Faculty Admin Hourly Orange

Simply Blue℠ HSA PPO ASC

Note to ASC groups

Coverage for: Plan Type:

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary.

copayment coinsurance deductible

	Services You May Need		Limitations, Exceptions, & Other Important

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)