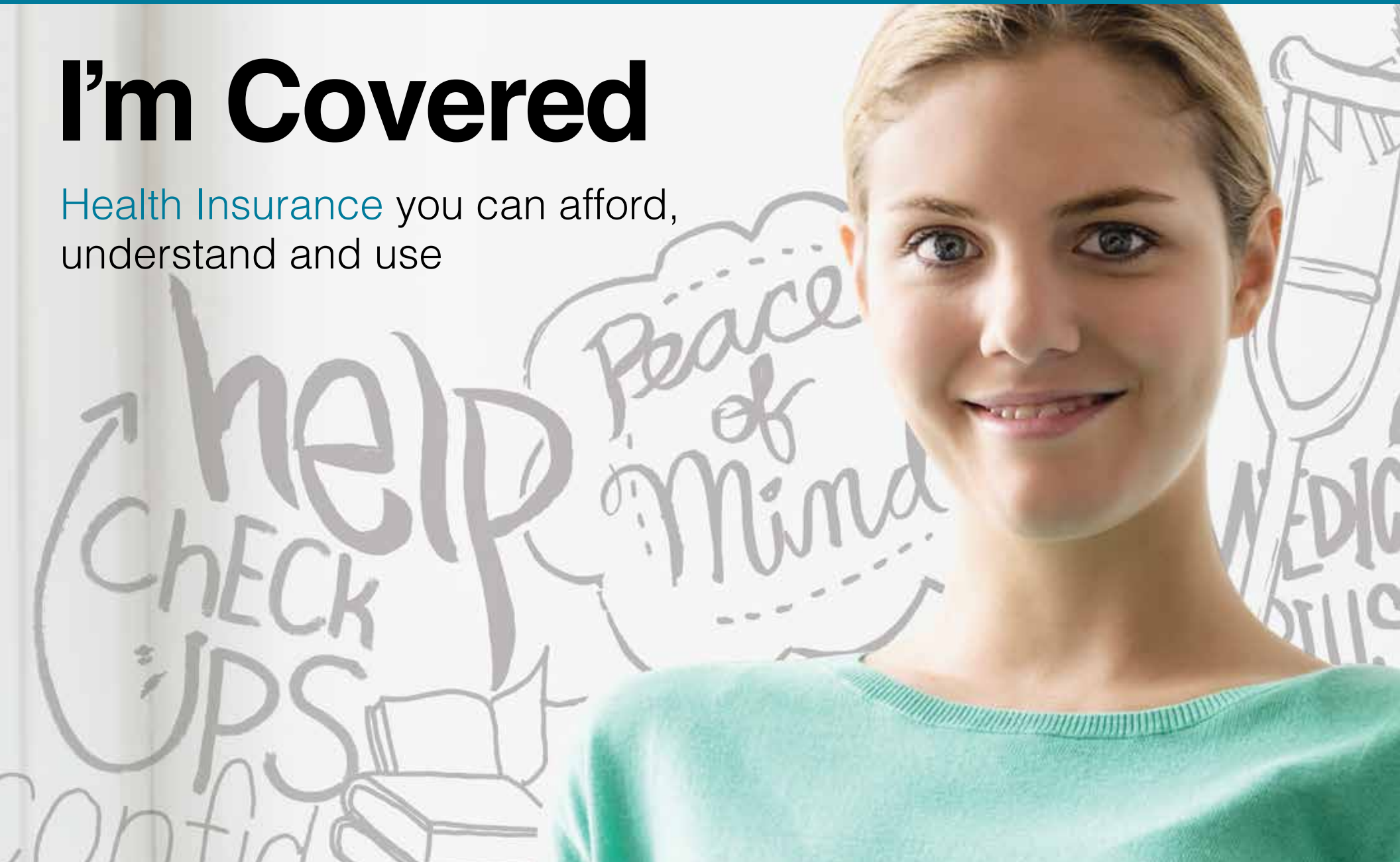


I'm Covered

Health Insurance you can afford,
understand and use



CareSource Just4Me™ Puts Health Insurance within Your Reach

CareSource Just4Me™ is a Qualified Health Plan in the Health Insurance Marketplace. We strive to make health care coverage easy to understand and use. We offer the choice of individual or family health insurance coverage with certain optional adult dental and vision benefits.

CareSource Just4Me™ is making quality health care more affordable and easier to access. Many people who are uninsured will qualify for subsidies from the federal Health Insurance Marketplace. In addition, you can get health insurance if you have a pre-existing condition.



Many Ohioans qualify for subsidies from the federal Health Insurance Marketplace on the CareSource Just4Me™ plans!

Source: Healthcare.gov

CareSource Just4Me™ provides a package of health care benefits, including:

- Primary care and specialty physician services
- Outpatient services
- Hospitalization
- Emergency services
- Maternity and newborn care
- Mental health and substance abuse treatment
- Prescription drug coverage
- Preventative and wellness services
- Rehabilitative and habilitative services and devices
- Laboratory services
- Chronic disease management
- Covered clinical trials
- Podiatry care
- Pediatric health and vision services
- Optional dental and vision coverage for adults

WARNING: IF YOU OR YOUR FAMILY MEMBERS ARE COVERED BY MORE THAN ONE HEALTH CARE PLAN, YOU MAY NOT BE ABLE TO COLLECT BENEFITS FROM BOTH PLANS. EACH PLAN MAY REQUIRE YOU TO FOLLOW ITS RULES OR USE SPECIFIC DOCTORS AND HOSPITALS, AND IT MAY BE IMPOSSIBLE TO COMPLY WITH BOTH PLANS AT THE SAME TIME. BEFORE YOU ENROLL IN THIS PLAN, READ ALL OF THE RULES VERY CAREFULLY AND COMPARE THEM WITH THE RULES FOR YOUR EXISTING PLAN.

Choose CareSource Just4Me™ so you can tell your family and friends, “I’m covered!” Our friendly Call Center representatives are just a phone call away with personal assistance when you need it. Just call **1-800-479-9502**.



CARESOURCE JUST4ME™

CareSource is among the largest nonprofit health plans in the United States, serving nearly one million members. Founded in 1989, our mission is to make a difference in people's lives by improving their health care. We put people ahead of profits. This is the essence of our company – members come first.

BENEFITS OF HEALTH INSURANCE

Care when you need it.

You no longer have to put off getting health care when you or your family needs it.

Help to stay healthy.

They say an ounce of prevention is worth a pound of cure. The no-cost health screenings and immunizations we offer help you stay healthy. Plus, **CareSource.com** gives you advice on exercise, healthy recipes and how to stretch your budget.

Savings.

With the Affordable Care Act, you must have proof of health insurance or pay a penalty. Why pay to not have insurance? Put your dollars toward a CareSource Just4Me™ health insurance plan to keep you and your family healthy!

MORE FEATURES OF CARESOURCE JUST4ME™:

- \$0 copayment for generic medications (Ultra Gold and Silver plans)
- Coverage for Urgent Care Services so you can see a doctor when you need these services
- Coverage for those with pre-existing health conditions
- No annual or lifetime limits on the dollar value of essential health benefits
- No deductible for prescriptions (Ultra Gold and Silver plans)
- Access to a focused network of primary care providers, specialists and leading hospitals
- Preventative services are covered at no cost. These include screening mammograms, Pap tests, and vision and hearing screenings.
- Healthy living programs (to help you deal with conditions such as diabetes and asthma)
- CareSource24®, a nurse advice line to help you make health care decisions 24 hours a day, seven days a week



Our Health Services Providers

CareSource Just4Me™ is offered in major metropolitan areas throughout Ohio, as well as many rural areas. In order to purchase our plans, you must live in one of the counties listed under each of the service areas below.

