



# MEDICAL PLAN

Plan Features	HDHP	Buy Up Plan
	HP2850Rx10i80ES21	P1000i80ES21
<b>In Network</b>		
Plan Year Deductibles (Indiv / Family)	\$2,850 / \$5,700	\$1,000 / \$2,000
Preventive Care	No Charge	No Charge
Primary Care Visit	Deductible & 80%	\$25
Specialist Visit	Deductible & 80%	\$75
Diagnostic Testing (x-ray, blood work)	Deductible & 80%	No Charge
Complex Images (CT/PET/MRI)	Deductible & 80%	Deductible & 80%
Outpatient Procedure	Deductible & 80%	Deductible & 80%
Inpatient Visit	Deductible & 80%	Deductible & 80%
Emergency Room	Deductible & 80%	\$300 + Deductible & 80%
Urgent Care	Deductible & 80%	\$50
Plan Year Out-of-Pocket Max (Indiv / Family)	\$6,550 / \$13,100	\$4,500 / \$9,000
<b>Out-of-Network</b>		
Plan Year Deductibles (Indiv / Family)	\$5,700 / \$11,400	\$2,000 / \$4,000
Preventive Care	Deductible & 50%	Deductible & 50%
Primary Care Visit	Deductible & 50%	Deductible & 50%
Specialist Visit	Deductible & 50%	Deductible & 50%
Diagnostic Testing (x-ray, blood work)	Deductible & 50%	Deductible & 50%
Complex Images (CT/PET/MRI)	Deductible & 50%	Deductible & 50%
Outpatient Procedure	Deductible & 50%	Deductible & 50%
Inpatient Visit	Deductible & 50%	Deductible & 50%
Emergency Room	Deductible & 80%	\$300 + Deductible & 80%
Urgent Care	Deductible & 50%	Deductible & 50%
Plan Year Out-of-Pocket Max (Indiv / Family)	\$11,400 / \$22,800	\$9,000 / \$18,000

