

Complete Choice Premier - Presidential

Available to Members in the following states: AL, AZ, FL*, GA, IA*, IN, MI, MS, NE, NM, OH, PA, RI, SC, TN, VA, WI, WY

* = 4-Tier Discount Rx available

Please refer to your insurance Certificates of Coverage for full benefit information, including limitations and exclusions from coverage

Benefit:	1500	3500	6500
Doctor's Office Visits - Benefits are payable at the indicated amount when a Covered Person visits a Physician's office as a result of Sickness or Injury. Calendar year maximum: 4 visits per Covered person OR 6 visits per Family.	N/A	\$60 per visit	\$70 per visit
Child Wellness/Preventive Care - Benefits are payable up to the indicated amount when a Covered child visits a Physician for a wellness checkup. Calendar Year Maximum: 1 per Covered Child.	Up to \$100 per visit	Up to \$100 per visit	Up to \$100 per visit
Adult Wellness/Preventive Care - Benefits are payable up to the indicated amount when a Covered adult visits a Physician for a wellness checkup. Calendar Year Maximum: 1 visit per Covered adult.	Up to \$100 per visit	Up to \$100 per visit	Up to \$100 per visit
Outpatient Diagnostic X-ray And Laboratory Benefit - Benefits are payable up to the indicated maximum amount per Calendar Year, when a Covered Person has outpatient diagnostic x-ray and laboratory tests performed. Such tests and diagnostic x-rays must be ordered by a Physician and be related to an Injury or Sickness	Up to \$300 maximum Per Covered Person	Up to \$600 maximum Per Covered Person	Up to \$1,200 maximum Per Covered Person
Ambulance Transportation Benefit - Benefits are payable at the indicated maximum amount if a Covered Person requires the use of an ambulance service for transportation to or from a Hospital for care and treatment of a Sickness or Injury	Up to \$200 maximum per Covered Person	Up to \$300 maximum per Covered Person	Up to \$400 maximum per Covered Person
Hospitalization - Benefits are payable at the indicated amount for each day a Covered Person is Confined in a Hospital as a result of Injury or Sickness at the maximum number of days shown per Covered Person per Calendar Year	\$300 per day Up to 10 days	\$600 per day Up to 10 days	\$1,200 per day Up to 10 days
<ul style="list-style-type: none"> • Intensive Care • Mental Illness (In-Hospital only) • Skilled Nursing Facility 	\$300 per day/5 day maximum \$50 per day/10 day maximum \$50 per day/10 day maximum	\$600 per day/5 day maximum \$100 per day/10 day maximum \$100 per day/10 day maximum	\$1200 per day/5 day maximum \$150 per day/10 day maximum \$150 per day/10 day maximum
Inpatient/Outpatient Surgery - Benefits are payable up to the indicated maximum amount per Calendar year, if a Covered Person has a covered surgery performed while confined in a hospital or on an Outpatient basis.	Up to \$2,000 maximum per Covered Person	Up to \$3,000 maximum per Covered Person	Up to \$5,000 maximum per Covered Person
Emergency Room Benefit - Benefits are payable up to the indicated amount per visit, per Covered Person, if a Covered Person visits an Emergency Room or Urgent Care Facility; 2 claim limit per Certificate, per Calendar year*	Up to \$500 per visit \$100 deductible per visit \$1,000 Calendar Year Maximum per Certificate	Up to \$1,000 per visit \$250 deductible per visit \$2,000 Calendar Year Maximum per Certificate	Up to \$2,000 per visit \$250 deductible per visit \$4,000 Calendar Year Maximum per Certificate
Accident Medical Expense - Covered expenses for accidental bodily injuries will be paid up to the indicated amount per injury; 2 claim limit per Certificate per Calendar Year*	Up to \$1,500 per Incident \$100 deductible per Incident \$3,000 Calendar Year Maximum per Certificate	Up to \$2,500 per Incident \$100 deductible per Incident \$5,000 Calendar Year Maximum per Certificate	Up to \$5,000 per Incident \$100 deductible per Incident \$10,000 Calendar Year Maximum per Certificate
Accidental Death & Dismemberment - a cash payment paid in the event of death or dismemberment caused by a covered accident; 2 claim limit per Certificate per Calendar Year*	\$5,000 (loss of life) \$10,000 Calendar Year Maximum per Certificate	\$5,000 (loss of life) \$10,000 Calendar Year Maximum per Certificate	\$10,000 (loss of life) \$20,000 Calendar Year Maximum per Certificate
Discounted Prescription Drugs - Average 20% Savings	Members enjoy average savings of 20% on commonly prescribed generic and name-brand drugs at approx. 60,000 leading drug stores and supermarkets nationwide, just by showing their Member ID Card.		
Mail Order Pharmacy - Average 50% Savings	Members save an average of 50% off retail prices by using the Mail Order Pharmacy for recurring prescriptions. Provided by CVS Caremark FastStart service.		