In order to have your health care services covered by the CareSource Just4Me™ plan, you must get your health care from a provider in our network, except in cases of emergency or when traveling out of our service area.

You can search our provider network to find a primary care physician. For the most up-to-date provider list, visit [CareSource.com/Just4Me](https://www.caresource.com/Just4Me).

CareSource offers a wide variety of physicians, including but not limited to: pediatricians, primary care physicians, general surgeons, cardiac surgeons, thoracic surgeons, orthopedists, neurosurgeons, oncologists, ophthalmologists, urologists, allergists, pulmonologists, dermatologists, infectious disease physicians, endocrinologists, otolaryngologists (ENT), gastroenterologists, nephrologists, obstetricians and gynecologists, physical medicine and rehabilitation physicians, podiatrists, psychiatrists, audiologists, chiropractors.



SERVICE AREAS AND COUNTIES INCLUDED ▲

Akron Area

- Ashland
- Portage
- Stark
- Summit
- Wayne

Cleveland Area

- Ashtabula
- Cuyahoga
- Geauga
- Lake
- Lorain
- Medina

Dayton Area

- Clark
- Greene
- Miami
- Montgomery
- Preble

Cincinnati Area

- Adams
- Brown
- Butler
- Clermont
- Clinton
- Hamilton
- Highland
- Warren

Columbus Area

- Delaware
- Fairfield
- Fayette
- Franklin
- Licking
- Madison
- Morrow
- Pickaway
- Union

Toledo Area

- Defiance
- Fulton
- Henry
- Lucas
- Wood

Chillicothe Area

- Pike
- Ross

Youngstown Area

- Columbiana
- Mahoning
- Trumbull



Your Financial Responsibility

To help choose your health insurance plan, it is important to know what your insurance company will pay for and what you are responsible for paying when you use your health care benefits. It helps to understand the following insurance terms.

- A **premium** is the fee you pay to have health insurance, regardless of how much you use it. It is usually paid monthly. The premium is based on personal information like your age, tobacco usage, where you live, and if you choose to add adult dental and vision coverage. You can find the premium for the CareSource Just4Me™ plan of your choice online.
- There are other costs that you pay when you use your health insurance benefits. These costs are summarized below for our plans:
 - An **annual deductible** is the amount you pay each year for some services before your insurance company starts to pay. The annual deductible does not apply to all services. For example, you do not have to meet your annual deductible to visit your primary care provider or a specialist such as a heart doctor. However, you might have to pay a copayment for these doctor visits.
 - **Copayments** (or **copays**) are set amounts you pay each time you use some types of health services, such as going to see your primary care provider or specialist. Your copayments do not count towards your annual deductible.
 - **Coinsurance** is the percent of a health bill you pay when you use some types of health services. The insurance company pays the other part of the health bill. Coinsurance applies after you have met your annual deductible. For example, if Just4Me's allowed amount for a hospital stay is \$1,000, your coinsurance payment of 30% would be \$300.
 - An **out-of-pocket** limit is the most you could have to pay for covered health services during a benefit year, no matter how much you use your benefits. Sometimes this is called maximum out-of-pocket. Out-of-pocket costs include any copays, coinsurance and deductibles you have paid during the year.

Sometimes the benefits offered by two plans are exactly the same; the only thing that changes is the cost of the premium and the costs you pay when you use your health insurance benefits. For example, Ultra Gold and Silver plans cover the same health care services. However, Silver plans offer lower monthly premiums, but have higher annual deductible, copays, coinsurance and out-of-pocket limits.

Ultra Gold plans have a higher monthly premium, but lower annual deductible, copays, coinsurance and out-of-pocket limits. An Ultra Gold plan might be good for people who have chronic health conditions and expect frequent illnesses, injuries or other high-cost health services throughout the year. Though they pay more on a regular basis for their premium, they pay less when they use their covered health services during the year.



Finding the Plan that's Right for You

CareSource Just4Me™ offers choices to meet your needs. Our website, [CareSource.com/Just4Me](https://www.caresource.com/Just4Me), guides you through these choices to help you find the plan that is right for you. It allows you to explore our plans, see if you are eligible for subsidies through the Health Insurance Marketplace, and apply those subsidies to the CareSource Just4Me™ plan that's best for you or your family. It is important to realize the 10 essential health benefits offered by each plan are the same. A few key questions can help you decide which plan is right for you:

1. Do you want insurance just for yourself or your family?
2. Do you want to add adult dental and vision coverage?
3. Do you qualify for subsidies through the Health Insurance Marketplace?
4. How often do you think you will use your health care benefits?

Our website, [CareSource.com/Just4Me](https://www.caresource.com/Just4Me), will guide you through this process and show you more information about the plans you can choose from. We offer a range of deductibles, out-of-pocket limits, copayments and coinsurance levels based on your preference and the subsidies for which you are eligible, as shown on the following charts.

WHAT WOULD YOU PAY WHEN YOU USE YOUR HEALTH BENEFITS?

INDIVIDUAL PLANS	Annual Deductible	Out-Of-Pocket Limit	Coinsurance	Primary Care Visit Copay*	Specialist Visit Copay*	Emergency Copay**
Ultra Gold	\$1,000	Medical \$1,750 Pharmacy \$1,500	10%	\$20	\$50	\$250 after deductible
Silver	\$3,500	\$6,500	30%	\$20	\$50	\$500 after deductible
Note: Plans listed in purple below are only eligible to those who qualify for subsidies through the Health Insurance Marketplace. You can determine if you might qualify for subsidies at CareSource.com/Just4Me .						
Silver 1	\$3,500	\$4,850	30%	\$10	\$50	\$300 after deductible
Silver 2	\$1,000	\$2,000	10%	\$0	\$0	\$300 after deductible
Silver 3	\$200	\$650	0%	\$0	\$0	\$300 after deductible
Bronze	\$6,600	\$6,600	10%	\$40	\$80	\$500 after deductible
Note: If you choose to add adult dental and vision coverage to your health plan, your premium will increase but your medical expenses would be based on the same costs listed above. Your expenses when using your adult dental and vision coverage are described on page 12.						

FAMILY PLANS	Annual Deductible	Out-Of-Pocket Limit	Coinsurance	Primary Care Visit Copay*	Specialist Visit Copay*	Emergency Copay**
Ultra Gold	\$2,000	Medical \$3,500 Pharmacy \$3,000	10%	\$20	\$50	\$250 after deductible
Silver	\$7,000	\$13,000	30%	\$20	\$50	\$500 after deductible
Note: Plans listed in purple below are only eligible to those who qualify for subsidies through the Health Insurance Marketplace. You can determine if you might qualify for subsidies at CareSource.com/Just4Me .						
Silver 1	\$7,000	\$9,700	30%	\$10	\$50	\$300 after deductible
Silver 2	\$2,000	\$4,000	10%	\$0	\$0	\$300 after deductible
Silver 3	\$400	\$1,300	0%	\$0	\$0	\$300 after deductible
Bronze	\$13,200	\$13,200	10%	\$40	\$80	\$500 after deductible
Note: If you choose to add adult dental and vision coverage to your health plan, your premium will increase but your medical expenses would be based on the same costs listed above. Your expenses when using your adult dental and vision coverage are described on page 12.						

