



Triple Tier™

For Groups of 2-50 Employees

Triple Tier For Employee Groups

A Revolutionary Approach to Group Health Insurance

The group health insurance revolution is here. It's called Consumer Choice, and it empowers people to make healthcare decisions that are right for themselves and their families. The idea is simple—choose and pay for only what's needed, keeping costs at the lowest possible levels.

Triple Tier: A Revolutionary Approach to Preferred Provider Organizations

Triple Tier is part of a suite of consumer-choice products from American Community. It's a health insurance plan that combines the advantages of PPO care with unique ways to save on out-of-pocket medical expenses. A revolutionary combination.

Triple Tier Rich in Benefits, Rich in Value

When it comes to health insurance, most companies offer limited choices—pay dearly for comprehensive coverage or have to settle for less. Sound familiar? That's why we created Triple Tier—an affordable alternative to regular PPO plans. It offers PPO-style (network and non-network) benefits without the PPO price tag. In fact, Triple Tier costs up to 15% less than many available PPO plans.

What are the Triple Tiers?

Triple Tier's unique, three-tiered design offers a flexible approach to how benefits are paid, depending on the type of services received and where they are performed. In the hospital or in the doctor's office, this plan balances out-of-pocket costs and benefits to protect against an unexpected illness or emergency. It even

covers preventive care services, like routine exams and childhood immunizations, to help people stay healthy. Triple Tier offers a high level of security that won't break the bank.

Triple Tier categorizes medical services into three tiers, and pays for covered services based on what the service is and where it is received:

Tier 1: Office Visits and Preventive Care—100% after copay. No deductible.

Tier 2: Inpatient and Emergency Room—90% after deductible.

Tier 3: Outpatient Services—70% after deductible.

This plan offers employees many opportunities to save on costs when it's within their control, and richer benefits when they need expensive medical care that's beyond their control. In essence, employees have the opportunity to shop around for the best value. Along with that flexibility, they have the comfort of knowing that they're protected at the highest level when they need it most—for an expensive hospital stay or medical emergency.

Key Features of the Triple Tier

- ✓ Broad inpatient and outpatient coverage including doctor office visits
- ✓ Rich preventive care benefits like annual mammograms and pap tests for women, prostate screenings for men and immunizations for children
- ✓ No deductible for doctor office visits and preventive care
- ✓ \$5 million lifetime maximum benefit
- ✓ Prescription drug coverage
- ✓ Maternity benefits
- ✓ A choice of calendar year or benefit period (plan year) deductibles

About the Health Plan

- ✓ A choice of deductible amounts
- ✓ Affordable options for dental, vision, life and AD&D, weekly income, and deductible carryover*.

**Deductible Carryover not available with the Benefit Period Deductible option*

Covered Expenses

- Allergy testing
- Ambulance
- Chemotherapy
- Durable medical equipment
- Emergency room
- Home healthcare
- Hospice care
- Intensive care
- Mammograms
- Miscellaneous tests, services, and medical supplies
- Nursing care
- Organ transplants
- Oxygen, blood, and plasma
- Physician visits
- Prescription drugs
- Preventive care
- Radiation treatment
- Second surgical opinions
- Semi-private room
- Skilled nursing facilities
- Speech, physical and occupational therapy
- Surgery and anesthesia
- X-rays and lab tests

Please refer to your state-specific benefit chart for more details.

Here's How Triple Tier Works:

- ✓ Choose either Plan 1 or Plan 2.
- ✓ Benefits are paid as listed below

Plan 1	Network	Non-network
Deductible	\$1,000 (Single) \$2,000 (Family)	\$2,000 (Single) \$4,000 (Family)
Out-of-Pocket Maximum (includes deductible)	\$5,000 (Single) \$10,000 (Family)	\$10,000 (Single) \$20,000 (Family)
Lifetime Policy Maximum	\$5 million	

	Tier I Office Visits & Preventive Care	Tier II Inpatient & Emergency Room ¹	Tier III Outpatient Services
Network	\$40 Copay per visit, then 100%	Deductible, then 90%	Deductible, then 70%
Non-network	\$80 Copay per visit, then Non-network benefit percentage ²	Deductible, then Non-network benefit percentage ²	Deductible, then Non-network benefit percentage ²

