## VEHI:Platinum Plan, Gold Plan, Gold CDHP, Silver CDHP

Summary of Benefits and Coverage: HRA, member pays first

Coverage Period: Begins 1/1/2024

Coverage for: VEHI | Plan Type: HRA



This is only a summary. If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan document at www.vehi.org or by calling 1-802-223-5040.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	See page 1 of the SBC	
Are there other deductibles for specific services?	No. There are no other specific deductibles.	
Is there an <u>out-of-pocket</u> <u>limit</u> on my expenses?	See page 1 of SBC	
What is not included in the <u>out-of-pocket limit?</u>	See page 1 of SBC	
Is there an overall annual limit on what the plan pays?	No, there is no annual limit on what the health plan pays.	Your employer also provides a Health Reimbursement Arrangement (HRA). The HRA pays up to \$1900 (licensed), \$2200 (non-licensed)/single plan, and /\$4000 (licensed), \$4400 (non-licensed)/family plan, per year to help cover your eligible expenses.
Is there an overall annual limit on what the HRA pays?	Yes, see HRA amounts in next column.	
Does this plan use a <u>network</u> of <u>providers</u> ?	See page 1 of SBC	
Do I need a referral to see a specialist?	See page 1 of SBC	
Are there services this plan doesn't cover?	See page 1 of SBC	

Questions: Call 1-800-247-2583 or visit us at www.vehi.org.

If you aren't clear about any of the underlined terms used in this form, see the Glossary. You can view the Glossary at www.bcbsvt.com/glossary or call 1-800-247-2583 to request a copy.