



# Medical HDHP Plan

Administered by UMR

## What is a HDHP (High Deductible Health Plan)?

A HDHP plan features lower premiums and higher out-of-pocket costs with deductibles before the plan begins covering costs. A HDHP plan is offered in conjunction with a Health Savings Account (HSA).

The plan includes 100% coverage with no deductible for certain preventive care services as specified by the Affordable Care Act when you see a network provider.

Additional preventive screenings and services may also be covered, depending on factors such as your age, gender and certain chronic conditions.



HDHP PLAN	In-Network	Out-of-Network	United Healthcare Choice Plus Network	
<b>Aggregate Calendar Year Deductible<sup>1</sup></b>			<b>You pay out of pocket until you reach the deductible.</b>	
Individual	\$1,600	\$3,200		
Family	\$3,200	\$6,400		
<b>Embedded Calendar Year Out-of-Pocket Maximum<sup>2</sup></b>				
Individual	\$3,600	\$7,200	When you have an eligible expense, such as a doctor visit when you're sick, you will pay the full cost of your health expenses until you meet your deductible. You can choose to pay from your HSA or pay with cash or credit.	
Family	\$7,200	\$14,400		
<b>Services (member pays)</b>				
Preventive Care	0%	40% after deductible		<b>Your plan covers cost of covered services.</b>
Office Visit	20% after deductible	40% after deductible		
Emergency Room	20% after deductible	20% after deductible		
Urgent Care	20% after deductible	40% after deductible		
Hospital Inpatient Services	20% after deductible	40% after deductible		
Hospital Outpatient Services	20% after deductible	40% after deductible		
<b>Retail Prescription Drugs<sup>3</sup></b>			Once the deductible is paid, your medical plan has 20% coinsurance. This means once you have met your deductible the plan begins to pay 80% and your out of pocket maximum has also been satisfied.	
Tier 1	\$20/\$40/\$60 copay after ded	\$20/\$40/\$60 copay after ded		
Tier 2	\$40/\$80/\$120 copay after ded	\$40/\$80/\$120 copay after ded		
Tier 3	\$60/\$120/\$180 copay after ded	\$60/\$120/\$180 copay after ded		
Specialty <sup>4</sup>	\$0 copay or 30% after ded	Not Covered	<b>You are protected from major expenses.</b>	
<b>Mail Order Prescription Drugs</b>				
Tier 1	\$50 copay after ded	Not Covered		
Tier 2	\$100 copay after ded	Not Covered		
Tier 3	\$150 copay after ded	Not Covered	An out-of-pocket maximum protects you from major expenses. The out-of-pocket maximum is the most you will have to pay in the plan year for covered health care. Your deductible, coinsurance, medical services and prescription drugs apply toward the out-of-pocket maximum.	

<sup>1</sup> Aggregate means that the full family deductible amount must be met before the Plan begins to pay.

<sup>2</sup> Embedded means that any combination of family members may help to meet the family OOP maximum and no one person is responsible for more than the individual OOP maximum.

<sup>3</sup> Prescription drug copays are stepped accordingly based on days supply obtained at retail.

<sup>4</sup> Specialty prescription drug copays can range from 0% to 30% under the PrudentRx Program that applies for these kinds of medications. Refer to the SPD for more details.