Plan 2	Network	Non-network
Deductible	\$3,000 (Single) \$6,000 (Family)	\$6,000 (Single) \$12,000 (Family)
Out-of-Pocket Maximum (includes deductible)	\$7,000 (Single) \$14,000 (Family)	\$14,000 (Single) \$28,000 (Family)
Lifetime Policy Maximum	\$5 million	

	Tier I Office Visits & Preventive Care	Tier II Inpatient & Emergency Room ¹	Tier III Outpatient Services
Network	\$50 Copay per visit, then 100%	Deductible, then 90%	Deductible, then 70%
Non-network	\$100 Copay per visit, then Non-network benefit percentage ²	Deductible, then Non-network benefit percentage ²	Deductible, then Non-network benefit percentage ²

¹ ER: \$50 Copay (waived if admitted)

² Varies by state: refer to your state-specific benefit chart for more details



Your Provider Network

With Triple Tier, employees have the freedom to choose their own doctor or hospital. They can minimize their share of the healthcare costs by using doctors and hospitals that are part of their preferred provider organization (PPO) network. American Community has contracted with the leading PPO networks across the country, offering access to high-quality hospitals, primary care physicians, specialists and other providers. If their doctor or hospital is not a member of the PPO, employees will share in more of the costs of their medical expenses. What makes our PPO plan so desirable is that it allows employees access to a specialist when they feel it is necessary. A referral is not required to access a specialist. The PPO network is shown on the front of the employee's medical identification (ID) card.

In addition, employees can receive the PPO network level of benefits when traveling outside their PPO network service area through a coordinated program with a nationwide PPO network. It's the perfect solution for road warriors, snowbirds and students who attend out-of-state colleges. There is no additional fee for this value-added benefit and a toll-free number is provided on the back of the employee's medical ID card to help locate available network providers.

Contact your American Community agent for the PPO networks available to you. For a list of available providers, visit our website at www.american-community.com and click on "Provider Locator."

Deductible

The deductible is the amount of covered charges an individual or family must incur in a 12-month benefit period before the plan begins to pay benefits.

Copayment

The copayment, or copay, is the set amount you pay when you receive medical services. For example, you might make a \$40 copayment when you visit the doctor.

Coinsurance

This is the set percentage of costs you pay for health care after your deductible is met. For example, after your deductible is met, you might pay 30% of your healthcare expenses while your plan pays the remaining 70%.

Key Plan Features

Accident Benefit

With Triple Tier's accident benefit, employees and their families have immediate coverage for an injured family member.

- The deductible is waived for covered services for the first 30 days following an accidental injury.
- Covered charges are paid at the selected network benefit percentage.

\$5 Million Lifetime Maximum

Peace of mind is assured. The Triple Tier plan provides total plan benefits up to a lifetime maximum of \$5 million.

Mental Health Benefit

Coverage is subject to deductible and benefit percentage. Please see the state-specific benefit chart for details.

Substance Abuse Benefit

Includes treatment for both alcohol and substance abuse. Coverage is subject to deductible and benefit percentage. Please see the state-specific benefit chart for details.

Maternity Benefit

Automatically included for all groups and paid as any other covered condition. Coverage is subject to deductible and benefit percentage.

Transplant Benefit

The maximum lifetime transplant benefit is \$1 million when performed in a designated transplant facility and includes \$10,000 for travel or lodging expenses for the insured and one companion (meals and lodging are limited to \$150 per person per day). The maximum lifetime transplant benefit is \$150,000* when performed in a non-designated transplant facility. A designated transplant facility is a medical facility



with a proven, exceptional success rate for organ transplants that has agreed to provide approved transplant services to our insureds. Anti-rejection prescription drugs are a covered benefit included in the lifetime maximum. All transplant procedures require prior approval from American Community.

**Please refer to your state-specific benefit chart for more details.*

Family Security Benefit

If an insured employee's insurance ends because he or she dies, the medical insurance benefits of any insured dependents will be continued for six (6) months without payment of premium. This benefit only applies if the employer is not required to provide continuation of coverage under COBRA or under a state-mandated continuation of insurance provision.

