



Jefferson School District #251 New Dual Option Medical Plan Offering Comparison

* Benefits assume In-Network Providers and Wellness Qualification.	*Traditional PPO Plan New Plan Offering	New H.S.A. (Health Savings Account) New Dual Plan Option	
Deductible Buy Down	\$500 Ind/ \$1,000 Fam.		
Co-insurance Buy Down	80%		
Carrier Deductible	\$3,000 Ind/\$6,000 Fam.	\$6,800 Ind./ \$13,600 Fam.	
Carrier Co-Insurance	70%	100%	
TOTAL OUT OF POCKET	\$2,500 Ind./\$5,000 Fam.	\$6,800 Ind./ \$13,600 Fam.	
Prescription Drug- Retail	\$10/\$20 Co-Pay- Generic \$250 Deductible \$30/\$50 Co-Pay- Name Brand \$20%/30% Co-Pay- Speciality	100% Coverage For Listed Preventive RX's All other Prescription Drugs go towards Deductible	
Prescription Out Of Pocket	\$2,000 (Separate from Medical Out of Pocket)	Goes towards Medical Out of Pocket	
Dr. Co-Pay General	\$10 Choice Dr's/ \$30 non Choice	100% After Deductible is met.	
Dr. Co-Pay Specialist	\$30 Choice Dr.'s/ \$50 non Choice	100% After Deductible is met.	
Wellness/ Preventive (Please refer to attached listing)	100% No Deductible	100% No Deductible	
Immunizations (Please refer to attached listing)	100% No Deductible	100% No Deductible	
Diagnostic Lab/X-ray	First \$100 is covered then Deductible	Deductible First	
Below Rates include Medical, Vision, Dental and Life coverage.			
			District H.S.A. Contribution
Enrollee	\$0.00	\$0.00	\$100.00
Ee / Spouse	\$657.24	\$378.10	\$100.00
Ee/Child	\$236.10	\$65.75	\$100.00
Ee/Children	\$430.36	\$218.80	\$100.00
Family	\$937.47	\$600.65	\$100.00

Please refer to contract for full benefits listing. Blue Cross Contract supersedes this summary. This is a brief summary of benefit for comparison purposes