* You do not have to meet the annual deductible before seeing a primary care doctor or specialist doctor.

** You do need to meet the annual deductible and pay a copayment for emergency room visits.

WHAT WOULD YOU PAY FOR MEDICINE?

PLANS (INDIVIDUAL + FAMILY)	Preventive Medicines	Generic Medicines	Preferred Brand Medicines	Non-preferred Brand Medicines	Specialty Medications
Ultra Gold	\$0	\$0	\$120	\$160	40% Coinsurance (up to \$300)
Silver	\$0	\$0	\$50	\$125	40% Coinsurance (up to \$300)
Silver 1	\$0	\$0	\$40	\$125	40% Coinsurance (up to \$300)
Silver 2	\$0	\$0	\$25	\$70	40% Coinsurance (up to \$150)
Silver 3	\$0	\$0	\$5	\$20	25% Coinsurance (up to \$150)
Bronze	\$0	\$20	\$75	\$125	40% Coinsurance (up to \$300)

For a complete list of drugs available visit [CareSource.com/Just4Me](https://www.caresource.com/Just4Me).

WHAT OTHER COINSURANCE AND COPAYMENT WOULD I PAY IF I USE MY HEALTH BENEFITS?

Types of Services/Supplies that Require Coinsurance	
<ul style="list-style-type: none"> • Ambulance Services • Dental Services related to accidental injury • Laboratory Services, Diagnostic Mammogram or X-ray • Home Health Care Services • Home Infusion Therapy • Hospice Services • Inpatient Professional Services • Medical Supplies, Durable Medical Equipment and Appliances • Outpatient Services • Therapy Services 	<p>You pay: coinsurance after deductible:</p> <p>Ultra Gold 10%</p> <p>Silver 30%</p> <p>Silver 1 30%</p> <p>Silver 2 10%</p> <p>Silver 3 0%</p> <p>Bronze..... 10%</p>
Medical Services that Require Copays	
<ul style="list-style-type: none"> • Outpatient Advanced Imaging – CT/PET Scans, MRI 	<p>You pay: copayment after deductible:</p> <p>Ultra Gold\$75</p> <p>Silver\$150</p> <p>Silver 1\$150</p> <p>Silver 2\$150</p> <p>Silver 3\$150</p> <p>Bronze.....\$150</p>
<ul style="list-style-type: none"> • Inpatient Facility Services 	<p>You pay: copayment per inpatient stay after deductible:</p> <p>Ultra Gold\$250</p> <p>Silver\$500</p> <p>Silver 1\$300</p> <p>Silver 2\$300</p> <p>Silver 3\$300</p> <p>Bronze.....\$500</p>

WHAT OTHER COINSURANCE AND COPAYMENT WOULD I PAY IF I USE MY HEALTH BENEFITS? (CONTINUED)

<ul style="list-style-type: none"> • Skilled Nursing Facility for Physical Medicine and Rehabilitation 	<p>You pay: copayment per inpatient stay after deductible:</p> <p>Ultra Gold\$100 Silver\$100 Silver 1\$100 Silver 2\$100 Silver 3\$100 Bronze.....\$250</p>
<ul style="list-style-type: none"> • Urgent Care Services 	<p>You pay: copayment:</p> <p>Ultra Gold\$75 Silver\$50 Silver 1\$50 Silver 2\$0 Silver 3\$0 Bronze.....\$80</p>
<ul style="list-style-type: none"> • Pediatric Vision Services – an annual exam is provided at no charge. Copayments would apply only if additional office visits are needed. 	<p>You pay: copayment:</p> <p>Ultra Gold\$50 Silver\$50 Silver 1\$50 Silver 2\$0 Silver 3\$0 Bronze.....\$80</p>
<p>Services paid based on service setting:</p> <ul style="list-style-type: none"> • Diabetic Education, Equipment and Supplies • Habilitative Services • Infertility Services • Physical Medicine and Rehabilitation • Reconstructive Services • Sterilization • Surgical Services • Temporomandibular or Craniomandibular Joint Disorder and Craniomandibular Jaw Disorder • Transplant: Human Organ and Tissue Transplant (Bone Marrow/Stem Cell) Services 	<p>You pay: Copayments/coinsurance are based on the setting where the covered services are received.</p> <p>These services may be provided in a doctor’s office, an outpatient center or a hospital. Your copay or coinsurance amount depends on the type of setting where these services are provided.</p>





Limitations and Exclusions

Some limitations and exclusions apply to CareSource Just4Me™ plans.

- CareSource Just4Me™ does not cover acupuncture, bariatric surgery, cosmetic surgery or hearing aids.
- Any combination of network benefits for skilled nursing facility/inpatient rehabilitation facility services is limited to ninety (90) days per calendar year.
- Copayments or coinsurance apply to allergy testing, MRA, MRI, PET scan, CAT scan, nuclear cardiology imaging studies, non-maternity related ultrasound services, pharmaceutical injections and drugs (except immunizations covered under “preventative care services”) received in a physician’s office. When the only charge from a physician office visit is for allergy injections, allergy serum, diagnostic services or other therapy services, then any copayments are waived.
- Any combination of benefits for home health care services is limited to one hundred (100) visits per calendar year. One visit consists of no more than four (4) hours of skilled care services.
- Dental and vision services for adults are covered only if optional coverage is selected.

Limitations and Exclusions (CONTINUED)

- If different types of therapy services are performed during one physician office service or outpatient service, then each different type of therapy service will be considered a separate therapy visit. Each therapy visit will count against the applicable maximum visits listed below. For example, if both a physical therapy service and a spinal manipulation service are performed during a physician office service or outpatient service, they will count as both one physical therapy visit and one spinal manipulation visit.
 - Separate twenty (20) visit limits for physical therapy, occupational therapy, speech therapy and pulmonary rehab. Thirty-six (36) visit limit for cardiac rehab. Twelve (12) visit limit for spinal manipulation.

This is a partial list of exclusions.
For a complete list, see the CareSource Just4Me™
Evidence of Coverage document at
CareSource.com/Just4Me.





Optional CareSource Just4Me™ Dental + Vision Benefits

CareSource Just4Me™ Dental + Vision provides optional dental and vision benefits for adult members when you purchase this additional coverage. The cost for these optional services is included in the premium and in the copayments and coverage limits listed below. (Note: your costs for using your health care benefits would be the same as those listed in the charts on pages 5 and 6.) Vision coverage for children is included as an essential health benefit. The optional Dental + Vision benefit includes the following services and copays when used:

Dental

Coverage limit: \$750 per year (includes basic and major restorative dental services)

- Preventive dental services (cleaning and exams): \$20 copay per visit. Limit of two visits per year.
- Basic dental (x-ray and fillings): \$20 copay per visit.
- Major restorative dental (impactions and dentures): 40% coinsurance per visit.

Vision Coverage

Copays for eyeglasses and contact lenses are \$25. Coverage limit: \$150 per year.

- Single vision lenses
- Bifocals
- Trifocals
- Lenticular lenses
- Contact lenses

Vision coverage for children is included in all of our plans as an essential health benefit.

Some exclusions may apply. See the CareSource Just4Me™ Evidence of Coverage document for details at [CareSource.com/Just4Me](https://www.caresource.com/Just4Me).

