

# MightyWELL Health Plan

## CONSUMER DIRECTED HEALTHCARE



MightyWELL.us

Empower “You” the Client to Choose Healthcare Based on Quality and Price

### PLAN PRINCIPALS

- Affordable - Underwriting & Benefit Options result in Big Savings versus ACA plans

Obamacare Premium - 2019 Average

Individual \$ 7,188

Family \$20,578

MightyWELL Premium - 50 yr old non-smoker

Individual \$ 3,660

Family \$ 9,600

- Individually Owned** - Insured Controls the Policy. Coverage follows the Individual when job changes occur. Not tied to employer, NO COBRA.
- Transparent** - Benefits are Paid by Defined Schedule to Provider or Directly to Insured. CPT: Current Procedural Terminology - RBRVS: Resource Based Relative Value Scale
- Consumer Choice** - Insured Chooses which Health Provider is Best, NO Network restrictions. Coverage is Valid in all 50 States. Travel to get Healthcare Everywhere in the US.

### PLAN FEATURES

- Lifetime Maximum \$5 Million
- Three Calendar year Maximums to Choose from: \$250K, \$500K, \$1 Million
- Multiple Benefit Levels to Choose from: Value, Preferred, Premier
- Unique Zero Deductible, Copay, Coinsurance on all Outpatient Benefits
- Flexible Hospital/Inpatient Deductible to Match Budget: \$0 to \$10K
- Guaranteed Renewable to age 65
- Annual Premium Increase 3% last six years - Not Guaranteed
- Available for Individuals & Groups

 **MultiPlan**  
PHCS Extended Network for  
Additional Savings

 **TELADOC**  
Unlimited Service by  
Web and Phone 24/7

**karis360**  
Patient Advocate and  
Bill Negotiation

Call Susan Cataldo (404) 808-6970

Version: 9/2020

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Match Valuable Benefit Options to Fit your Budget

### PREFERRED BENEFIT HIGHLIGHTS



#### Doctor Visit & Pharmacy Benefit

- Choose your Doctor from All US Licensed Physicians
- Pays \$120 for 18 visits per Insured per calendar year, includes 6 chiropractor visits - No Deductible or Copay
- Pays \$150 for 2 Specialists visits per calendar year
- Generic Drugs \$20 per day Brand Name Drugs \$40 per day



#### Preventative Wellness Care Benefit

- Benefit starts 60 days after the Policy effective date
- Pays \$250 for Mammograms per calendar year & \$500 for a Colonoscopy
- Pays Additional \$250 for other Preventative Services per calendar year



#### Surgery Benefit

- Outpatient & Inpatient
- Pays Outpatient Facility: General Anesthesia \$3,500 per day or Local \$1,500 per day
- Pays Surgeons & Anesthesiologist based on Scale to Match Area Costs - RBRVS
- Additional Coverage for Pathology, Radiology, Injection & Diagnostic Services



#### Hospital Inpatient Benefit

- Hospital per day benefit up to \$4,500 for Injury and \$3,000 for Sickness
- Hospital ICU benefit up to \$4,500 per day for 20 days per calendar year
- Optional First Hospital Admission \$6,350 Lump Sum - per calendar yr, 24 hr stay required\*



#### Accident and Emergency Benefit\*

- Pays up to \$4K of Actual Expenses for up to 45 days from the Accident date
- Ambulance air or ground pays up to \$10K of Actual Expenses
- Optional Benefit Pays up to \$26K of Actual Expenses



#### Catastrophic Diagnosis Benefit\*

- Pays Lump Sum up to \$40K per Adult and \$10K per child\*
- Pays up to \$250K Additional of Actual Expenses per calendar year
- Coverage for Internal Cancer, Heart Attack, Stroke, Organ Transplant, Renal Failure

Calendar yr maximum \$500K, \$0 Deductible & Copay on Outpatient. Optional benefits cost additional  
\*Separate Policy - Pays Benefits in addition to others

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