## Medical Plan Comparison 2022-23

Deductible	\$350	Ć450	
		\$450	\$2,000
Deductible max	\$950	\$1,250	\$4,000
Coinsurance	85%/15% AD	80%/20% AD	70%/30% AD
Out-of-Pocket	\$3,250/\$6,750 Fam	\$4,300/\$8,600 Fam	\$5,000
Physician Co-Pay	\$0/\$20	80%/20% AD	70% AD
Specialist	\$20/\$40	80%/20% AD	70% AD
Children Co-Pay	\$0	80%/20% AD	70% AD
Preventive Care	100%	100%	70% AD
Prescription Retail	\$10/\$30/\$60/\$100	\$10/\$30/\$60/\$100	70% AD
Prescription Mail Order	\$10/\$30/\$60/\$100	\$10/\$30/\$60/\$100	70% AD
RX Out-of-Pocket	\$2,000/\$4,000 Fam	\$2,000/\$4,000 Fam	70% AD
Diagnostic X-ray Lab	First \$100/100%	80%/20% AD	70% AD
In-Patient Rehab	85%/15% AD	80%/20% AD	70% AD
Out-Patient Rehab	85%- 20 day max	80% - 20 day max	70% AD
Mental Health	\$0	80%/20% AD	70% AD
Durable Medical	85%	80%/20% AD	70% AD
Contraceptives	Women's Preventive	Women's Preventative Women's Prevent	
Skilled Nursing	85%-30 days year	80%/20% AD	70% AD
Preventive RX	LIMITED	LIMITED	LIMITED

## Eligibility:

Certified staff must be contracted at a .75 FTE or higher to qualify for insurance benefits.

Classified staff must be scheduled to work 30 hours or more per week to qualify for insurance benefits.

Monthly Employee Premium Rates 2022-23						
	PPO	Traditional	H.S.A.	Dental		
Employee Only	\$65	\$85	\$15	\$11		
Employee & Spouse	\$195	\$255	\$62	\$35.22		
Employee & Child	\$112	\$144	\$31	\$34.18		
Employee & Children	\$175	\$229	\$55	\$68.04		
Employee, Spouse, & Child	\$239	\$312	\$78	\$58.40		
Employee, Spouse, & Children	\$286	\$418	\$108	\$99.54		