

Traditional Plans									
Plan Description	Doctor Visit Chiropractic Care	Preventive Care	Deductible	Coinsurance	Hospitalization	Out-of-Pocket Maximum	Emergency Room Visit	Prescription Drugs	
Platinum Traditional 500	Employee pays: \$10/Primary \$30/Specialty	Employee pays: \$0 for all medical services \$30 for adult eye exam	\$500 Individual \$1,000 Family	90/10 (Plan pays 90%; Employee pays 10%)	10% of total cost after deductible	The most an employee would pay per year: \$1,500 Individual \$3,000 Family	\$400	Employee pays:	Tier 1 - \$20 Tier 2 - \$60 Tier 3-\$100 Specialty - \$150
Platinum Traditional 750	Employee pays: \$15/primary \$35/specialty	Employee pays: \$0 for all medical services \$35 for adult eye exam	\$750 Individual \$1,500 Family	90/10 (Plan pays 90%; Employee pays 10%)	10% of total cost after deductible	The most an employee would pay per year: \$1,500 Individual \$3,000 Family	\$250	Employee pays:	Tier 1 - \$15 Tier 2 - \$45 Tier 3 Drugs- \$70 Specialty - \$100
Platinum Traditional 1500	Employee pays: \$5/primary \$20/specialty	Employee pays: \$0 for all medical services \$20 for adult eye exam	\$1,500 Individual \$3,000 Family	90/10 (Plan pays 90%; Employee pays 10%)	10% of total cost after deductible	The most an employee would pay per year: \$3,000 Individual \$6,000 Family	\$250	Employee pays:	Tier 1 - \$5 Tier 2 - \$20 Tier 3- \$40 Specialty - \$75
Gold Traditional 2500	Employee pays: \$20/primary \$60/specialty	Employee pays: \$0 for all medical services \$60 for adult eye exam	Medical \$2,500 Individual \$5,000 Family	75/25 (Plan pays 75%; Employee pays 25%)	25% of total cost after deductible	The most an employee would pay per year: \$7,350 Individual \$14,700 Family	\$400	Employee pays:	Tier 1 - \$30 Tier 2 - \$60 Tier 3- \$100 Specialty - \$150
Gold Traditional 2000	Employee pays: \$35/primary \$70/specialty	Employee pays: \$0 for all medical services \$70 for adult eye exam	Medical \$2,000 Individual \$4,000 Family	80/20 (Plan pays 80%; Employee pays 20%)	20% of total cost after deductible	The most an employee would pay per year: \$5,500 Individual \$11,000 Family	\$750	Employee pays:	Tier 1 - \$50 Tier 2 - \$100 Tier 3-\$150 Specialty - \$250
Gold Traditional 3500	Employee pays: \$25/primary \$60/specialty	Employee pays: \$0 for all medical services \$60 for adult eye exam	Medical \$3,500 Individual \$7,000 Family	70/30 (Plan pays 70%; Employee pays 30%)	30% of total cost after deductible	The most an employee would pay per year: \$8,150 Individual \$16,300 Family	\$250	Employee pays:	Tier 1 - \$10 Tier 2 - \$60 Tier 3-\$100 Specialty - \$150
Gold Traditional 4000	Employee pays: \$35/primary \$75/specialty	Employee pays: \$0 for all medical services \$75 for adult eye exam	Medical \$4,000 Individual \$8,000 Family	80/20 (Plan pays 80%; Employee pays 20%)	20% of total cost after deductible	The most an employee would pay per year: \$7,000 Individual \$14,000 Family	\$500	Employee pays:	Tier 1 - \$10 Tier 2 - \$20 Tier 3- \$50 Specialty - \$100
Silver Traditional 6550	Employee pays: \$75/primary \$100/specialty	Employee pays: \$0 for all medical services \$100 for adult eye exam	\$6,550 Individual \$13,300 Family	50/50 (Plan pays 50%; Employee pays 50%)	50% of total cost after deductible	The most an employee would pay per year: \$8,150 Individual \$16,300 Family	50% of total cost after deductible	Employee pays:	Tier 1 - \$50 Tier 2 - \$100 Tier 3- \$150 Specialty - \$300

