

# GHI Alliance<sup>SM</sup>

Cost-Effective Health Care Coverage



## Open Enrollment Program

*Programs underwritten by:*  
Group Health Incorporated ("GHI")  
441 Ninth Avenue  
New York, New York 10001



## **A TRADITION OF SERVICE**

For more than 70 years, GHI has pioneered affordable health insurance programs. GHI and its wholly-owned subsidiary, GHI HMO\*, provide a full range of medical, hospital, dental, mental health, prescription drug, and vision coverage options, along with administrative services only (ASO) and network leasing arrangements to more than 2.6 million individuals.

You can count on GHI to provide you with cost-effective health insurance, now and in the future.

## **CHOOSE GHI**

With GHI, you now have the opportunity to enroll in individual health coverage through the GHI Alliance<sup>SM</sup> family of health insurance programs.

GHI's health insurance specialists have designed these programs specifically to meet the needs of people like you. Each one offers quality coverage at an affordable price. You choose the program that's right for your budget and your situation.

Best of all, providers in over 93,000 locations have joined GHI in the effort to provide cost-effective, quality health benefits. This enormous network gives you and your family access to health services virtually anywhere in New York State and in many New Jersey and Connecticut communities—at a surprisingly reasonable cost.

## **THE CHOICE IS YOURS — THE GHI ADVANTAGE**

The GHI Alliance family of insurance programs uses GHI's network of participating providers to control costs and to offer services—while giving you complete freedom of choice. You can even use non-network providers to receive most covered services, although using the network usually saves money. So although you'll usually pay more outside the network, the choice of provider is up to you for most covered services.

With GHI, you get:

- **Cost control.** Each GHI participating provider has agreed to accept GHI's fee schedule or negotiated reimbursement rates as payment in full. So for most covered services, you pay nothing when you use a GHI participating provider. For specific services, you are responsible for a small copayment or deductible. There are no claim forms to be filed and GHI pays the participating provider directly.

In addition, GHI's Coordinated Care professionals work with participating and non-participating providers to make sure the benefits you're receiving are medically necessary and cost-effective. When you are considering potentially costly care such as a planned inpatient hospital admission or surgery, you must call the Coordinated Care Program to be eligible for full benefits. And if you suffer a particularly traumatic long-term injury or illness, a case manager from our Complex Case Management program will help you maximize your benefits for necessary care.

\* GHI HMO Select, Inc., doing business as GHI HMO, is a wholly-owned Article 44 H.M.O. subsidiary of Group Health Incorporated (GHI).

- **Convenience and choice.** Covered services are usually accessible in-network at a convenient time and place for you. And because GHI reimburses participating providers directly, there's virtually no paperwork and no out-of-pocket costs other than required copayments or deductibles. You can choose the same provider, or different providers for each service. And you don't even have to use the participating provider network—you can choose any qualified provider for most covered services. However, your out-of-pocket expenses will usually increase when you use a non-participating provider.
- **Quality.** When you choose GHI, you choose quality health benefits. The programs provide coverage for a broad range of services. In addition, each participating physician must be board-certified or board-eligible and demonstrate appropriate credentials, including licensure, hospital affiliations, and evidence of malpractice insurance. GHI only reimburses participating providers for services within the scope of their license. GHI also receives reports about all participating providers regarding subscriber complaints, discipline by a licensing board, suspension or sanction by a governmental agency, or criminal or unethical behavior. This rigorous screening process helps to ensure network quality standards.

Choose from two quality health insurance programs:

- GHI Alliance Value
- GHI Alliance 365-Day Hospital Program.

As the comparison on the next page shows, both GHI Alliance programs offer you a broad range of benefits. You select the benefits program that meets your needs at a cost you can afford.

