Nationwide Medical Insurance Plan (MEC)



Service	Minimum Coverage Plan (In-Network)	Enhanced Minimum Coverage Plan (In-Network)
Deductible: individual/family	N/A	N/A
Coinsurance	N/A	N/A
Out-of-pocket maximum: individual/family	N/A	N/A
Lifetime maximum	N/A	N/A
PCP selection	N/A	N/A
Referral requirements	N/A	N/A
Preventive care: routine adult physical exams, well child exams, pediatric immunizations, routine gyn care exams, routine mammography, and routine laboratory/radiology	100%, no deductible	100%, no deductible
Primary care physician office visits	N/A	Plan pays \$75 per day; 6 days per person per year
Specialist office visits	N/A	Plan pays \$75 per day; 6 days per person per year
Maternity/OB office visits (prenatal/maternity)	N/A	N/A
Diagnostic laboratory/radiology	Discount program	Plan pays \$75 pe testing day, 3 days per person per year, plus discount program
Emergency Room	N/A	Plan pays \$75 per days, 4 days per person per year
Urgent care facility	N/A	N/A
Telemedicine medical	100%, no charge	100%, no charge
Hearing aids	N/A	N/A
Prescription drug — retail (30-day supply)	 Tier 1: Select generic & brand name drugs available for \$10 or less / \$10 copay Tier 2: Select generic & brand name drugs available for \$20 or less / \$20 copay Tier 3: Select generic & brand name drugs available for \$50 or less / \$50 copay Tier 4: Discounted pricing 	 Tier 1: Select generic & brand name drugs available for \$10 or less / \$10 copay Tier 2: Select generic & brand name drugs available for \$20 or less / \$20 copay Tier 3: Select generic & brand name drugs available for \$50 or less / \$50 copay Tier 4: Discounted pricing
Prescription drug-mail order or CVS maintenance drugs (90-day supply) **Can opt out *General visit only	N/A	N/A

^{*}General visit only