Copay Plans									
Plan Description	Doctor Visit Chiropractic Care	Preventive Care	Deductible	Coinsurance	Hospitalization	Out-of-Pocket Maximum	Emergency Room Visit	Prescription Drugs	
Platinum Copay	Employee pays: \$10/primary \$30/specialty	Employee pays: \$0 for all medical services \$30 for adult eye exam	\$0 Individual \$0 Family	0% coinsurance	Inpatient: \$1,500 copay/visit Outpatient: \$750 copay/visit	The most an employee would pay per year: \$1,500 Individual \$3,000 Family	\$1,000	Employee pays:	Tier 1-\$15 Tier 2- \$45 Tier 3- \$75 Specialty- \$100
Gold Copay	Employee pays: \$35/primary \$70/specialty	Employee pays: \$0 for all medical services \$75 for adult eye exam	\$0 Individual \$0 Family	0% coinsurance	Inpatient: \$4,000 copay/visit Outpatient: \$1,500 copay/visit	The most an employee would pay per year: \$4,000 Individual \$8,000 Family	\$2,000	Employee pays:	Tier 1-\$30 Tier 2-\$75 Tier 3-\$100 Specialty-\$150
Silver Copay	Employee pays: \$50/primary \$100/specialty	Employee pays: \$0 for all medical services \$100 for adult eye exam	\$0 Individual \$0 Family	0% coinsurance	Inpatient: \$8,000 copay/visit Outpatient: \$2,000 copay/visit	The most an employee would pay per year: \$8,000 Individual \$16,000 Family	\$4,000	Employee pays:	Tier 1- \$30 Tier 2- \$60 Tier 3- \$90 Specialty \$150

High Deductible Health Plans

Plan Description	Doctor Visit Chiropractic Care	Preventive Care	Emergency Room Visits Hospitalization	Deductible	Coinsurance	Out-of-Pocket Maximum	Prescription Drugs
Silver HDHP 6000	Employee Pays: An employee and/or employer pays for health care services until they have spent \$6,000. After that, Plan pays all covered expenses for the rest of the year	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee and/or employer pays for health care services until they have spent \$6,000. 2. After that, Plan pays all covered expenses for the rest of the year.	\$6,000 Individual \$12,000 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$6,000 Individual \$12,000 Family	Employee pays: Tier 1 - \$75 Tier 2 - \$150 Tier 3 - \$250 Specialty - \$400
Silver HDHP with OV Copays	Employee Pays: \$100/Primary Copay \$200/Specialty Copay These amounts apply to the Out-of-Pocket Maximum	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee and/or employer pays for health care services until they have spent \$7,000. 2. After that, Plan pays all covered expenses for the rest of the year.	\$7,000 Individual \$14,000 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$7,000 Individual \$14,000 Family	Employee Pays: Tier 1 - \$50 Tier 2 - \$100 Tier 3 - \$150 Specialty - \$300
Bronze HDHP 8150	Employee Pays: An employee and/or employer pays for health care services until they have spent \$8,150. After that, Plan pays all covered expenses for the rest of the year	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee and/or employer pays for health care services until \$8,150 has been spent. 2. After that, Plan pays all covered expenses for the rest of the year.	\$8,150 Individual \$16,300 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$8,150 Individual \$16,300 Family	Employee pays: Tier 1 - \$0 after deductible Tier 2 - \$0 after deductible Tier 3 - \$0 after deductible Specialty - \$0 after deductible
Bronze HDHP with Rx Copays	Employee Pays: An employee and/or employer pays for health care services until they have spent \$9,100. After that, Plan pays all covered expenses for the rest of the year	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee and/or employer pays for health care services until the \$9,100 has been spent. 2. After that, Plan pays all covered expenses for the rest of the year.	\$9,100 Individual \$18,200 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$9,100 Individual \$18,200 Family	Employee pays: Tier 1 - \$100 Tier 2 - \$150 Tier 3 - \$200 Specialty - \$300 These amounts apply to the Out-of-Pocket Maximum

