

Medical Plans

2013 Plan Coverage & Rates	Low Deductible Plan	
Medical	In-Network	Out-of-Network
Major Medical Deductible	\$1,000 Individual/\$2,000 Family	\$2,000 Individual/\$4,000 Family
Coinsurance (Plan Pays)	60%	40%
Maximum Out of Pocket (not including deductible)	\$3,000 Individual/\$6,000 Family	\$9,500 Individual/\$18,000 Family
Primary Care Office Visit	\$40 Copay	Deductible, then 40%
Specialist Care Copay	\$60 Copay	Deductible, then 40%
Preventative Care Copay	Covered at 100%	Not Covered
Urgent Care Copay	\$55 Copay then Deductible/Coinsurance	Deductible, then 40%
Emergency Room copay	\$200 Copay then, Deductible/Coinsurance	\$200 Copay then, Deductible/Coinsurance
Prescription Drugs		
Generic	\$10 Copay	Not Covered
Brand-Formulary	50% to \$50 Maximum	Not Covered
Brand-Non Formulary	60% to \$100 Maximum	Not Covered
Mail Order Prescription Drugs		
Generic	\$25 Copay	Not Covered
Brand-Formulary	50% to \$125 Maximum	Not Covered
Brand-Non Formulary	60% to \$250 Maximum	Not Covered
Provider Network	Midlands Premier	Midlands Premier
Lifetime Maximum	Unlimited	Unlimited
Plan Coverage	2013 Rates – Cost Per Week	2013 vs. 2012 Rates
Employee	\$53.08	-22% decrease
Employee Spouse	\$144.23	11% increase
Employee Child	\$115.38	-5% decrease
Family	\$173.08	-6% decrease

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2013 Plan Coverage & Rates	Mid-Level Deductible Plan	
Medical	In-Network	Out-of-Network
Major Medical Deductible	\$3,000 Individual/\$5,000 Family	\$7,000 Individual/\$15,000 Family
Coinsurance (Plan Pays)	70%	50%
Maximum Out of Pocket (not including deductible)	\$6,000 Individual/\$15,000 Family	\$15,000 Individual/\$35,000 Family
Primary Care Office Visit	\$50 Copay	Deductible, then 50%
Specialist Care Copay	\$65 Copay	Deductible, then 50%
Preventative Care Copay	Covered at 100%	Not Covered
Urgent Care Copay	\$60 Copay then Deductible/Coinsurance	Deductible, then 50%
Emergency Room copay	\$300 Copay then, Deductible/Coinsurance	\$300 Copay then, Deductible/Coinsurance
Prescription Drugs		
Generic	\$15 Copay	Not Covered
Brand-Formulary	50% to \$60 Maximum	Not Covered
Brand-Non Formulary	60% to \$120 Maximum	Not Covered
Mail Order Prescription Drugs		
Generic	\$37.50 Copay	Not Covered
Brand-Formulary	50% to \$150 Maximum	Not Covered
Brand-Non Formulary	60% to \$300 Maximum	Not Covered
Provider Network	Midlands Premier	Midlands Premier
Lifetime Maximum	Unlimited	Unlimited
Plan Coverage	2013 Rates – Cost Per Week	2013 vs. 2012 Rates
Employee	\$29.77	-25% decrease
Employee Spouse	\$109.62	3% increase
Employee Child	\$92.31	-5% decrease
Family	\$160.38	0% no change

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2013 Plan Coverage & Rates	High Deductible Affordable Plan	
Medical	In-Network	Out-of-Network
Major Medical Deductible	\$6,000 Individual/\$10,000 Family	\$9,000 Individual/\$20,000 Family
Coinsurance (Plan Pays)	40%	20%
Maximum Out of Pocket (not including deductible)	\$8,000 Individual/\$18,000 Family	\$18,000 Individual/\$30,000 Family
Primary Care Office Visit	\$60 Copay	Deductible, then 20%
Specialist Care Copay	\$70 Copay	Deductible, then 20%
Preventative Care Copay	Covered at 100%	Not Covered
Urgent Care Copay	\$70 Copay then Deductible/Coinsurance	Deductible, then 20%
Emergency Room copay	\$300 Copay then, Deductible/Coinsurance	\$300 Copay then, Deductible/Coinsurance
Prescription Drugs		
Generic	\$15 Copay	Not Covered
Brand-Formulary	50% to \$100 Maximum	Not Covered
Brand-Non Formulary	60% to \$200 Maximum	Not Covered
Mail Order Prescription Drugs		
Generic	\$37.50 Copay	Not Covered
Brand-Formulary	50% to \$250 Maximum	Not Covered
Brand-Non Formulary	60% to \$500 Maximum	Not Covered
Provider Network	Midlands Premier	Midlands Premier
Lifetime Maximum	Unlimited	Unlimited
Plan Coverage	2013 Rates – Cost Per Week	2013 vs. 2012 Rates
Employee	\$19.85	-28% decrease
Employee Spouse	\$75.00	-12% increase
Employee Child	\$69.23	-6.4% decrease
Family	\$102.23	7% decrease