

Medical Plan Options Comparison Chart

	Open Access Plus (OAP) Plan		HMO In-Network Only	High Deductible Health Plan (HDHP)	
	In-Network	Out-of-Network		In-Network	Out-of-Network
Deductible (Single/Family)	\$500/\$1,000	\$1,500/\$3,000	\$500/\$1,000	\$2,000 for individual coverage /\$4,000 for family coverage	\$4,000 for individual coverage/\$8,000 for family coverage
Out-of-Pocket Maximum (Single/Family)	\$2,000/\$4,000	\$4,000/\$8,000	\$3,000/\$6,000	\$4,000/\$8,000	\$8,000/\$16,000
Primary Care Physician (PCP)	\$15/\$25 copay	30% after ded.	\$35 copay	20% after ded.	50% after ded.
Specialist Physician	\$20/\$40 copay	30% after ded.	\$50 copay	20% after ded.	50% after ded.
Urgent Care	\$40 copay	\$40 copay	\$50 copay	20% after ded.	20% after ded.
Emergency Room	\$200 copay	\$200 copay	\$200 copay	20% after ded.	20% after ded.
Inpatient Hospital	10% after ded.	30% after ded.	10% after ded.	20% after ded.	50% after ded.
Prescription Drug (Retail):					
Generic	\$10 copay	50% after ded.	\$15 copay	20% after ded.	50% after ded.
Preferred Brand	\$25 copay	50% after ded.	\$30 copay	20% after ded.	50% after ded.
Non-Preferred Brand	\$50 copay	50% after ded.	\$60 copay	20% after ded.	50% after ded.
Prescription Drug (Mail Order):	2x retail	Not Covered	2x retail	20% after ded.	Not Covered