**Benefits Comparison: GHI Alliance Value and GHI Alliance 365-Day Hospital Insurance Programs**

<b>Hospital Benefits</b>	<b>GHI Alliance Value</b>	<b>GHI Alliance 365-Day Hospital</b>
365 days inpatient coverage	•	•
Maternity care	•	•
Outpatient emergency care	•	•
Outpatient ambulatory surgery	•	•
Inpatient psychiatric care		•
Outpatient substance abuse treatment	•	•
Complex Case Management	•	•
Outpatient hospital-based dialysis	•	•
Home care visits	•	•
Hospice care	•	•
GHI Centers of Specialized Care	•	
Inpatient substance abuse detox treatment		•
Inpatient admissions for physical therapy		•
Referred ambulatory care	•	•
<b>Medical-Surgical Benefits</b>		
In-hospital surgery/out-of-hospital surgery	•	
Well-baby and well-child care	•	
Mammography and pap smear screenings	•	
Emergency ambulance (ground) services	•	
Durable Medical Equipment	•	
Private duty nursing	•	
Prescription drug coverage	•	

Benefits are subject to all terms, conditions, limitations, and exclusions contained in the GHI insurance contract(s), including but not limited to caps on the number of days, visits, or dollars payable for a particular covered service.

## **GHI ALLIANCE<sup>SM</sup> VALUE**

No one should be without affordably priced health insurance protection that includes hospital and medical coverage. With this in mind, GHI offers GHI Alliance<sup>SM</sup> Value, a health insurance program designed specifically to offer individuals this essential coverage.

The GHI Alliance Value health insurance program provides basic hospital and basic medical insurance as defined by the New York State Insurance Department. **Please note: the GHI Alliance Value Program does not cover home and office visits except for covered well-child care visits.**

### **Hospital Benefits**

Except where indicated, hospital benefits are paid in full for the services listed when obtained through GHI's participating hospital network. Services provided in a non-participating hospital are covered up to GHI's allowed charge.

- 365 days per single hospital confinement. Includes inpatient semiprivate room and board and other covered hospital and medical supplies, facilities, services, and equipment customarily furnished and billed by hospitals.
- Preadmission testing.
- General and special in-hospital nursing care other than private duty nursing.
- Complete obstetrical (maternity) care for all covered females, including prenatal, delivery and postnatal care. The mother may remain in the hospital up to 48 hours after a regular delivery and 96 hours after a caesarean delivery. Inpatient stays will be extended if medically necessary. If enrollment in the program is terminated during pregnancy, benefits will not be provided after coverage under the program has ended. Routine nursery care of the newborn during the covered portion of the mother's hospital confinement for maternity will be covered under either a Self Only or Self and Family enrollment. Other care of an infant who requires treatment will be covered only if the infant is covered under a Self and Family enrollment.
- Infertility: GHI will cover services for the diagnosis and treatment of correctable medical conditions that result in infertility.
- Outpatient emergency room services are covered. You pay a \$50 copayment per person, per visit. The emergency room services must be for care of a medical or behavioral condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, possessing an average knowledge of medicine and health, could reasonably expect the absence of immediate medical attention to result in (A) placing the health of the person afflicted with such condition in serious jeopardy; (B) serious impairment to such person's bodily functions; (C) serious dysfunction of any bodily organ or part of such person; or (D) serious disfigurement of such person.
- Ambulatory surgery in an outpatient hospital setting.
- Up to 60 visits per person for outpatient substance abuse treatment per calendar year. Up to 20 of these visits may be used by covered family members who require related family counseling.
- Complex Case Management, which allows GHI case managers to help manage your benefits for appropriate treatment for major illnesses or injuries.

- Outpatient hospital-based dialysis.
- Up to 40 home care visits per person per calendar year.
- Up to 210 days of hospice care per person per lifetime.
- Mammography and pap smear screenings.
- Treatment under the GHI Centers of Specialized Care program.
- Referred ambulatory care, including laboratory tests, physical therapy, diagnostic x-rays, and chemotherapy. Lab tests and x-rays require a \$25 copayment.

