## **MEDICAL INSURANCE**

Cigna	The Preserver	The Protector	The Protector Plus
	Employee Cost Per Paycheck*	Employee Cost Per Paycheck*	Employee Cost Per Paycheck*
Employee Employee + Spouse Employee + Child(ren) Employee + Family	\$7.50 \$86.50 \$68.00 \$132.00	\$77.50 \$205.00 \$172.50 \$318.50	\$89.50 \$276.00 \$232.00 \$429.00
	In-Network	In-Network	In-Network
Deductible <sup>1</sup> Individual / Family	\$2,000 / \$4,000	\$500 / \$1,000	\$500 / \$1,000
Company Contribution to HSA**	\$500 / \$1,000	n/a	n/a
Out-of-Pocket Maximum <sup>2</sup> Individual / Family	\$2,500 / \$4,500	\$3,000 / \$6,000	\$3,000 / \$6,000
Office Visits			
Preventative Care Primary Care Physician/Specialist Diagnostic Lab / X-Ray Urgent Care	Covered at 100% Deductible then no charge Deductible then no charge Deductible then no charge	Covered at 100% \$25 copay / \$35 copay Deductible then 10% \$50 copay	Covered at 100% \$25 copay / \$35 copay Deductible then 10% \$50 copay
Hospital Visits Inpatient Care (Facility/Physician) Outpatient Surgery Major Diagnostics & Imaging Emergency Room	Deductible then no charge Deductible then no charge Deductible then no charge Deductible then no charge	Deductible then 10% & \$250 Deductible then 10% Deductible then 10% \$100 copay, waived if admitted	Deductible then 10% & \$250 Deductible then 10% Deductible then 10% \$100 copay, waived if admitted
Prescription Drug  Deductible  Retail Tier 1 / 2 / 3 Copay  Mail Order (90-day supply) Copay	Integrated with Medical Deductible \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120	N/A \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120	N/A \$10 copay / \$35 copay / \$60 \$20 copay / \$70 copay / \$120
	Out-of-Network	Out-of-Network	Out-of-Network <sup>3</sup>
Deductible Individual / Family	Not Covered	Not Covered	\$1,000 / \$2,000
Coinsurance (Member Pays)	Not Covered	Not Covered	30%
Out-of-Pocket Maximum Individual / Family	Not Covered	Not Covered	\$3,000 / \$6,000

\*If you have a spouse employed at Washington College, contact HR to see if you are eligible for a discount on your medical premiums

- \*\* Deposited with 1st paycheck of the year. Pro-rated for new hires during the year
- (1) Family deductible on The Preserver is non-embedded; no family member will receive post-deductible benefits until the entire family deductible is met
- (2) Out-of-Pocket maximum includes all cost-sharing: deductible, coinsurance and copays
- (3) Out-of-Network services subject to deductible, coinsurance and balance billing

Premiums are withheld from your paycheck on a pre-tax basis unless you request otherwise

Your election can only be changed during the plan year if you experience a qualifying life status change. If you have qualifying life event, log into Paycom to request the coverage change within 30 days of the event.