

High Deductible Health Plan (HDHP)

What is a PPO and how does it help me save? This plan has both In-Network and Out-of-Network benefits. A Preferred Provider Organization (PPO) plan is a network of doctors, hospitals and other healthcare providers organized to deliver comprehensive healthcare to a plan member at a discounted rate. While you may choose a provider outside the network, the plan pays a higher level of benefit when you use network providers. Review the plan document and Summary of Benefits and Coverage for further details.

What is an HDHP and how does it help me save? A High Deductible Health Plan offers lower premiums and higher deductibles. The deductible must be satisfied before the insurance plan can pay any claims except for those for preventive services. All claims are applied to the deductible and once your deductible has been met, in-network claims are paid at 100%.

Plan Feature	HDHP
Annual Deductible (Single / Family)	\$1,500 / \$3,000
Coinsurance	Non-Embedded
OOP Maximum (Single / Family)	Member Pays 20%
Preventative Care	\$3,000 / \$6,000
PCP / Specialist Office Visit	Paid at 100%
Inpatient Hospitalization	20% Coinsurance after Deductible
Emergency Room Services	20% Coinsurance after Deductible
Urgent Care	20% Coinsurance after Deductible
Prescription Drugs—Retail	Preferred / Non-Preferred Pharmacy
Tier I	10% / 20% Coinsurance after Deductible
Tier II	10% / 20% Coinsurance after Deductible
Tier III	20% / 30% Coinsurance after Deductible
Tier IV	30% / 40% Coinsurance after Deductible
Tier V	40% Coinsurance after Deductible
Tier VI	50% Coinsurance after Deductible
Out-of-Network Benefits	
Deductible (Single / Family)	\$3,000 / \$6,000
Coinsurance	Member Pays 40%
OOP Maximum (Single / Family)	\$9,000 / \$18,000