How to Enroll, Determine your Cost, Qualify for Subsidies and Verify your Providers are In-Network

Our website is designed to help you find the plan that's right for you and your family. It will ask you questions and take you to the Health Insurance Marketplace website to determine if you qualify for subsidies. Based on the answers you give, it will allow you to compare the CareSource Just4Me™ plans you can choose from. Just follow these steps:

- Go to **CareSource.com/Just4Me**.
- Create a Just4Me account by entering a new username and password.
- Once you login to your CareSource Just4Me™ account you can:
 - Explore plan options.
 - Determine your eligibility for discounts.
 - Choose an individual or family plan.
 - Get covered.
 - Verify your existing providers are in-network.
- Click on the Health Insurance Marketplace link to determine if you qualify for subsidies and check your eligibility. This button will open the Health Insurance Marketplace website within the CareSource site.
- Create a username and password on the Health Insurance Marketplace.
- Complete the eligibility form using the personal financial information you've collected. Allow 20–40 minutes to complete this process. The Marketplace will determine your eligibility and if you qualify for a subsidy. It will also let you know if you or your family members qualify for health care coverage through Medicaid, Medicare or CHIP (Children's Health Insurance Program).
- Once complete, the Marketplace will automatically return you to CareSource Just4Me™ to apply any subsidies, calculate your costs and compare plans.
- You can then select your plan and choose your payment method. You can pay your premium then, or wait until later.



What You Will Need

Collect the following information for each family member you are enrolling before starting your eligibility form on the Health Insurance Marketplace:

- Social Security number or document number for legal immigrants
- Employer and income information, for example, wage and tax statements from pay stubs or W-2 forms
- If currently covered by health insurance, the policy number
- If eligible for employer health insurance coverage (even if the coverage is through another person, for example, a spouse or a parent), information about the employer's health insurance plan

Prefer to enroll by paper or phone? Our Member Services staff will be happy to help you! Just call toll-free **1-800-479-9502**.

Open enrollment begins on November 15, 2014.



P.O. Box 8738
Dayton, OH 45401-8738

CareSource.com/Just4Me



The CareSource Just4Me™ policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, visit CareSource.com/Just4Me or call **1-800-479-9502**.

You may terminate coverage under this Plan by providing at least fourteen (14) days prior notice to us. Such termination shall be effective fourteen (14) days after we receive your request for termination unless otherwise agreed upon in accordance with 45 CFR 155.430.



CareSource™

JUST4ME™



**Did you get married,
have a baby, recently
move or switch jobs?**



CareSource™
Health Care with Heart

*This is a solicitation for health insurance. *Some exclusions and limitations may apply. Benefits and costs vary by plan. See the CareSource Just4Me Evidence of Coverage or Schedule of Benefits document for details at CareSourceJust4Me.com. CareSource Just4Me does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.*

CareSource Just4Me™ is a Qualified Health Plan issuer in the  **Health Insurance Marketplace**

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OH-EXCM-205
ODI File & Use 2/13/2015

Did you know you can enroll in CareSource Just4Me after open enrollment has ended?

CareSource Just4Me Special Enrollment Period

After open enrollment, you can enroll in CareSource Just4Me™ if you qualify for a special enrollment period (SEP) through the Health Insurance Marketplace. If you have a life change event you will qualify for SEP. SEP is going on now.

Life Change Events Include:

Getting married

Having a baby

Moving outside your insurer's coverage area

Gaining citizenship

Leaving incarceration

Adopting a child or placing a child for adoption or foster care

Gaining status as member of an Indian tribe. Members of federally recognized Indian tribes can sign up for or change plans once per month throughout the year.

Important: Voluntarily ending coverage doesn't qualify you for a Special Enrollment period. Neither does losing coverage that doesn't qualify as minimum essential coverage.

Having a change in income or household status that affects eligibility for advance premium tax credits or cost-sharing reductions IF you are already enrolled in coverage through the Marketplace.

Losing other health coverage due to losing job-based coverage, divorce, the end of an individual policy plan year in 2014, COBRA expiration, aging off a parent's plan, losing eligibility for Medicaid or CHIP, and similar circumstances.

Why Choose CareSource Just4Me?

Low monthly premiums, low deductible and low copays

Low or No Copays for prescriptions with Silver* plans

Low primary care doctor copays

Free generic medications with Silver and Ultra Gold plans

Optional adult dental and vision coverages

Focused network of doctors and providers

CareSource24®, 24/7/365 nurse advice line



Do you qualify for Special Enrollment Period?

Call 1-800-479-9502 and we can help you through the application process.

Visit Healthcare.gov to complete your application and **choose CareSource Just4Me.**

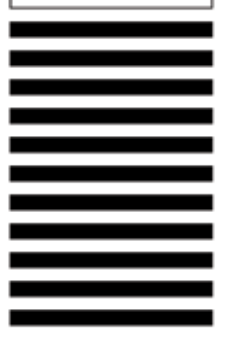


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UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 817 DAYTON OH

POSTAGE WILL BE PAID BY ADDRESSEE

ATTN: SALES
CARESOURCE
PO BOX 8738
DAYTON OH 45482-0459



Choose or Switch

Open enrollment starts
November 15, 2014 – February 15, 2015

Enroll in a 2015 CareSource Just4Me plan:
Visit CareSourceJust4me.com
Call 1-800-479-9502
(TTY: 1-800-750-0750 or 711)
Monday – Friday, 8 a.m. to 8 p.m. (EST)

If you are already enrolled in a health plan, you can switch plans during open enrollment or during a special enrollment period if you have a change in circumstance (*such as change in income, getting married or having a baby*).



Health Insurance Is Now Affordable

Health insurance covers you from the unexpected high costs of illnesses and injuries and gives you access to health care services when you need it.

The Health Insurance Marketplace (*sometimes referred to as the Health Insurance Exchange*) is an online marketplace that allows you to compare plans and purchase health insurance at a competitive rate.

Subsidies are available to help cover the cost, making health insurance affordable.

CareSource will help you through the process to make it easy and ensure you get the maximum subsidy to lower your monthly premium.



Choose CareSource® and join over a million members who receive their health care through us.

OH-EXCM-55a
ODI File & Use 10/24/2014

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CareSource Just4Me™ is a Qualified Health Plan issuer in the Health Insurance Marketplace or Schedule of Benefits document for details at CareSourceJust4Me.com. Some exclusions may apply. Benefits and costs may vary. See the CareSource Just4Me Evidence of Coverage health insurance. CareSource Just4Me does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations. This is a solicitation for



CareSource™

JUST4ME™

ADV-OH001/OH002(Rev. 9/14)-01

Choose CareSource Just4Me

CareSource Just4Me™ provides health insurance for those who need it most.

