

2023 Full-Time Employee Health Plans and Premiums

Plan Features	High Deductible		Traditional Plan	
Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible per Calendar Year	\$1,750 single \$3,500 family	\$3,500 single \$7,000 family	\$750 single \$1,500 family	\$1,500 single \$3,000 family
Coinsurance	80/20%	60/40%	80/20%	60/40%
Total Maximum Out-of-Pocket	\$7,000 single \$14,000 family	Not Applicable	\$3,500 single \$7,500 family	Not Applicable
Prescription Drugs (Retail 30-day supply)	Integrated with Medical Deductible		Generic – 5% coinsurance Brand Name – 25% coinsurance Specialty – 25% coinsurance \$1,500 Out-of-Pocket Max per individual	
Bi-weekly Rates	<u>Non-Tobacco</u> Employee Only: \$10.00 Employee + Child(ren): \$23.00 Employee + Spouse: \$41.00 Employee + Family: \$64.00 <u>Tobacco</u> Employee Only: \$15.00 Employee + Child(ren): \$34.50 Employee + Spouse: \$61.50 Employee + Family: \$96.00		<u>Non-Tobacco</u> Employee Only: \$57.00 Employee + Child(ren): \$79.00 Employee + Spouse: \$137.00 Employee + Family: \$169.00 <u>Tobacco</u> Employee Only: \$85.50 Employee + Child(ren): \$118.50 Employee + Spouse: \$205.50 Employee + Family: \$253.50	

- Plan includes access to [Teladoc Services](#) and [Blue365 Discounts](#)