behavioral Health network—but you should always confirm. You can confirm at Join.Surest.com.

What should I do if my provider doesn't recognize Surest?

Not all network providers know our plan by name, so it can be helpful to share the following:

We access the national UnitedHealthcare Choice Plus network, along with Optum Behavioral Health, but Surest is NOT the same as UnitedHealthcare.



New Surest member?

Turn the power on!

See prices. Compare options. Decide what works best for you.

