

MEDICAL PLANS

Camel Rock Casino provides you with a choice of two HealthSmart/Cigna PPO



Plan Provision	PPO Base Plan		PPO Buy-Up Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible (Individual/Family)	\$2,000/\$4,000	\$4,000/\$8,000	\$750/\$2,250	\$1,500/\$4,500
Out-of-Pocket Maximum (Includes Deductible)	\$5,000/\$10,000	\$10,000/\$20,000	\$2,750/\$5,500	\$5,500/\$11,000
Lifetime Maximum	Unlimited		Unlimited	
Preventative Care	Covered 100% (ded waived)	50%	Covered 100% (ded waived)	50%
Plan Coinsurance	20%	50%	20%	50%
Primary Physician Office Visit	\$35 copay	50%	\$25 copay	50%
Specialist Office Visit	\$50 copay	50%	\$40 copay	50%
Diagnostic Lab and X-Ray (MRI, CT scan)	\$250 copay		\$250 copay	
All Other X-Ray and Lab	Covered 100% (ded waived)	50%	Covered 100% (ded waived)	50%
Inpatient Hospital Services	20%	50%	20%	50%
Outpatient Hospital Services	20%	50%	20%	50%
Urgent Care	\$50 copay	\$50 copay	\$40 copay	\$40 copay
Emergency Room Care	\$150 copay		\$120 copay	
Retail Prescription Drugs (30-day supply) <ul style="list-style-type: none"> Generic Brand Preferred Brand Non-preferred Specialty Medications 	\$10 copay \$30 copay \$60 copay \$150 copay	Not Covered	\$10 copay \$30 copay \$60 copay \$150 copay	Not Covered
Mail Order Prescription Drugs (90-day supply) <ul style="list-style-type: none"> Generic Brand Preferred Brand Non-preferred Specialty Medications 	\$20 copay \$60 copay \$120 copay N/A	Not Covered	\$20 copay \$60 copay \$120 copay N/A	Not Covered