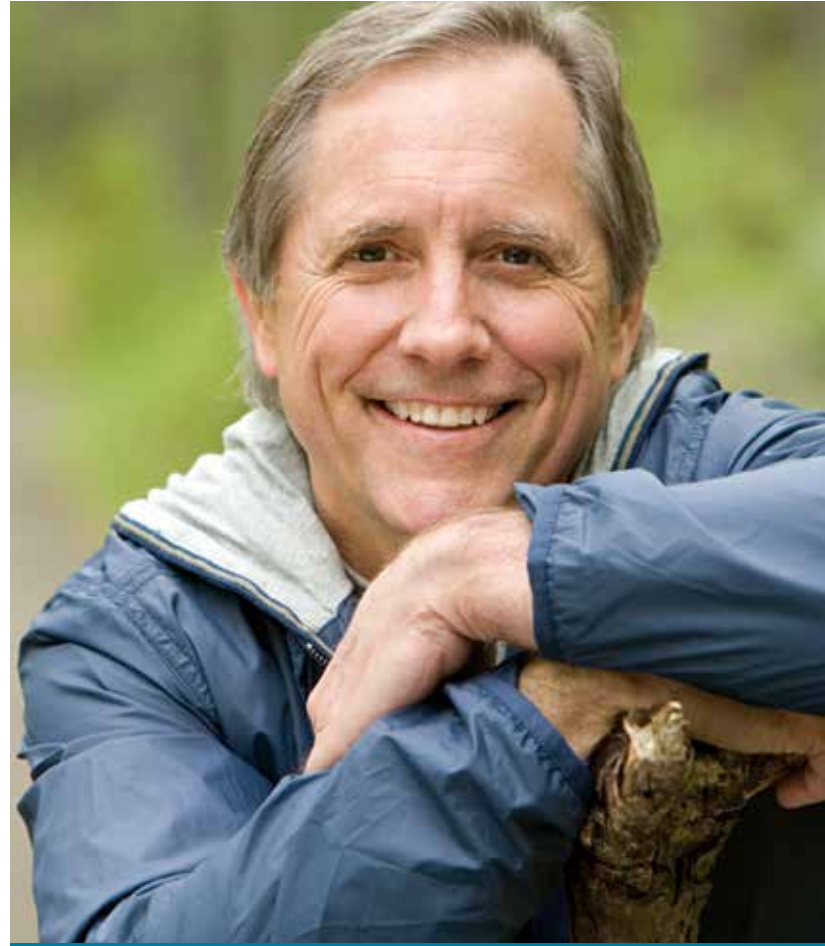
With CareSource Just4Me, you get quality health care across a focused network of doctors and providers. Our plans offer comprehensive individual or family coverage to fit your needs.

Plan features:

Low premiums, low annual deductible and low copays
Low copays for doctor (<i>primary care</i>) visits
Low or No copays for prescriptions with Silver* plans
Free generic medications with Silver and Ultra Gold plans
Optional adult dental & vision coverage (<i>such as cleanings and exams, eyeglasses and contact lenses</i>)
CareSource24®, 24/7/365 nurse advice line
Healthy living programs (<i>to help you deal with conditions such as diabetes and asthma</i>)

Essential health benefits:

Free preventive and wellness services (<i>such as mammograms, diabetes screenings, flu shots and more</i>)
Outpatient services (<i>such as primary care and specialty doctor visits, urgent care services, diagnostic testing and more</i>)
Hospitalization (<i>such as surgery</i>)
Prescription drugs
Emergency services
Mental health and substance use disorder services, including behavioral health treatment (<i>includes counseling and psychotherapy</i>)
Pediatric services
Maternity and newborn care
Laboratory services
Rehabilitative and habilitative services and devices (<i>to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills</i>)



Financial Assistance Is Available

Many people will qualify for health care tax credits, also referred to as subsidies. The tax credits can lower your monthly premium and out-of-pocket costs.

If your household income and size are within the ranges below, you may qualify for **subsidies**:

Number of people in your household					
1	2	3	4	5	6
\$16,105- \$46,680	\$21,707- \$62,920	\$27,310- \$79,160	\$32,913- \$95,400	\$38,516- \$111,640	\$44,119- \$127,880
Yearly Income					

Source: HHS – Office of the Assistant Secretary for Planning and Evaluation (ASPE)

Get affordable health insurance and avoid government penalties.

To view CareSource Just4Me covered counties, visit CareSourceJust4Me.com

CareSource Just4Me Plan Offerings

SILVER PLANS
Offer the highest potential for cost savings
Offer low premiums but have higher annual deductible, copays, coinsurance and out-of-pocket costs
Provide coverage for those who want the health insurance company to pay more of their health care costs and want additional coverage for unexpected illnesses and injuries

ULTRA GOLD PLANS
Offer premiums that are higher than Silver and Bronze plans
Offer lower out-of-pocket costs than our Bronze and standard Silver plans
Provide coverage for those who want the most comprehensive benefits and greatest protection for their health care
BRONZE PLANS
Offer the lowest premiums with highest out-of-pocket costs
Provide coverage for those who rarely go to the doctor, but want coverage for unexpected illnesses and injuries

Mail this card for more information about CareSource Just4Me.

First Name

Last Name

Address

City

State

Zip Code

Email

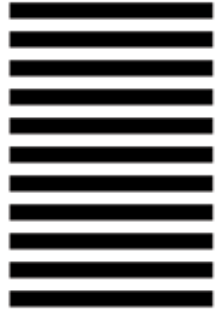
How would you like to receive additional information about CareSource Just4Me?

Mail

Email



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 817 DAYTON OH

POSTAGE WILL BE PAID BY ADDRESSEE

ATTN: SALES
CARESOURCE
PO BOX 8738
DAYTON OH 45482-0459



Choose or Switch

Open enrollment starts
November 15, 2014 – February 15, 2015

Enroll in a 2015 CareSource Just4Me plan:
Visit CareSourceJust4me.com
Call 1-877-806-9284
(TTY: 1-800-743-3333 or 711)
Monday – Friday, 8 a.m. to 8 p.m. (EST)

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Health Insurance Is Now Affordable

Health insurance covers you from the unexpected high costs of illnesses and injuries and gives you access to health care services when you need it.

The Health Insurance Marketplace (sometimes referred to as the Health Insurance Exchange) is an online marketplace that allows you to compare plans and purchase health insurance at a competitive rate.

Subsidies are available to help cover the cost, making health insurance affordable.

CareSource will help you through the process to make it easy and ensure you get the maximum subsidy to lower your monthly premium.



Choose CareSource® and join over a million members who receive their health care through us.

IN-EXCM-31a

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CareSource Just4Me™ is a Qualified Health Plan issuer in the Health Insurance Marketplace or Schedule of Benefits document for details at CareSourceJust4Me.com. Some exclusions may apply. Benefits and costs may vary. See the CareSource Just4Me Evidence of Coverage health insurance. CareSource Just4Me does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations. This is a solicitation for health insurance.

CareSource™
Health Care with Heart



CareSource™

JUST4ME™

Choose CareSource Just4Me

CareSource Just4Me™ provides health insurance for those who need it most.