Prescription Drug Plans

Prescription Drug Plan Choices

Triple Tier for employee groups offers five different designs for prescription drug coverage. Our Generic Drugs Only plan is automatically included with a retail \$10 copay. The option to purchase (buy up to) one of the remaining four prescription drug plans is available for all groups. Each plan includes multiple participating pharmacies to make it convenient for insureds to use their drug cards. If an employer selects this benefit, all employees enrolled for medical coverage must be included for this benefit. An employee who waives medical coverage cannot choose the prescription drug benefit.

Prescription drugs may be purchased at any pharmacy. If a prescription is filled at a non-participating pharmacy, then the insured pays the entire cost of the prescription. Prescriptions filled at a participating pharmacy are subject to the copayments of the selected plan.

Plan Options				
Generic Drugs Only: Included, \$10 Copay				
Prescription Drug Options: Buy Up				
Drug Program	High	Medium	Generic/ Mail Order	Mail Order*
Retail Drug Card Copay				
Generic	\$10	10%**	\$10	
Select Brand Name	\$25	All Brands 30%**		
Additional Brand Name	\$40			
Supply/Refill	31-day supply per prescription/1 refill			
Mail Order Copay				
Generic	\$25	\$25	\$25	\$25
Select Brand Name	\$60	All Brands \$75	\$60	\$60
Additional Brand Name	\$100		\$100	\$100
Supply/Refill	90-day supply per prescription/1 refill			

* Coverage for Prescription Maintenance Drugs only.

** Medium Plan Retail Drug Card has minimum dollar copayments that match the percentage. For example, a 30% copayment has a minimum \$30 copayment. The maximum copayment for retail on the Medium Plan is \$100 per prescription.

Prescription Drug Mail Service

This program allows insureds to order through the mail, the medications they will be taking long-term. The prescription drug mail service program is included for all groups who choose the prescription drug card benefit. A 90-day supply of a prescription is dispensed subject to a copayment and will arrive within two weeks from the date of the order.

If the insured would like to use this program and the medication is needed immediately, but will also be used on an ongoing basis, two prescriptions are required. One prescription for a 14-day supply of the medication (to be filled at a retail pharmacy), and a second prescription for the balance of the 90-day supply to be filled by the mail-service pharmacist.

Prescription Maintenance Drug Program

The Prescription Maintenance Drug Program is available without the prescription drug card benefit. This service allows the insured to obtain prescription maintenance drugs by mail order. Eligible prescription maintenance drugs are determined by American Community.

Prescription drugs obtained through any source other than the Prescription Maintenance Drug Program are paid for by the insured. The entire cost of the prescription is charged at the time it is filled and then the insured may submit a claim for reimbursement of plan cost, minus a processing fee.

Dental & Vision Options

Optional Dental Coverage

American Community offers affordable, comprehensive dental coverage for employees and their families. Whether it's a simple checkup or complicated oral surgery, our plans provide superior coverage.

A one-year waiting period applies to major and orthodontic procedures. This waiting period will be waived for initial enrollees if this plan is replacing a group dental plan that included major or orthodontic benefits. The insured individual is responsible for the deductible amounts, his/her portion of the coinsurance, and charges in excess of usual, customary and reasonable.

Diagnostic and Preventive — office visits, cleanings, x-rays, fluoride treatments, sealants, space maintainers, oral exams, and lab tests.

Basic — fillings, root canals (endodontics), extractions, including surgical extractions of teeth.

Major — restorative and prosthodontics including crowns, full or partial dentures, bridges, inlays, onlays and maintenance of bridges and crowns.

Orthodontics (optional) — for dependent children to age 19. Treatment and procedures for the correction of malposed teeth including diagnostic procedures, fixed or removable appliances and full-banded treatment.

	Plan 1	Plan 2	Plan 3	Plan 4
Preventive Services				
Deductible	\$0	\$0	\$0	\$0
Coverage	100%	80%	80%	50%
Basic Procedures				
Deductible	\$50	\$50	\$50	\$50
Coverage	80%	80%	50%	50%
Major Procedures				
Deductible	\$0	\$0	\$0	\$0
Coverage	50%	50%	50%	50%
Plan Maximum	\$1,500 benefit period maximum		\$1,000 benefit period maximum	
Orthodontics (optional)				
Deductible	\$50	\$50	\$50	\$50
Coverage	50%	50%	50%	50%
Plan Maximum	\$1,000 or \$2,000 lifetime maximum			



Optional Vision Coverage

Eye Exam Plus is a basic plan automatically included with PPO medical coverage unless one of the full-service vision benefits is purchased.

