



MINUTEMEN STAFFING

You Are Eligible for Health Insurance Forms must be returned within 7 days

This is your opportunity to elect health insurance effective the 1st of the next month. If you choose not to enroll the next opportunity will be at the next open enrollment, unless you have a Qualifying Event (marriage, childbirth, loss of coverage).

Please review both plan options, choose ONE and fill out the enrollment form to send back.

For additional plan information please visit:

www.minutemeninc.com/insurance

If you do not want this health insurance, please sign the Waiver form and return it in the envelope provided.

If we don't receive any forms back, it will be considered a waiver of coverage.

Benefit Highlights & Monthly Deductions	RSL BasicCare	United Health Care
Single	\$30.00	\$95.00
Employee + Spouse	\$106.73	\$892.91
Employee + Child	\$79.88	\$553.23
Employee + Children	\$163.64	\$553.23
Family	\$223.47	\$1,485.01
	Essential – Basic Advantage Total Plan 1	UHC Bronze Plan2
Single Deductible	\$0	\$6,350
Family Deductible	\$0	\$12,700
Coinsurance % after deductible	N/A	100%
Single Out of Pocket Maximum	Covered services up to a dollar limit - See plan details on-line	\$6,350
Family Out of Pocket Maximum	Covered services up to a dollar limit - See plan details on-line	\$12,700
Office Visits	Plan pays up to \$75	100% after deductible
Specialist Office Visits	Plan pays up to \$75	100% after deductible
ACA Preventative Services	\$0 Co-pay	\$0 Co-pay
Urgent Care Office Visits	Plan pays up to \$50	100% after deductible
Emergency Room Visits	Plan pays up to \$500	100% after deductible
Inpatient Services	Covered services up to a dollar limit - See plan details on-line	100% after deductible
Outpatient Services	Covered services up to a dollar limit - See plan details on-line	100% after deductible
Prescription Drug Benefit	\$25 Generic limit 10	100% after deductible
Discount Cards		
Prescription	Included	Included with medical
Vision	Included	Included
24-Hour Nurse Helpline	Included	Included



Eres elegible para Seguro Medico!

Los formularios deben ser devueltos en un plazo de 7 dias.

Esta es su oportunidad para elegir un seguro. Si elige no inscribirse, la próxima oportunidad será en la próxima inscripción abierta, a menos que tenga un evento calificado (matrimonio, parto, pérdida de cobertura).

Revise ambas opciones del plan, elija UNO y completa el formulario de inscripción de coordinación para enviarlo de regreso.

Para obtener información adicional sobre el plan, visite:

www.minutemeninc.com/insurance

Si no desea este seguro de salud, firme el formulario de exención y devuélvalo en el sobre provisto. Si no recibimos ningún formulario, se considerará una renuncia a la cobertura.

Benefit Highlights & Monthly Deductions	RSL BasicCare	United Health Care
Soltero	\$30.00	\$95.00
Empleado + Pareja	\$106.73	\$892.91
Empleado + Hijo(a)	\$79.88	\$553.23
Employee + Hijos(as)	\$163.64	\$553.23
Familia	\$223.47	\$1,485.01
	Essential – Basic Advantage Total Plan 1	UHC Bronze Plan2
Deducible individual	\$0	\$6,350
Deducible familiar	\$0	\$12,700
Porcentaje de coseguro despues del deducible	N/A	100%
Unico desembolse maximo	Servicios cubiertos hasta un limite de dolares (vea detalles en pagina web)	\$6,350
Desembolse maximo familiar	Servicios cubiertos hasta un limite de dolares (Vea detalles en pagina web)	\$12,700
Visita de oficina	Cubierto hasta \$75	100% luego de deducible
Visita de especialista	Cubierto hasta \$75	100% luego de deducible
Servicios preventivos de ACA	Co-Pago \$0	Co-Pago \$0
Visita a oficina de urgencias	Cubierto hasta \$50	100% luego de deducible
Visita a sala de emergencias	Cubierto hasta \$500	100% luego de deducible
Servicio de hospitalización	Servicios cubiertos hasta un limite de dolares (vea detalles en pagina web)	100% luego de deducible
Servicio ambulatorio	Servicios cubiertos hasta un limite de dolares (vea detalles en pagina web)	100% luego de deducible
Beneficio de medicamentos recetados	\$25 Genericos limite 10	100% luego de deducible
Discount Cards		
Prescripción	Incluido	Incluido con medico
Visión	Incluido	Incluido
Servicio de enfermeria 24hr	Incluido	Incluido