## 2024 Sentara Business**EDGE® Vantage Plans**

## Groups with 5-250 enrolled employees

This chart only summarizes standard covered expenses. Exclusions and limitations apply. Additional benefits may be available.



Plan Name	<b>DED</b> ( <b>In Net)</b> Individual Family	MOOP (In Net) Individual Family	PCP	VIRTUAL Consult	SPECIALIST	OUTPATIENT	INPATIENT	<b>ED</b> (In or OON)	ucc	PRESCRIPTION DRUG COVERAGE OPTION 1	PRESCRIPTION DRUG COVERAGE OPTION 2
Sentara Vantage 20/40	None	\$2,500 \$5,000	\$20	No charge	\$40	\$200	\$200/day (\$1,000 max)	\$350	\$40	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 25/50	None	\$3,000 \$6,000	\$25	No charge	\$50	\$300	\$250/day (\$1,250 max)	\$350	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 25/30%	None	\$3,000 \$6,000	\$25	No charge	\$50	30%	30%	40%	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 500/25/20%	\$500 \$1,000	\$7,500 \$15,000	\$25	No charge	\$50	20% AD	20% AD	30% AD	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 1000/25/20%	\$1,000 \$2,000	\$6,000 \$12,000	\$25	No charge	\$50	20% AD	20% AD	30% AD	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 1000/25/30%	\$1,000 \$2,000	\$6,200 \$12,400	\$25	No charge	\$50	30% AD	30% AD	40% AD	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 2000/25/30%	\$2,000 \$4,000	\$6,500 \$13,000	\$25	No charge	\$50	30% AD	30% AD	40% AD	\$50	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 3000/30/0%	\$3,000 \$6,000	\$6,500 \$13,000	\$30	No charge	\$60	No charge AD	No charge AD	\$350	\$75	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 4000/30/0%	\$4,000 \$8,000	\$6,500 \$13,000	\$30	No charge	\$60	No charge AD	No charge AD	\$350	\$75	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 4000/40/20%	\$4,000 \$8,000	\$7,500 \$15,000	\$40	No charge	\$80	20% AD	20% AD	30% AD	20% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)
Sentara Vantage 5000/40/0%	\$5,000 \$10,000	\$7,500 \$15,000	\$40	No charge	\$80	No charge AD	No charge AD	20% AD	\$80	\$150 Ded p/p Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)

## 2024 Sentara Business EDGE® Vantage HSA Plans



Plan Name	<b>DED</b> ( <b>In Net)</b> Individual Family	MOOP (In Net) Individual Family	PCP	VIRTUAL Consult	SPECIALIST	OUTPATIENT	INPATIENT	<b>ED</b> (In or OON)	ucc	PRESCRIPTION DRUG COVERAGE Option 1	PRESCRIPTION DRUG COVERAGE OPTION 2 Deductible, if applicable
Sentara Vantage HSA 3200/0%	\$3,200 \$6,400	\$7,200 \$14,400	No charge AD	No charge AD	No charge AD	No charge AD	No charge AD	20% AD	No charge AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Prev BD, MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Sentara Vantage HSA 3200/10%	\$3,200 \$6,400	\$7,200 \$14,400	10% AD	No charge AD	10% AD	10% AD	10% AD	20% AD	10% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Prev BD, MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 maxx)
Sentara Vantage HSA 4000/20%	\$4,000 \$8,000	\$7,000 \$14,000	20% AD	No charge AD	20% AD	20% AD	20% AD	30% AD	20% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	<b>Prev BD, MDA</b> Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Sentara Vantage HSA 5000/0%	\$5,000 \$10,000	\$6,900 \$13,800	\$30 AD	No charge AD	\$60 AD	No charge AD	No charge AD	20% AD	20% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Prev BD, MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Sentara Vantage HSA 5000/30%	\$5,000 \$10,000	\$7,000 \$14,000	30% AD	No charge AD	30% AD	30% AD	30% AD	40% AD	30% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Prev BD, MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)
Sentara Vantage HSA 6000/30%	\$6,000 \$12,000	\$7,000 \$14,000	30% AD	No charge AD	30% AD	30% AD	30% AD	40% AD	30% AD	MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)	Prev BD, MDA Tier 1: \$10 AD Tier 2: \$40 AD Tier 3: 25% AD (\$250 max) Tier 4: 25% AD (\$400 max)

## 2024 Sentara Business EDGE® Vantage Design Plan

Plan Name	<b>DED</b> (In Net) Individual Family	MOOP (In Net) Individual Family	PCP	VIRTUAL Consult	SPECIALIST	OUTPATIENT	INPATIENT	<b>ED</b> (In or OON)	ucc	PRESCRIPTION DRUG COVERAGE OPTION 1	PRESCRIPTION DRUG COVERAGE OPTION 2 Deductible, if applicable
Sentara Vantage Design 3000/20%	\$3,000 \$6,000	\$5,000 \$10,000	20% AD	No charge AD	20% AD	20% AD	20% AD	30% AD	20% AD	N/A	Tier 1: \$10 Tier 2: \$30 Tier 3: 25% (\$250 max) Tier 4: 25% (\$400 max)

AD: After Deductible | Ded p/p: Deductible per person | MDA: Medical Deductible Applies | Prev BD: Preventive Drugs Before Deductible

Sentara Health Plans is a trade name of Sentara Health Insurance Company, Sentara Behavioral Health Services, Inc., and Sentara Health Administration, Inc. Sentara Vantage (HM0), Point of Service (POS), Direct, and Select plans are issued and underwritten by Sentara Health Plans. Sentara Plus (PPO) products are issued and underwritten by Sentara Health Insurance Company. Self-funded employer group health plans and Business EDGE® level-funded plans are administered, but not underwritten by Sentara Health Administration, Inc. Stop Loss products are issued and underwritten by Sentara Health Insurance Company. All plans have benefit exclusions and limitations and terms under which the policy may be continued in force or discontinued. Wellness and rewards programs are administered by Sentara Health Administration, Inc. and are not covered benefits under any Sentara plan. Value-added services are not covered benefits under any of our health plans. For costs and complete details of coverage, please call your broker or Sentara Health Plans at 1-800-745-1271 or visit sentarahealthplans.com.