



Comparative Overview of the Benefit Plans

Types of Coverage		Silver PPO Plan		Copper PPO Plan		CDHP Plan	
In Network and Non-Network Per Plan Type		In-Network	Non-Network	In-Network	Non-Network	In-Network	Non-Network
Deductible	Employee	\$3,000	\$9,000	\$3,500	\$7,000	\$4,500	\$9,000
	Family	\$6,000	\$18,000	\$7,000	\$14,000	\$9,000	\$18,000
Out-of-Pocket Limit (including deductible)	Employee	\$6,350	\$19,000	\$6,200	\$12,400	\$6,650	\$13,300
	Family	\$12,700	\$38,000	\$12,400	\$24,800	\$13,300	\$26,000
Coinsurance (After Deductible)		30%	50%	30%	50%	30%	50%
Emergency Room		\$750 copay		30% after Deductible		30% after Deductible	
Physician Visit	Primary Care [Tier 1]	\$40 copay	50% after Ded.	\$60 copay	50% after Ded.	30% after Ded.	50% after Ded.
	Specialist [Tier 1]	\$80 copay	50% after Ded.	\$120 copay	50% after Ded.	30% after Ded.	50% after Ded.
	Primary Care [Non-Tier 1]	\$80 copay	50% after Ded.	\$100 copay	50% after Ded.	30% after Ded.	50% after Ded.
	Specialist [Non-Tier 1]	\$120 copay	50% after Ded.	\$160 copay	50% after Ded.	30% after Ded.	50% after Ded.
Hospital	Inpatient	30% after Ded.	50% after Ded.	30% after Ded.	50% after Ded.	30% after Ded.	50% after Ded.
	Outpatient	30% after Ded.	50% after Ded.	30% after Ded.	50% after Ded.	30% after Ded.	Prior Auth. Is req.
Prescription Drugs							
Retail	Tier 1	\$10		30% after Deductible		30% after Ded.	50% after Ded.
	Tier 2	30% [\$40 min. & \$80 max.]		30% after Deductible		30% after Ded.	50% after Ded.
	Tier 3	30% [\$75 min. & \$150 max.]		30% after Deductible		30% after Ded.	50% after Ded.
	Tier 4	30% [\$125 min. & \$250 max.]		N/A		N/A	
Mail	Tier 1	\$20		30% after Deductible		30% after Ded.	
	Tier 2	30% [\$80 min. & \$160 max.]		30% after Deductible		30% after Ded.	
	Tier 3	30% [\$150 min. & \$300 max.]		30% after Deductible		30% after Ded.	
	Tier 4	30% [\$250 min. & \$500 max.]		N/A		N/A	
Vision							
Benefits are limited as follows:		100% after \$40	50% after Ded.	30% after Ded.	50% after Ded.	30% after Ded.	50% after Ded.
1 exam every 2 years		co-pay per visit	has been met	has been met	has been met	has been met	has been met

This document is a brief overview of the Medical Plans. Download the Summary Plan Description documents located at myFamilyHR.com for full details.