

Compare medical plans

	Comprehensive PPO Plan		Consumer Directed Plan		Consumer Directed High Deductible Plan	
Annual deductible	In network, you pay up to \$500 per individual or \$1,000 per family.	Out of network, you pay up to \$1,000 per individual or \$2,000 per family.	In network, you pay up to \$1,200 per individual or \$2,400 per family.	Out of network, you pay up to \$2,400 per individual or \$4,800 per family.	In network, you pay up to \$2,250 employee only or \$4,500 per family.	Out of network, you pay up to \$4,500 employee only or \$9,000 per family.
Coinsurance	In network, you pay 20% .	Out of network, you pay 40% .	In network, you pay 20% .	Out of network, you pay 40% .	In network, you pay 20% .	Out of network, you pay 40% .
Out-of-pocket maximum	In network, you will pay no more than \$2,000 per individual or \$4,000 per family.	Out of network, you will pay no more than \$4,000 per individual or \$8,000 per family.	In network, you will pay no more than \$3,500 per individual or \$7,000 per family.	Out of network, you will pay no more than \$7,000 per individual or \$14,000 per family.	In network, you will pay no more than \$4,000 employee only, \$7,350 per individual or up to \$8,000 per family.	Out of network, you will pay no more than \$8,000 employee only or \$16,000 per family.
Preventive services	In network, you pay \$0 , according to government guidelines.	Out of network, you pay the full negotiated rate until you meet the deductible, then you pay coinsurance.	In network, you pay \$0 , according to government guidelines.	Out of network, you pay the full negotiated rate until you meet the deductible, then you pay coinsurance.	In network, you pay \$0 , according to government guidelines.	Out of network, you pay the full negotiated rate until you meet the deductible, then you pay coinsurance.
Office visits	In network, you pay NEW: \$10 copayment for primary care \$25 copayment for a specialist visit	Out of network, you pay the full negotiated rate until you meet the annual deductible, then you pay coinsurance.	In network, you pay NEW: \$20 flat copayment for primary care visits	Specialists and out of network, you pay the full negotiated rate until you meet the annual deductible, then you pay coinsurance.	You pay the full negotiated rate until you meet the annual deductible, then you pay coinsurance for primary care and specialist visits.	
Prescription medication at retail <i>(30-day supply)</i>	In network, you pay Preventive: \$0 Nonpreventive: Generic: \$0 Preferred brand: \$25 copayment Nonpreferred brand: \$50 copayment	Out of network, you pay 40% coinsurance.	In network, you pay Preventive: \$0 Nonpreventive: Generic: \$0 Preferred brand: 30% coinsurance (\$100 max) Nonpreferred brand: 45% coinsurance (\$150 max)	Out of network, you pay 40% coinsurance.	In network, you pay Preventive: \$0 Nonpreventive: The full negotiated price until you meet your deductible, then: Generic: \$0 Brand: 20% coinsurance	Out-of-network, you pay 40% coinsurance after you meet your deductible.
Health care account(s) <i>(Details on pages 7 & 8)</i>	Health Flexible Spending Account (Health FSA)		Health Reimbursement Arrangement (HRA) Health Flexible Spending Account (Health FSA)		Health Savings Account (HSA) Limited Purpose Flexible Spending Account (Limited Purpose FSA)	

Filling your prescriptions

If you elect Aetna or Anthem as your medical carrier for 2023, your prescription administrator will be CVS Health (Caremark). If you elect UnitedHealthcare (UHC), your prescription administrator will be UHC/OptumRx. Both provide access to most national pharmacy chains for non-maintenance prescription medications. A few things to note:

- Most in-network preventive prescription medications — both brand-name and generic — are available at no cost.
- Most in-network, generic nonpreventive prescription medications are also available at no cost for those in a PPO or CD plan, and for those in a CDHD plan or Kaiser Permanente plan in CA, CO, GA, Mid-Atlantic, Northwest or WA after they meet their deductible.
- Once enrolled in a medical plan, you can visit your prescription administrator's website, at [caremark.com](https://www.caremark.com) or [myuhc.com](https://www.myuhc.com), to confirm whether there's a cost before filling prescriptions.
- Any maintenance prescription medications will need to be filled through your prescription administrators' mail order service. Otherwise your prescription may not be covered under the plan.