

quality benefits with an HSA-compatible copay plan

Give your employees the benefits of a copay plan with the added bonus of HSA compatibility.



Meritain Health provides your group with efficient administrative services and support.

Meritain Health, an independent subsidiary of Aetna, is one of the nation's largest administrators of health benefits. Meritain Health offers the resources of a national carrier combined with unmatched flexibility and plan options.

With Aetna's financial backing, access to the Aetna Choice® POS II network and 30-plus years of operational excellence, you can rest assured knowing Meritain Health has the experience and resources to keep your plan running smoothly.

*Copay options available with both our PPO and Advantage programs!**

The Allstate Benefits Self-Funded Program offers you access to:



The wellness program by Vitality®

With this unique program, you can keep your employees healthier, while enhancing and protecting their lives. When you do healthy right, you save big on your business's health care costs.



Teladoc®

Teladoc is a less costly option for your employees to receive quality health care. This may help you lower your overall claims costs and save money for your members and your business.

* Advantage plans pay benefits for network services only. PPO plans pay benefits for both in- and out-of-network services.

For use, September 1, 2020, and later effective dates.

SEE REVERSE SIDE FOR PLAN BENEFITS

your health plan benefits available with Meritain Health HSA-Compatible plans

All employer-established health benefit plans meet the standards set by the Affordable Care Act.

Stop-loss options	Aggregate Deductible	Based on total expected claims, calculated based on the census of your group and other factors such as number of members, age, gender, etc.		
	Specific Deductible	• \$6,500 • \$10,000 • \$15,000	• \$20,000 • \$25,000 • \$30,000	• \$40,000 • \$50,000 • \$100,000
Group member plan options	Deductible	• \$2,800 / \$5,600 in-network deductible ¹ • \$4,000 / \$8,000 out-of-network deductible ^{1, 2}		
	Coinsurance	In-network 0%, out-of-network 30% ²		
	Out-Of-Pocket Maximums <i>Includes deductible is two times the individual.</i>	• In-network 0%, out-of-network 30% ² • Out-of-network \$19,350 / \$38,700 ²		
	Office Visits <i>(In-network copay)</i>	• \$40 primary care physician after deductible • \$60 specialist after deductible • \$75 urgent care after deductible		
	Hospital and Surgery Charges	• Inpatient Admission: \$500 per day after deductible • Inpatient Physician / Surgeon fee: \$250 copay after deductible		
	Ambulance	\$75 copay after deductible		
	Outpatient Advance Imaging	\$125 copay after deductible		
	Prescription Drugs <i>(generic / preferred / non-preferred)</i>	Rx Copay: \$20 / \$50 / \$75 copay after deductible		
	Emergency Room Visit <i>Note: Copay waived if admitted</i>	\$250 copay after deductible		
	Inpatient Rehab	Applies to deductible		
	DME	\$100 copay after deductible		
	Retail Health Clinic	\$40 copay after deductible		
	Diagnostic X-ray and Diagnostic Lab	• \$50 copay • \$25 copay		
	Outpatient Physical Medicine / Chiropractic Care	• \$60 copay after deductible	• 20 visits per plan year for chiropractic care • Limited to 30 visits per plan year	
	Acupuncture and Naturopathy <i>(optional benefit)</i>	• \$60 copay after deductible • 12 visits per plan year for acupuncture • 12 visits per plan year for naturopathy	• All visits apply towards the 30 visits per plan year for Outpatient Physical Medicine / Chiropractic Care	
	Subacute Rehab & Nursing Facility	\$100 per day - Limited to 31 visits per plan year		
	Home Health Care	• Applies to deductible - Limited to 30 visits per plan year		
	Outpatient Mental/Behavioral Health and Substance Abuse	Groups 50 and under: • \$40 copay after deductible limited to 40 visits per plan year	Groups over 50: • \$40 copay after deductible	
	Inpatient Mental/Behavioral Health and Substance Abuse	Groups 50 and under: • \$500 copay per day after deductible • Limited to 30 visits per plan year	Groups over 50: • \$500 copay per day after deductible	
Infertility Treatments	Groups with 50 total employees and under: Not covered Groups with more than 50 total employees: Covered up to a maximum of \$10,000 per plan year			
TELADOC® <i>(Optional for all plan designs)</i>	Consultations at no additional cost to members.			

1 Family deductible is two times the individual. 2 Not available for Advantage plans, no out-of-network benefits.

Not available in WA or AK. PRODUCT AVAILABILITY VARIES BY STATE.

Allstate Benefits Self-Funded Program provides tools for employers owning small to mid-sized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. For employers in the Allstate Benefits Self-Funded Program, stop-loss insurance is underwritten by: Integon National Insurance Company in CT, NY and VT; Integon Indemnity Corporation in FL; and National Health Insurance Company in all other states where offered.

ABGH_1064 (Rev. 08/2021) © 2021 Allstate Insurance Company. www.allstate.com or allstatebenefits.com