Eye Exam Plus pays for services at a VSP member doctor only. Two optional enhanced plans are also available. Copayments apply when using member doctors. A reimbursement schedule applies when using a non-member doctor.

Eye Exam Plus Benefit*

- \$10 copay per exam; one exam every 12 months.
- 20% discount on eyeglasses and 15% discount on the physician services when contact lenses are purchased.

Enhanced Plan A

- \$10 copay per exam; one exam every 12 months.
- \$25 copay for material.
- One set of lenses every 24 months. One pair of frames every 24 months.

Enhanced Plan B

- \$10 copay per exam; one exam every 12 months.
- \$15 copay for material.
- One set of lenses every 12 months; one pair of frames every 24 months.

* Not available in Missouri.

Other Plan Options

Optional Benefit Period Deductible

With this arrangement, the deductible period runs for 12 months beginning with the group's actual policy effective date. For example, if the policy effective date is July 1, the plan year will run from July 1-June 30. With the traditional calendar year deductible, the deductible period begins and ends with the calendar year.

Optional 24-Hour Occupational Coverage

This option covers an employee's medical expenses that result from a work-related injury. This benefit is available to owners, sole proprietors, partners, or corporate officers who are eligible for workers' compensation coverage but have legally chosen to opt out. It is also available to individuals who are not eligible for workers' compensation coverage. This benefit is not intended to replace or duplicate benefits that would have been provided by workers' compensation.

Deductible Carry-Over

Covered charges incurred during the last three months of a calendar year which are applied to that year's deductible will also be applied to next year's deductible. This option may be selected only at the time a new group is written and will apply throughout the duration of the group policy. (Not available with the Benefit Period Deductible option)

Life and Accidental Death and Dismemberment (AD&D)

Life insurance protects everyone, however, most employees are not sufficiently covered. With American Community, employers are not only offering employees convenient medical coverage, they're also making it possible for them to protect and provide for family members when they can no longer do so.

Plan Options:

Flat Plan

Life and AD&D minimum amount is \$15,000. Amounts can be selected in \$5,000 increments.

Group Size	Plan Limit
2-24	\$15,000 – \$50,000
25-50	\$15,000 – \$75,000

Classed Plan

Up to 5 classes can be established — not to exceed 2½ times the next lower bracket. Plan maximums are the same as the flat plan.

Earnings Plan

1, 2, or 3 times earnings (rounded to the next highest \$1,000) with the same maximums as the flat plan.

AD&D (Principal Sum) benefit is equal to the life benefit and is 24-hour coverage. Life and AD&D benefits are available for employees age 65 and older at reduced amounts:

- For groups with 2 to 19 employees, Life and AD&D reduces by 33⅓% at 65 and terminates at age 70 or retirement, whichever comes first.
- For groups with 20 or more employees, coverage reduces 33⅓% of the original amount at age 65, plus a 33⅓% reduction to the reduced amount at age 70, plus a 33⅓% reduction to the reduced amount at age 75. Coverage terminates at retirement. All amounts are rounded to the next \$1,000.

Optional Dependent Life

Provides life insurance coverage to dependents as follows:

Spouse Benefit	
Under Age 40	\$7,500
Age 40 to 50	\$5,000
Age 51 to 55	\$3,500
Age 56 and over	\$2,500
Child Benefit	
Birth to 6 months	\$1,000
6 months to 19 years	\$5,000

If selected by the employer, all employees with dependents must enroll, even if medical coverage is waived.

Weekly Income

Employees need a way to protect their income and to help provide for their families while totally disabled and recovering from an accident or illness. The weekly income option provides the income protection employees need. If selected by the employer, all eligible employees must enroll.