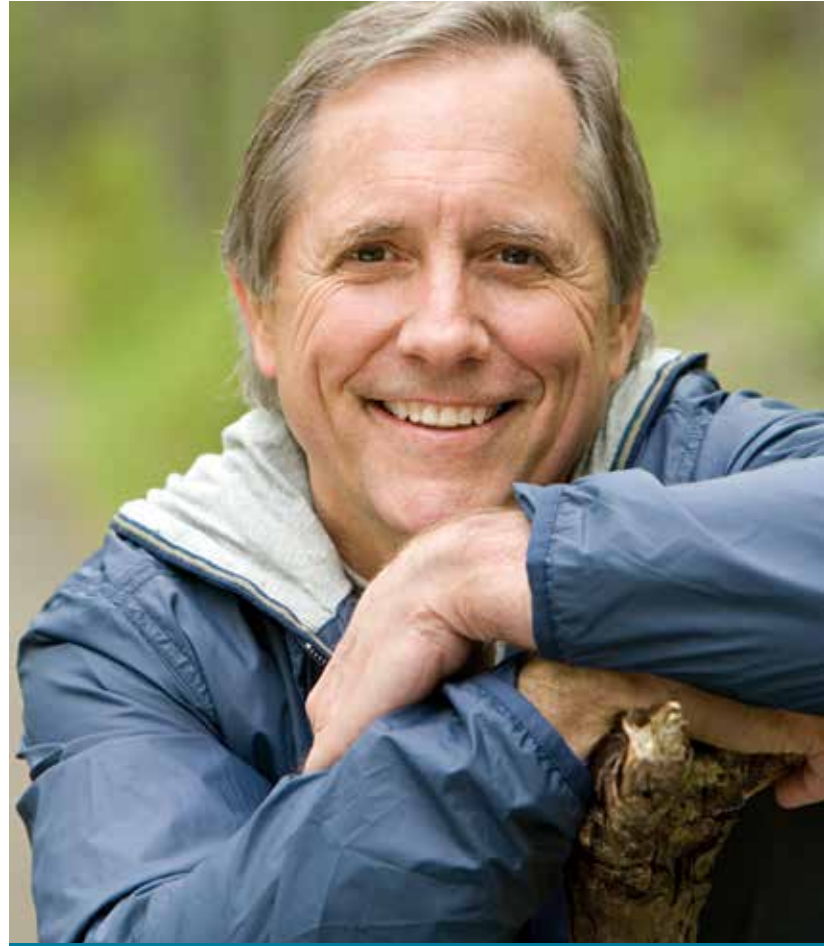
With CareSource Just4Me, you get quality health care across a robust network of doctors and providers. Our plans offer comprehensive individual or family coverage to fit your needs.

Plan features:

Low premiums, low annual deductible and low copays
Low copays for doctor (<i>primary care</i>) visits
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Financial Assistance Is Available

Many people will qualify for health care tax credits, also referred to as subsidies. The tax credits can lower your monthly premium and out-of-pocket costs.

If your household income and size are within the ranges below, you may qualify for **subsidies**:

Number of people in your household					
1	2	3	4	5	6
\$11,670- \$46,680	\$15,730- \$62,920	\$19,790- \$79,160	\$23,850- \$95,400	\$27,910- \$111,640	\$31,970- \$127,880
Yearly Income					

Source: HHS – Office of the Assistant Secretary for Planning and Evaluation (ASPE)

Get affordable health insurance and avoid government penalties.

To view CareSource Just4Me covered counties, visit CareSourceJust4Me.com

CareSource Just4Me Plan Offerings

SILVER PLANS
Offer the highest potential for cost savings
Offer low premiums but have higher annual deductible, copays, coinsurance and out-of-pocket costs
Provide coverage for those who want the health insurance company to pay more of their health care costs and want additional coverage for unexpected illnesses and injuries

ULTRA GOLD PLANS
Offer premiums that are higher than Silver and Bronze plans
Offer lower out-of-pocket costs than our Bronze and standard Silver plans
Provide coverage for those who want the most comprehensive benefits and greatest protection for their health care
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Offer the lowest premiums with highest out-of-pocket costs
Provide coverage for those who rarely go to the doctor, but want coverage for unexpected illnesses and injuries

Mail this card for more information about CareSource Just4Me.

First Name

Last Name

Address

City

State

Zip Code

Email

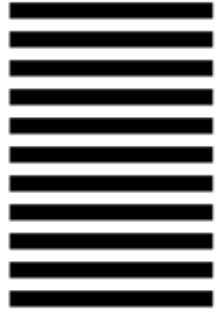
How would you like to receive additional information about CareSource Just4Me?

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NO POSTAGE
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UNITED STATES



BUSINESS REPLY MAIL
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POSTAGE WILL BE PAID BY ADDRESSEE

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CARESOURCE
PO BOX 8738
DAYTON OH 45482-0459



Choose or Switch

Open enrollment starts
November 15, 2014 – February 15, 2015

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KY-EXCM-29

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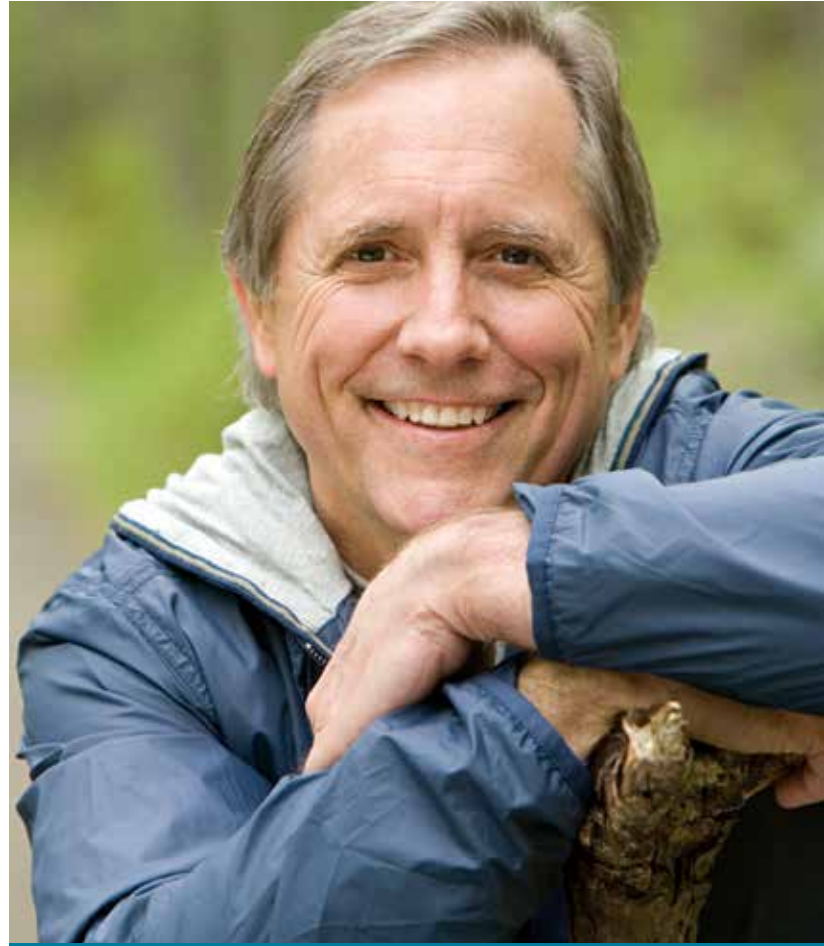
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CATASTROPHIC PLANS
Offer minimum coverage at the lowest premiums
Include three primary care visits per year at no cost and without meeting the deductible and have high out-of-pocket costs
Plans are only available to those under 30 years old

[Mail this card for more information about CareSource Just4Me.](#)

