



Real Affordable Health Care  
**Benefit Summary**  
& Pricing Guide



**NO Exchanges | NO Government | NO High Premiums**

**For Owner Operators**

[www.ihahealth.com](http://www.ihahealth.com) | **1 (888) 376-9811**

8:00am - 8:00pm EST (Mon-Fri)



# Benefit Summary

## GROUP MAJOR MEDICAL

“Real Affordable Health Care”. We have simplified the health insurance buying process by offering two comprehensive insurance plans specifically for the Owner Operator. The coverages and rates are set and are the same for all ages. IHA Health has taken the uncertainty of the future Obamacare, or its replacement, by offering two very affordable plans through a respected A- (Excellent) A.M. Best Rated carrier and a best in class Aetna Provider Network. Unlike Obamacare, Owner Operators can get coverage all year. **NO Exchanges...NO Government...NO Inflated Premiums.** Exclusive to IHA Health.

### Minimal Essential Coverage Plus (Indemnity)

ACA approved coverage that combines a fully insured indemnity plan with a 100 percent preventive care plan. The indemnity plan is designed to help you deal with covered medical expenses that includes, but not limited to, physician visits, emergency room visits, hospitalization, lab, x-ray and Rx Benefits. There are no co-pays or deductibles. This coverage is very affordable and satisfies the Individual Mandate.

### Ameritas Dental

IHA Members are provided two affordable coverage options that provide a network of over 400,000 dentists nationwide. No Waiting Period for Basic or Major Services. Preventive services not deducted from the annual maximum. Two Plan Options available:

- Low Plan = \$500 Annual Benefits Maximum
- High Plan = \$1,000 Annual Benefits Maximum with a \$1,000 lifetime orthodontic benefits

### Ameritas Vision

Partners with the VSP Choice Network providing over 29,000 doctors and 50,000 access points. Members' coverage includes annual eye exams, lenses, frames, contacts and an average saving of 20-25 percent on out-of-pocket eye care services

### Colonial Life Accident Coverage

Provides guarantee issue off the job accident benefit coverage including doctor, emergency room, hospital, physical therapy and follow-up. Designed to help cover expenses that your health plan may not fully cover such as deductible and co-pays.

### Colonial Life Critical Illness

Provides guarantee issue up to \$20,000 Lump Sum Benefit in the event of a heart attack, stroke, heart failure, invasive cancer, organ failure or kidney failure.

### Colonial Life Term Life Insurance

Contingent guarantee issue level premium 10 or 20 year term with policy limits up to \$100,000. Additional benefits include: Family Coverage Option, Waiver of the premium if owner becomes disabled before age 65 and policy is renewed up to age 100 without having to provide evidence of good health.

### HealthJoy (Advocacy and Transparency)

HealthJoy guides you to improved health and happiness by providing content that can help you control your health and guide you to better lifestyle choices. HealthJoy also allows you to “shop” services you may need such as MRI and ultrasounds by providing you access to search and price procedures in your direct area!

### HealthJoy (Telemedicine)

HealthJoy provides access to doctors to obtain treatment, get prescriptions 24/7 via their phone or mobile app. Why sit in waiting rooms for hours, around others who are sick and spend who knows how much for a visit when you can take care of more than 70 percent of all doctors' office visits by simply using HealthJoy.

# Owner Operator Insurance Program

## IHA Group Major Medical Plan

In Network Benefit Summary	HSA 5000	HSA 5000 Enhanced
Network	Aetna Signature Network	Aetna Signature Network
Individual Deductible (In Network)	\$5,000	\$5,000
Family Deductible (In Network)	\$10,000	\$10,000
Individual Max Out-of-Pocket (In Network)	\$6,450	\$6,450
Family Max Out-of-Pocket (In Network)	\$12,900	\$12,900
Accident Benefit	Deductible and Coinsurance	\$,000 (Colonial Plan Pays)
Critical Illness Benefit (*)	Deductible and Coinsurance	\$10,000 (Colonial Plan Pays)
Preventive Care	Paid at 100% - No copay or Deductible	Paid at 100% No Copay or Deductible
Lifetime Maximum	No Maximum	No Maximum
Primary Care Visit	20% after Deductible to Max	20% after Deductible to Max
Specialist Visit	20% after Deductible to Max	20% after Deductible to Max
Diagnostic X-ray & Lab Services	20% after Deductible to Max	20% after Deductible to Max
Complex Diagnosis (MRI, CT Scan, Etc.)	20% after Deductible to Max	20% after Deductible to Max
Maternity & Maternity Care	20% after Deductible to Max	20% after Deductible to Max
Urgent Care	20% after Deductible to Max	20% after Deductible to Max
Emergency Room	20% after Deductible to Max	20% after Deductible to Max
Inpatient & Outpatient Hospital	20% after Deductible to Max	20% after Deductible to Max
Physical, Speech and Occ Therapy	20% after Deductible to Max	20% after Deductible to Max
Transplants	20% after Deductible to Max	20% after Deductible to Max
Prescription Drug	20% after Deductible to Max	20% after Deductible to Max
Weekly Premium	HSA 5000	HSA 5000 Enhanced (*)
Owner Operator	\$76.00	\$84.00
Owner Operator + Child(ren)	\$158.00	\$170.00
Owner Operator + Spouse	\$136.00	\$147.00
Family	\$226.00	\$251.00

(\*) Based on Critical Illness rate on 45-year-old non-smoker.



## Additional Benefit Pricing

Weekly Pricing			
MEC PLUS	Value	Select	Premier
Owner Operator	\$41.85	\$51.60	\$64.10
Owner Operator + Spouse	\$70.81	\$88.57	\$115.31
Owner Operator + Child(ren)	\$64.25	\$79.75	\$101.50
Family	\$101.04	\$129.56	\$168.57
DENTAL *	Basic Plan	Preferred Plan	
Owner Operator	\$3.40	\$5.73	
Owner Operator + Spouse	\$6.95	\$11.70	
Owner Operator + Child(ren)	\$9.34	\$13.49	
Family	\$12.90	\$19.46	
VISION *	Basic Plan	Preferred Plan	
Owner Operator	\$1.90	N/A	
Owner Operator + Spouse	\$3.77	N/A	
Owner Operator + Child(ren)	\$4.64	N/A	
Family	\$5.50	N/A	
ACCIDENT	Basic Plan	Preferred Plan	
Owner Operator	\$3.26	\$4.40	
Owner Operator + Spouse	\$4.41	\$5.53	
Owner Operator + Child(ren)	\$4.75	\$6.13	
Family	\$5.90	\$6.76	
CRITICAL ILLNESS & LIFE	Varies per member. Call for rates.		
Owner Operator	-	-	
Owner Operator + Spouse	-	-	
Owner Operator + Child(ren)	-	-	
Family	-	-	

\* Dental and Vision in the following states are written through Colonial Life: AR, CT, FL, LA, ME, MT, NH, NV, NC, SC, UT and WA. Please call for rates.



1 (888) 376-9811 | [www.ihahealth.com](http://www.ihahealth.com)

8:00am - 8:00pm EST (Mon-Fri)