

Summary of Benefits and Coverage: What this Plan Covers & What it Costs

Coverage Period:

* For more information about limitations and exceptions, see the plan or policy document at PriorityHealth.com.

About these Coverage Examples:

Treatments shown are just examples of how this plan might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your providers charge, and many other factors. Focus on the cost sharing amounts (deductibles, co-payments, and co-insurance) and excluded services under this plan. Use this information to compare the portion of costs you might pay under different

The ____ would be responsible for the other costs of these EXAMPLE covered services.