First Name

Last Name

Address

City

State

Zip Code

Email

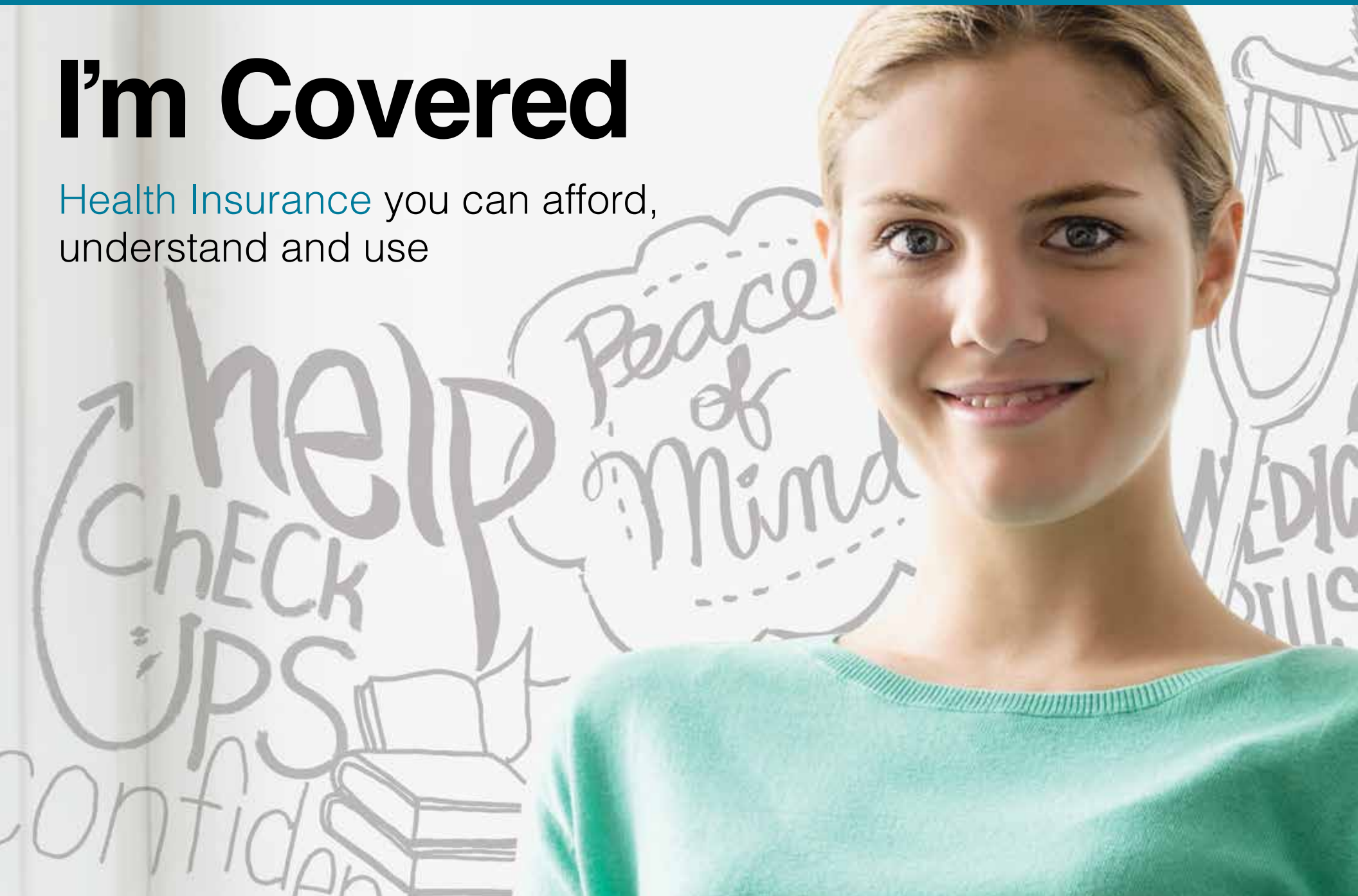
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 Email

I'm Covered

Health Insurance you can afford,
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When you use your health care benefits, you need to know what you must pay and what your insurance company will pay.

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An **annual deductible** is the amount you pay each year for some services before your insurance company starts to pay. The annual deductible does not apply to all services. For example, You do not have to meet your annual deductible to visit your primary care provider or a specialist such as a heart doctor. However, you might have to pay a copayment for these doctor visits.

Copayments (or **copays**) are set amounts you pay each time you use some types of health services, such as going to see your primary care provider or specialist. Your copayments do not count towards your annual deductible.

Coinsurance is the percent of a health bill you pay when you use some types of health services. The insurance company pays the other part of the health bill. Coinsurance applies after you have met your annual deductible.

An **out-of-pocket limit** is the most you could have to pay for covered health services during a benefit year, no matter how much you use your benefits. Sometimes this is called maximum out-of-pocket. Out-of-pocket costs include any copays, coinsurance and deductibles you have paid during the year.

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	Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)
	Maternity and newborn care

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A few key questions can help you decide which plan is right for you:

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3. How often do you think you will use your health care benefits?

Individual Plans	Annual Deductible	Out-of-Pocket Limit	Coinsurance	Primary Care Visit Copay	Specialist Visit Copay	Emergency Copay
Ultra Gold	\$1,000	\$1,750 (Medical) \$1,500 (Pharmacy)	10%	\$20*	\$50*	\$250 after deductible**
Silver	\$3,500	\$6,500	30%	\$20*	\$50*	\$500 after deductible**
Silver 1	\$3,500	\$4,850	30%	\$10*	\$50*	\$300 after deductible**
Silver 2	\$1,000	\$2,000	10%	\$0*	\$0*	\$300 after deductible**
Silver 3	\$200	\$650	0%	\$0*	\$0*	\$300 after deductible**
Bronze	\$6,500	\$6,600	10%	\$40*	\$80*	\$100 after deductible**
Catastrophic	\$6,600	\$6,600	0%	3 visits per year before deductible***	No charge after deductible***	No charge after deductible***

* You do not have to meet the annual deductible before seeing a primary care doctor or specialist doctor.

** You do need to meet the annual deductible and pay a copayment for emergency room visits.

*** You must meet the annual deductible to see a specialist doctor, visit the emergency room and if you exceed three primary care doctor visits per year.

Family Plans	Annual Deductible	Out-of-Pocket Limit	Coinsurance	Primary Care Visit Copay	Specialist Visit Copay	Emergency Copay
Ultra Gold	\$2,000	\$3,500 (Medical) \$3,000 (Pharmacy)	10%	\$20*	\$50*	\$250 after deductible**
Silver	\$7,000	\$13,000	30%	\$20*	\$50*	\$500 after deductible**
Silver 1	\$7,000	\$9,700	30%	\$10*	\$50*	\$300 after deductible**
Silver 2	\$2,000	\$4,000	10%	\$0*	\$0*	\$300 after deductible**
Silver 3	\$400	\$1,300	0%	\$0*	\$0*	\$300 after deductible**
Bronze	\$13,000	\$13,200	10%	\$40*	\$80*	\$100 after deductible**
Catastrophic	\$13,200	\$13,200	0%	3 visits per year before deductible***	No charge after deductible***	No charge after deductible***

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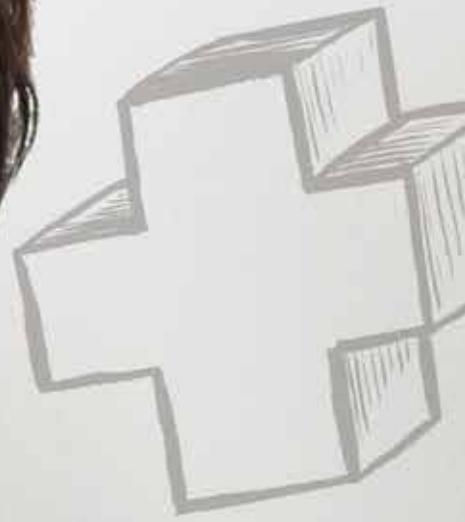
Plans (Individual + Family)	Preventive Medicines	Generic Medicines	Preferred Brand Medicines	Non-Preferred Brand Medicines	Specialty Medications
Ultra Gold	\$0	\$0	\$120	\$160	40% Coinsurance (up to \$300)
Silver	\$0	\$0	\$50	\$125	40% Coinsurance (up to \$300)
Silver 1	\$0	\$0	\$50	\$125	40% Coinsurance (up to \$300)
Silver 2	\$0	\$0	\$30	\$70	40% Coinsurance (up to \$150)
Silver 3	\$0	\$0	\$5	\$20	25% Coinsurance (up to \$150)
Bronze	\$0	\$20	\$75	\$125	40% Coinsurance (up to \$300)
Catastrophic	No charge after deductible*	No charge after deductible*	No charge after deductible*	No charge after deductible*	No charge after deductible*

* You do need to meet the annual deductible for medications.



