

Club ChamberTM

FOR PART-TIME EMPLOYEES & INDEPENDENT CONTRACTORS

Part-time Employee Benefit Program

**A Valuable Benefit
Plans Designed
Especially For Your
Part-time Employees
and Independent
Contractors**



PCI INSURANCE, INC.
Subsidiary of the PA Chamber of Business & Industry

Small Business Employee Benefit Solutions

Employees choose one of two medical plans, provided through American Sentinel, with varying levels of coverage.

Two Coverage Plans

| | Gold Plan | Silver Plan |
|--|---|--|
| Basic Maximum Medical Expense Accident & Sickness (Including Rx) | \$3,500 per occurrence | \$2,500 per occurrence |
| Co-insurance (for Medical) | 75% | 60% |
| Outpatient Diagnostic Maximum (Including Intrepretation) | \$1,000 per occurrence | \$750 per occurrence |
| Additional In-Hospital Benefit (Payable after Basic Benefit is exhausted) | \$500 a day 50 days per calendar year | \$300 a day 20 days per calendar year |
| Office Visit Max Payment | \$15 copay \$65 max per visit No deductible. | \$20 copay \$50 max per visit No deductible. |
| State Mandates | Covered Expense | Covered Expense |
| Accidental Death Benefit Insured Only | \$15,000 | \$10,000 |
| Deductible Medical | \$150 per occurrence | \$200 per occurrence |
| Benefit Period | 52 weeks | 52 weeks |
| Emergency Room Deductible (waived if due to accident or visit results in admission) | \$250 per visit | \$250 per visit |
| Prescription Drug Coinsurance | 50% | 50% |
| Maximum Prescription Benefits | \$1,500 per calendar year | \$1,000 per calendar year |
| Discount Vision | <ul style="list-style-type: none"> ■ 20%-60% Savings on ALLophthalmologic services, includes RK, LASIK, and CO2 Laser surgeries (<i>Lab & surgery center fees excluded</i>) ■ 20%-60% Savings on the purchase of Prescription Glasses ■ Unlimited Usage and No Restrictions on Frame Selections ■ No Prior Condition Exclusions | |

QUESTIONS?

After reviewing the plan details provided, please contact us to discuss details about the program or to enroll your group in this valuable Part-time Employee Benefits Program!

Monthly Rates

| GOLD | | | SILVER | | |
|----------|----------|----------|----------|----------|----------|
| Employee | 2 Party | Family | Employee | 2 Party | Family |
| \$110.00 | \$217.00 | \$322.00 | \$82.00 | \$160.00 | \$238.00 |



The plan is underwritten and administered by:

**American Sentinel Insurance Company
2407 Park Drive, Suite 200
Harrisburg, PA. 17106**

**Offered Exclusively by
PCI Insurance, Inc. and
American Sentinel Insurance Company**

