

PriorityAllowance for small groups

Empowering employees with the ways—and the means to live their healthiest

For employers who want to empower their employees to better manage their health, PriorityAllowance[™] offers an upfront allowance to cover commonly used services. It's a turn-key solution with an automatic allowance and copays for popular in-network health care services (both in and out of state).¹

Ideal for employers who:

- Are looking to move to a higher deductible to achieve premium savings
- ✓ Want better upfront benefits for often-used services
- ✓ Want an alternative to an HRA or HSA
- Have many members not reaching their annual deductibles

How it works

PriorityAllowance provides members with an allowance that can be used to cover copays for the following health care services:

- PCP visits
- · Specialist visits
- Urgent care/Retail health clinic visits
- Labs
- Virtual care services
- Outpatient substance use/behavioral health services

Each family member gets their own allowance. Unused allowance balances do not carry over from year to year.

Per person Plan Metal tier Deductible **Network solutions** allowance **Priority**Allowance Gold \$300 \$1,500/\$3,000 (E)² HMO/POS 1500 **Priority**Allowance Silver \$5,500/\$11,000 (E)² \$130 HMO/POS 5500

You can add PriorityAllowance as a new option alongside your current plan offerings

PriorityAllowance is available either as a fully funded or Optimized LFO product.

Learn more. Talk to your independent agent or Priority Health representative today.

¹The allowance is funded by Priority Health. ²(E) "Embedded" means the plan contains an individual limit (stop) within the family total. The embedded stop occurs when an individual's deductible or out-of-pocket limit has been satisfied, but the family deductible or out of pocket limit hasn't.

Plan options





Benefit	PriorityAllowance 1500 (\$300) Gold	PriorityHMO 1000	PriorityHMO 1500	PriorityAllowance 5500 (\$130) Silver	PH HMO 4750
Deductible	\$1,500	\$1,000	\$1,500	\$5,500	\$4,750
Total Out of Pocket	\$8,200	\$8,150	\$8,200	\$8,500	\$8,700
Member Coinsurance	20%	20%	20%	40%	35%
Coinsurance Max	N/A	\$4,500	\$4,500	N/A	N/A
PCP Visit	Allowance applies. \$50	\$20	\$20	Allowance applies. \$55	\$45
Specialist Visit	Allowance applies. \$85	\$50	\$50	Allowance applies. \$90	\$85
Emergency Room Services	20% AD	\$250 AD	\$250 AD	40% AD	\$250 AD
Rx (Tier 1a, Tier 1b, Tier 2, Tier 3, Tier 4, Tier 5)	\$5/\$30/\$75/ \$95/20%/20%	\$5/\$30/\$70/ \$90/20%/20%	\$5/\$30/\$70/ \$85/20%/20%	\$5/\$35/\$95/ \$150/20%/25%	\$5/\$35/\$100/ \$150/20%/25%
Other benefits					
Laboratory Services	Allowance applies. \$50	\$30	\$30	Allowance applies. \$55	\$55
X-rays and Diagnostic Imaging	20%	\$75	\$80	40%	\$105
Adult vision	\$15	\$15	\$15	\$15	\$15
Urgent Care Centers or Facilities	Allowance applies. \$85	\$85	\$85	Allowance applies. \$85	\$85
Rehabilitative Services	20% AD	\$50 AD	\$50 AD	40% AD	\$85 AD
Allowance Amount	\$300 of copay coverage per member	n/a	n/a	\$130 of copay coverage per member	n/a
How it compares *Savings can vary by rating region	Comparison plan*	5.3% increase on premium	2.6% increase on premium	Comparison plan*	2.5% increase on premium
	Allowance covers: 6 PCP visits or 3 Specialist visits + \$45 or 6 Lab visits or 3 Urgent Care visits + \$45			Allowance covers: 2 PCP visits + \$20 or 1 Specialist visits + \$40 or 2 Lab visits + \$20 or 1 Urgent Care visit +\$45	