Plan Options:

Flat Plan

\$100 to \$700 per week up to a maximum of 65% of income (in \$10 increments)

Classed Plan

Same classes as the Life and AD&D

Classes selected by the employer (\$700 per-week maximum)

Percent of Earnings Plan

65% (\$700 per-week maximum)

Waiting Period Options

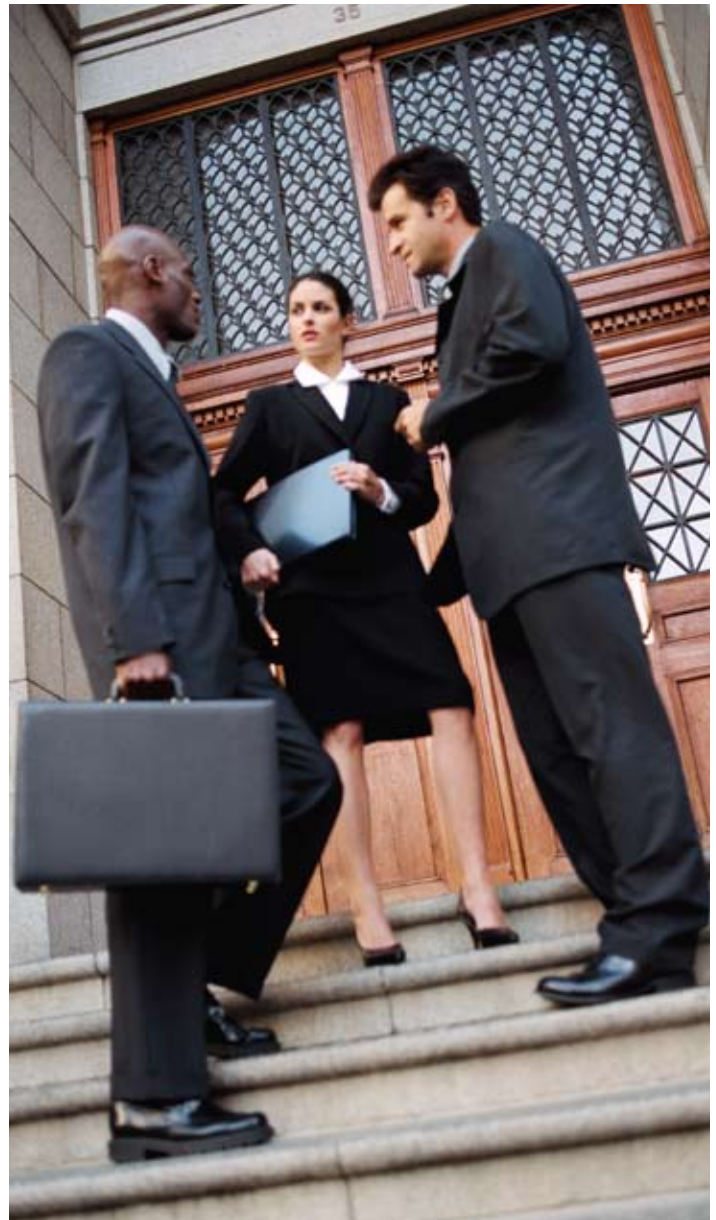
1st day accident; 8th day sickness

8th day accident; 8th day sickness

15th day accident; 15th day sickness

Benefit Duration Options

13 weeks or 26 weeks



American Community

Unprecedented Service is Part of the Plan

With beginnings dating back to 1938 and headquartered in Livonia, Michigan, American Community is one of the nation's oldest and most respected health insurance providers. Health insurance is what we do. Health insurance is all we do. We are known for innovation in health coverage, and for the creation of affordable products, like our new consumer-choice plans. We are also known for prompt claims payment and outstanding customer service.

Our knowledgeable and experienced staff of customer service representatives is on call to answer any question(s) you may have regarding coverage, billing or payment of claims. Contact information will be provided with your new American Community policy.

Your American Community Agent

Your American Community agent is an independent health insurance specialist. Health insurance is your agent's business. Dedication to the full, best interest of you, the client, is his or her specialty. You can count on this.

This booklet is intended to highlight certain provisions of the plan described. It is not a contract, an insurance policy or a summary plan description booklet. Please see the policy for complete details, terms, conditions and full provisions of coverage.



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