## Medical-Surgical Benefits

### Participating Provider Reimbursement

- Physician and other services:
  - Paid in full through a participating provider, subject to the cost-sharing described in the chart below.
- In-hospital and out-of-hospital surgery and in-hospital medical care.
- Well-baby and well-child care visits provided in accordance with the prevailing clinical standards of the American Academy of Pediatrics and certain pediatric immunizations.
- Diagnostic x-rays, other radiological procedures, and laboratory services. You pay only a \$20 copayment per provider per date of service.
- Maternity care.
- Infertility: GHI will cover services for the diagnosis and treatment of correctable medical conditions that result in infertility.
- Mammography and pap smear screenings.
- Radiation therapy and chemotherapy.
- Durable Medical Equipment, up to a calendar year maximum of \$10,000 per person. You pay only a \$100 per calendar year deductible per person for equipment. This benefit is only available through a GHI participating provider.
- Private duty nursing. The first 96 hours are not covered for private duty nursing. After the first 96 hours, you are covered up to 80% of the allowed charge after the deductible has been met, up to \$5,000 maximum per person per year.

### Non-Participating Provider Reimbursement for Medical-Surgical Benefits

<b>Annual Deductible</b>	\$250 per individual per calendar year	\$500 per family per calendar year
<b>GHI Pays</b>	GHI-CBP schedule reimbursement after the deductible(s) is satisfied. You are responsible for any difference between GHI's payment and the provider's charge.	
<b>Stop Loss</b>	After you pay \$10,000 of eligible out-of-pocket expenses, GHI Alliance Value pays 100% of GHI's Allowed Charges	
<b>Benefits Maximum per Covered Person</b>	Annual: \$100,000 of covered expenses	Lifetime: \$1,000,000 of covered expenses

## GHI Alliance Value Prescription Drug Benefits

GHI Alliance Value also provides you prescription drug coverage, as shown in the chart below. All retail prescription drug benefits must be obtained through GHI participating pharmacies at more than 60,000 retail locations, including most major chains. As a result, most GHI subscribers will easily find a participating pharmacy convenient to their home or workplace. Mail order drugs must be obtained from GHI's mail order prescription drug vendor.

	<b>Retail Program</b>	<b>Mail Order Program</b>
	Generally for drugs prescribed to treat an acute condition	Drugs prescribed for ongoing or chronic conditions
<b>Number of Days Dispensed</b>	<b>Participating Pharmacy</b> 30-day supply	<b>Participating Pharmacy</b> 90-day supply
<b>Deductible</b>	\$50 deductible per person per calendar year	None
<b>GHI Pays</b>	100% of the Allowed Charge after deductible and copayment(s)	100% after applicable copayment
<b>You Pay</b>	Generic drugs: \$10 copayment  Preferred drugs with generic equivalents: \$10 copayment plus difference in price between brand and generic  Preferred drugs without generic equivalents: \$10 copayment	Generic drugs: \$8 copayment  Preferred drugs: \$15 copayment
<b>Annual Benefits Maximum</b>	\$5,000 per person for retail and mail order drugs combined	

GHI Alliance Value, GHI policy form PLH-DPC-710, et. al., meets the minimum standards for basic hospital insurance and basic medical insurance as defined by the New York State Department of Insurance. It does not provide major medical insurance. The expected benefit ratio for this policy is 85 percent. This ratio is the portion of future premiums that the company expects to return as benefits when averaged over all people with this policy.



## **GHI ALLIANCE<sup>SM</sup> 365-DAY HOSPITAL PROGRAM**

This affordable benefits program offers attractive hospital benefits including semiprivate room and board, general nursing care, emergency care and preadmission testing. The program also covers such services as maternity care, hospice care, and alcoholism/substance abuse treatment.

