



## Rocky Mountain Range 2019 Group Silver HMO 5000/50 \$55

rmhp.org • 800-453-2981

Rocky Mountain Range is a health plan centered on where you seek care – close to home.

- Access to our complete network of Western Slope Providers.
- Access to all Denver and Colorado Springs area physicians and facilities.
- Access to our national pharmacy network.

	Silver HMO 5000/50 \$55
<b>Deductible</b>	<b>In-Network</b>
Individual	\$5,000
Family	\$10,000
<b>Out-of-Pocket Maximum (includes deductible)</b>	<b>In-Network</b>
Individual	\$7,900
Family	\$15,800
Office Visit PCP/Specialist	PCP: 1 <sup>st</sup> 5 visits \$55, no deductible, then 50% after deductible Specialist: \$80, no deductible
Lab	50%
X-Ray	50%
Scans – MRI/CAT/PET	50%
Urgent Care	\$75, no deductible
Emergency Care	\$500, then 50% after deductible
Ambulance	50%
Inpatient Hospital	\$1750 per stay, then 50% after deductible
Outpatient Surgery	50%
Child Preventive Services	100% covered, no deductible
Adult Preventive Services	100% covered, no deductible
Mammograms, Pap smear, prostate screening	100% covered, no deductible
Immunizations	100% covered, no deductible
Colorectal Cancer Screening	100% covered, no deductible
Prescription Drug – no deductible	Tier 1: \$20 Tier 2: \$55 Tier 3: \$100 Tier 4: \$300 Tier 5: \$500

All services subject to deductible unless otherwise noted.

## Plan Limitations and Exclusions

For complete details on plan benefits and limitations and exclusions, see the applicable RMHP contract.

An access plan is available for each managed care network offered by RMHP to any interested party upon request. Such access plans contain information on: providers; hospitals; referral and grievance procedures; quality assurance; access for members with special needs; emergency coverage provisions; and other information on how to access services.

**COLORADO INSURANCE LAW REQUIRES ALL CARRIERS IN THE SMALL GROUP MARKET TO ISSUE ANY HEALTH BENEFIT PLAN IT MARKETS IN COLORADO TO SMALL EMPLOYERS UP TO 100 EMPLOYEES, REGARDLESS OF THE HEALTH STATUS OF ANY OF THE INDIVIDUALS IN THE GROUP.**

The contents of this benefits summary are subject to the provisions of the Evidence of Coverage and Plan Attachments, which contain all terms and conditions of membership and benefits.

