

Which Plan is best for you?



With two plan options available, you will want to determine which plan is best for you. Using the benefit summary below, based on your past medical history and foreseeable medical expenses, you can estimate your true out of pocket costs (combined expenses of the deductible, coinsurance, office visit copays, Rx copays, etc). If you have dependents, their expenses should also be considered when determining which plan is best for you.

	Core Plan	Your estimated expenses	Buy up Plan	Your estimated expenses
Deductible	\$500 per member \$1000 per family per calendar year	\$ _____	\$250 per member \$500 per family per calendar year	\$ _____
Copays • Fixed Dollar Copay	Office visit: <ul style="list-style-type: none"> PCP/OB: \$20 Specialist: \$35 Urgent Care: \$75 ER and High Tech Radiology: \$150 	# of visits X copay _____ X \$20 = \$ _____ _____ X \$35 = \$ _____ _____ X \$75 = \$ _____ _____ X \$150 = \$ _____	Office visit: <ul style="list-style-type: none"> PCP/OB: \$20 Specialist: \$35 Urgent Care: \$75 ER and High Tech Radiology: \$150 	# of visits X copay _____ X \$20 = \$ _____ _____ X \$35 = \$ _____ _____ X \$75 = \$ _____ _____ X \$150 = \$ _____
Prescription Drugs	Copays: <ul style="list-style-type: none"> \$15 Generic \$50 Preferred \$80 Non-Preferred 20% Specialty 2 X Mail Order 	# of Rx's X copay _____ X \$15 = \$ _____ _____ X \$50 = \$ _____ _____ X \$80 = \$ _____ _____ X 20% = \$ _____	Copays: <ul style="list-style-type: none"> \$10 Generic \$40 Preferred \$40 Non-Preferred \$40 Specialty 2 X Mail Order 	# of Rx's X copay _____ X \$10 = \$ _____ _____ X \$40 = \$ _____ _____ X \$40 = \$ _____ _____ X \$40 = \$ _____
Coinsurance	80% coverage on most services, after deductible	\$ _____	100% coverage on most services, after deductible	\$ _____
Maximum Deductible and Coinsurance	\$2,000 per member \$4,000 per family	See Above	\$250 per member \$500 per family	See Above
True Annual Out of Pocket Cost (to a Max of \$7,150)	TOTAL:	\$ _____	TOTAL:	\$ _____
Cost Per Student (every 6 months)	<ul style="list-style-type: none"> Student Only: None Student plus one dependent: \$1,333.80 Student plus 2 or more dependents: \$1945.02 		<ul style="list-style-type: none"> Student only: \$159.96 Student plus one dependent: \$1685.58 Student plus 2 or more dependents: \$2384.88 	