WELL
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X-Ray

Choose or Switch to CareSource Just4Me

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November 15, 2014 – February 15, 2015

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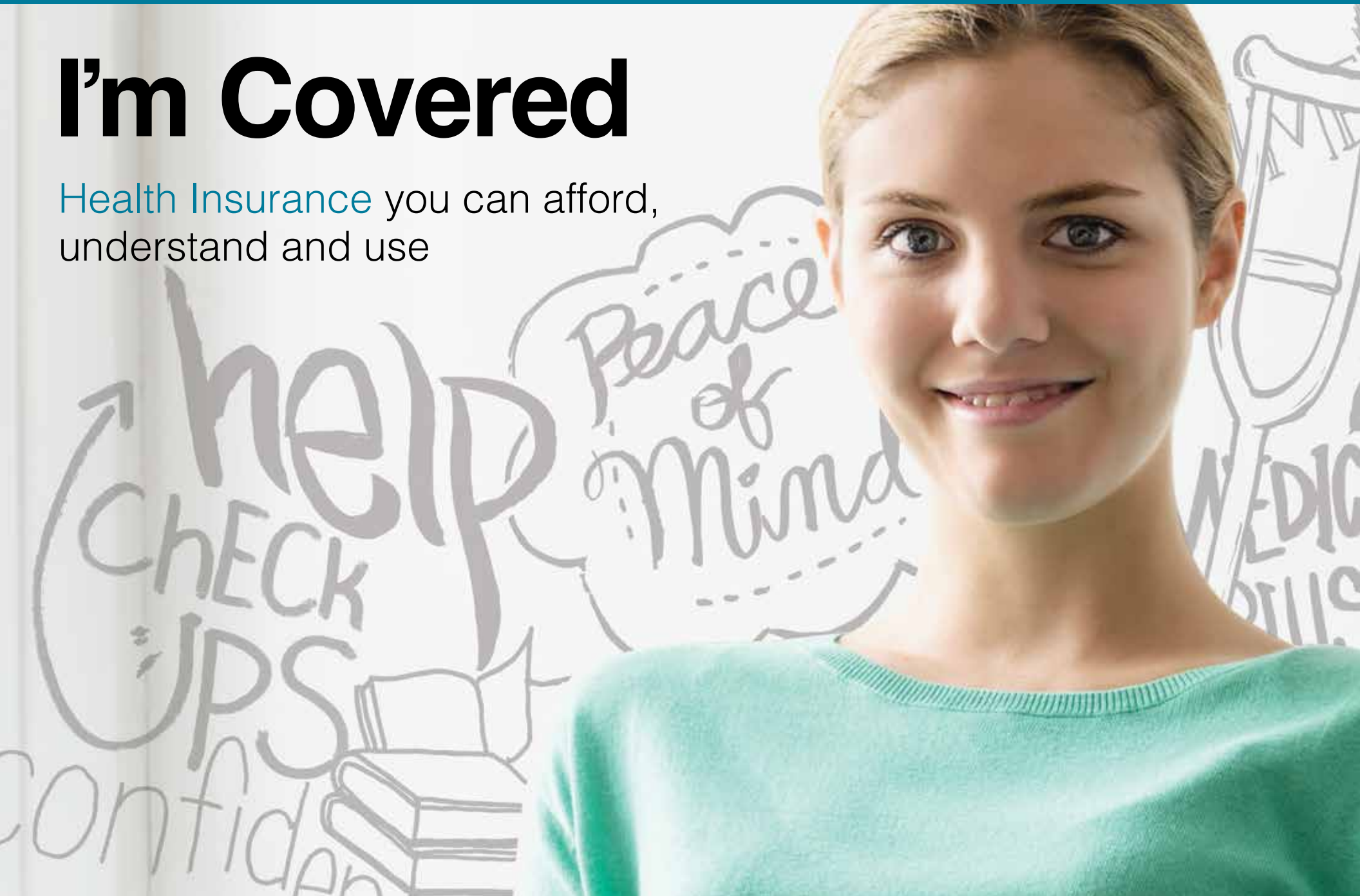
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An **out-of-pocket limit** is the most you could have to pay for covered health services during a benefit year, no matter how much you use your benefits. Sometimes this is called maximum out-of-pocket. Out-of-pocket costs include any copays, coinsurance and deductibles you have paid during the year.

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- Hospitalization (such as surgery)
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2. Do you want to add adult dental and vision coverage?
3. Do you qualify for subsidies through the Health Insurance Marketplace?
4. How often do you think you will use your health care benefits?

Individual Plans	Annual Deductible	Out-of-Pocket Limit	Coinsurance	Primary Care Visit Copay*	Specialist Visit Copay*	Emergency Copay**
Ultra Gold	\$1,000	\$1,750 (Medical) \$1,500 (Pharmacy)	10%	\$20	\$50	\$250 after deductible
Silver	\$3,500	\$6,500	30%	\$20	\$50	\$500 after deductible
Silver 1	\$3,500	\$4,850	30%	\$10	\$50	\$300 after deductible
Silver 2	\$1,000	\$2,000	10%	\$0	\$0	\$300 after deductible
Silver 3	\$200	\$650	0%	\$0	\$0	\$300 after deductible
Bronze	\$6,600	\$6,600	10%	\$40	\$80	\$500 after deductible

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Family Plans	Annual Deductible	Out-of-Pocket Limit	Coinsurance	Primary Care Visit Copay*	Specialist Visit Copay*	Emergency Copay**
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Silver 1	\$0	\$0	\$40	\$125	40% Coinsurance (up to \$300)
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Optional CareSource Just4Me Adult Dental + Vision Benefits

CareSource Just4Me Adult Dental + Vision provides optional dental and vision benefits for adults when you purchase this additional coverage. The cost of these services is added to your premium. Copayments and coverage limits are listed below.

Dental Coverage

Coverage limit: \$750 per year (includes basic and major restorative dental services).

Preventive dental (cleanings and exams): \$20 copay per visit. Limit of two visits per year.

Basic dental (X-rays and fillings): \$20 copay per visit.

Major restorative dental (impactions and dentures): 40% coinsurance per visit.

Vision Coverage

Copays for eyeglasses and contact lenses are \$25. Coverage limit: \$150 per year.

Single vision lenses

Bifocals

Trifocals

Lenticular lenses

Contact lenses

Vision coverage for children is included in all of our plans as an essential health benefit.



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