Qualified High Deductible Health Plans

Plan Description	Preventive Care	Prescription Drugs / Doctor Visits / Emergency Room Visits / Therapy / Hospitalization	Chiropractic Care	Deductible	Coinsurance	Out-of-Pocket Maximum
Gold Qualified HDHP 3000	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee first pays for health care services out of his or her own pocket or from a QHDHP until they have spent \$3,000. 2. After that, Plan pays all covered expenses for the rest of the year.		\$3,000 Individual \$6,000 Family Embedded Deductible	The most an employee would pay per year: \$3,000 Individual \$6,000 Family	The most an employee would pay per year: \$3,000 Individual \$6,000 Family
Silver Qualified HDHP 3000	Employee pays: \$0 for all medical services 20% for adult eye exam after deductible	1. An employee first pays for health care services out of his or her own pocket or from an QHDHP until they have spent \$3,000. 2. After that, Plan pays 80%, Employee pays 20% for all covered expenses until the Out-of-Pocket Maximum is met, and then Plan pays all covered expenses at 100%.		\$3,000 Individual \$6,000 Family Embedded Deductible	80/20 (Plan pays 80%; Employee pays 20%)	The most an employee would pay per year: \$7,000 Individual \$14,000 Family
Silver Qualified HDHP 5000	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee first pays for health care services out of his or her own pocket or from a QHDHP until they have spent \$5,000. 2. After that, Plan pays all covered expenses for the rest of the year.		\$5,000 Individual \$10,000 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$5,000 Individual \$10,000 Family
Bronze Qualified HDHP 6900	Employee pays: \$0 for all medical services \$0 for adult eye exam after deductible	1. An employee first pays for health care services out of his or her own pocket or from an QHDHP until they have spent \$6,900. 2. After that, Plan pays all covered expenses for the rest of the year.		\$6,900 Individual \$13,800 Family Embedded Deductible	100/0 (Plan pays 100%; Employee pays 0%)	The most an employee would pay per year: \$6,900 Individual \$13,800 Family

Point of Service Plans

Plan Description	Doctor Visit Chiropractic Care	Preventive Care	Deductible	Coinsurance	Hospitalization	Out-of-Pocket Maximum	Emergency Room Visit	Prescription Drugs
Platinum POS In-Network	Employee pays: \$10/Primary \$30/Specialty \$30 for adult eye exam	Employee pays: \$0 for all medical services (fully covered by Plan)	\$500 Individual \$1,000 Family	90/10 (Plan pays 90%; Employee pays 10%)	10% of total cost after deductible	The most an employee would pay per year: \$1,500 Individual \$3,000 Family	\$400	Employee pays: Tier 1 - \$20 Tier 2 - \$60 Tier 3 - \$100 Specialty - \$150
Platinum POS Out-of-Network	Employee pays: 30% for all medical services after deductible adult eye exam is not covered	Employee pays: Preventive Care is not covered out of network	\$1,000 Individual \$2,000 Family	70/30 (Plan pays 70%; Employee pays 30%)	30% of total cost after deductible	The most an employee would pay per year: \$3,000 Individual \$6,000 Family	\$400	Employee pays: Tier 1 - \$20 Tier 2 - \$60 Tier 3 - \$100 Specialty - \$150
Gold POS In-Network	Employee pays: \$35/primary \$70/specialty \$70 for adult eye exam	Employee pays: \$0 for all medical services (fully covered by Plan)	\$2,000 Individual \$4,000 Family	80/20 (Plan pays 80%; Employee pays 20%)	20% of total cost after deductible	The most an employee would pay per year: \$5,500 Individual \$11,000 Family	\$750	Employee pays: Tier 1 - \$50 Tier 2 - \$100 Tier 3 - \$150 Specialty - \$250
Gold POS Out-of-Network	Employee pays: 40% for all medical services after deductible adult eye exam is not covered	Employee pays: Preventive Care is not covered out of network	\$4,000 Individual \$8,000 Family	60/40 (Plan pays 60%; Employee pays 40%)	40% of total cost after deductible	The most an employee would pay per year: \$11,000 Individual \$22,000 Family	\$750	Employee pays: Tier 1 - \$50 Tier 2 - \$100 Tier 3 - \$150 Specialty - \$250