### **Covered Inpatient Benefits**

Under this program, GHI provides 365 days of hospital services per single hospital confinement. This coverage is available for services rendered by general hospitals in and out of New York State. These inpatient hospital services are covered:

- Inpatient semiprivate room and board, including special diet and nutritional therapy.
- General and special nursing care other than private duty nursing.
- Use of surgical operating and recovery rooms and related services, supplies and equipment, including anesthesia.
- Use of intensive care/special care units and related services, supplies and equipment.
- Oxygen and other inhalation therapy services and supplies.
- Approved drugs and medications for in-hospital use.
- X-rays, laboratory, pathological examinations, radiation therapy, nuclear therapy and chemotherapy.
- Diagnostic studies during a covered hospital stay.
- Other medical, surgical or related services and supplies customarily provided by the hospital (unless excluded from the contract).
- Up to 30 days of inpatient physical therapy, physical medicine or physical rehabilitation per person per year, if the need for these services is the primary cause of hospitalization.
- Complete obstetrical (maternity) care for all covered females, including prenatal, delivery and postnatal care. The mother may remain in the hospital up to 48 hours after a regular delivery and 96 hours after a caesarean delivery. Inpatient stays will be extended if medically necessary. If enrollment in the program is terminated during pregnancy, benefits will not be provided after coverage under the program has ended. Routine nursery care of the newborn during the covered portion of the mother's hospital confinement for maternity will be covered under either a Self Only or Self and Family enrollment. Other care of an infant who requires treatment will be covered only if the infant is covered under a Self and Family enrollment.
- Infertility: GHI will cover services for the diagnosis and treatment of correctable medical conditions that result in infertility.
- Up to five (5) days of care per person per calendar year are covered for inpatient substance abuse detoxification.
- Inpatient psychiatric care: 30 days per person per calendar year for confinements for a mental, nervous or emotional disorder.
- Complex Case Management, which allows a GHI case manager to help manage benefits for appropriate treatment for major illnesses or injuries.

## Covered Outpatient Benefits

GHI covers the following outpatient care in general hospitals, unless otherwise noted:

- Outpatient emergency room services are covered. You pay a \$50 copayment per person per visit. The emergency room services must be for care of a medical or behavioral condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, possessing an average knowledge of medicine and health, could reasonably expect the absence of immediate medical attention to result in (A) placing the health of the person afflicted with such condition in serious jeopardy, or in the case of a behavioral condition placing the health of such person or others in serious jeopardy; (B) serious impairment to such person's bodily functions; (C) serious dysfunction of any bodily organ or part of such person; or (D) serious disfigurement of such person.
- Hospital/surgical facilities relating to minor surgery.
- Preadmission testing.
- Mammography and pap smear screenings.
- Infertility: GHI will cover services for the diagnosis and treatment of correctable medical conditions that result in infertility.
- Dialysis for kidney failure: home treatment or outpatient treatment in a hospital-based or approved freestanding facility.
- Hospice care: up to 210 days per person per lifetime.
- Home care: up to 40 visits per person per calendar year.
- Alcoholism and substance abuse treatment: up to 60 outpatient visits per person per calendar year. Up to 20 of these visits may be used by covered family members for related family therapy.
- Referred ambulatory care, including laboratory tests, physical therapy, diagnostic x-rays and chemotherapy.

GHI Alliance 365-Day Hospital Program, GHI policy form PLH-DPC-510, et. al., meets the minimum standards for basic hospital insurance as defined by the New York State Department of Insurance. It does not provide basic medical or major medical insurance. The expected benefit ratio for this policy is 85 percent. This ratio is the portion of future premiums that the company expects to return as benefits when averaged over all people with this policy.

### HOW DO I SIGN UP?

Enrolling in the GHI Open Enrollment health insurance program of your choice is easy. Simply complete the enclosed application and return it to GHI. You will be billed after your application is processed.

If you have any questions about these programs, our representatives are available Monday through Friday between 9:00 AM and 5:00 PM. Please call 866-444-4995 for additional information.

*This booklet contains only general information. Each program is subject to the specific terms, conditions, exclusions, and limitations of your contract. To receive full benefits, you must follow the guidelines of GHI's Coordinated Care program.*





**FOR ADDITIONAL INFORMATION CALL: 1-866-444-4995**

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