

Benefits overview

Welcometomedica.com/SPPS for more details on plans offered

| | ACO Networks <u>Only</u> Park Nicollet & HP Medical First and VantagePlus \$350 Deductible Plan RX 15/30/45 IN-NETWORK BENEFIT | ACO Networks <u>Only</u> Park Nicollet & HP Medical First and VantagePlus \$6000 HSA Deductible Plan RX 20%/Non-preferred 30% IN-NETWORK BENEFIT | Passport Options PPO <u>Only</u> \$3750 HSA Deductible Plan RX 20%/Non-preferred 30% IN-NETWORK BENEFIT |
|---|--|--|--|
| Annual Deductible | \$350 per person; \$700 per family | \$6,000 per person ; \$12,000 per family | \$3,750 per person ; \$7,500 per family |
| Out of Pocket Maximum | \$2,500 per person; \$5,000 per family | \$7,500 per person; \$15,000 per family | \$5,750 per person; \$11,500 per family |
| Preventive Care | 100% coverage | 100% coverage | 100% coverage |
| Retail Health/ Convenience Care | \$20 Copay | After deductible is met: 20% co-insurance | After deductible is met: 20% co-insurance |
| Office Visit/Specialist Visit/ Urgent Care | Office Visit: \$20 Copay/Specialist Visit \$30 Copay/Urgent Care \$20 Copay | After deductible is met: 20% co-insurance | After deductible is met: 20% co-insurance |
| Hospitalization (In and out patient) | After deductible is met: 20% co-insurance | After deductible is met: 20% co-insurance | After deductible is met: 20% co-insurance |
| Prescription Drugs | Generic : \$15.00 Preferred: \$30.00 Non-Preferred: \$45.00 | Generic : 20% coinsurance Preferred: 20% coinsurance Non-Preferred: 20% coinsurance | Generic : 20% coinsurance Preferred: 20% coinsurance Non-Preferred: 20% coinsurance |
| Emergency Room | \$75 Copay | After deductible is met: 20% co-insurance | After deductible is met: 20% co-insurance |