Premium and Benefit Comparison - Medical/Rx

Prepared for: Whitehall District Schools - All Staff

Effective Date: January 1, 2021



Medical Plan	MESSA	MESSA	MESSA	BCBSM	BCBSM	BCBSM	BCBSM	Priority Health	Priority Health	Priority Health	Priority Health
Plan Type	Choices II PPO	ABC Plan 1	ABC Plan 2	Community Blue PPO	Simply Blue HSA	Simply Blue HSA	Simply Blue HSA	Standard PPO	HSA PPO 100%	HSA PPO 90%	HSA HMO 70%
In Network Deductible	\$500/\$1,000	\$1,400/\$2,800	\$1,400/\$2,800	\$500/\$1,000	\$1,400/\$2,800	\$1,400/\$2,800	\$2,000/\$4,000	\$500 / \$1,000	\$1,400 / \$2,800	\$1,400 / \$2,800	\$2,000 / \$4,000
In Network Coinsurance	100%	100%	90%	80%	100%	80%	90%	100%	100%	90%	70%
In Network Coinsurance Max				\$1,500 / \$3,000	\$2,250/\$4,500 TROOP	\$2,250/\$4,500 TROOP	\$3,500/\$7,000 TROOP	n/a	\$2,800 / \$5,600 TROOP	\$2,800 / \$5,600 TROOP	\$2,750 / \$5,50 TROOP
Out of Network Deductible				\$1,000 / \$2,000	\$2,800 / \$5,600	\$2,800 / \$5,600	\$4,000 / \$8,000	\$1,000 / \$2,000	\$2,800 / \$5,600	\$2,800 / \$5,600	n/a
Out Network Coinsurance				60%	80%	60%	80%	80%	80%	70%	n/a
Out Network Coinsurance Max				\$3,000 / \$6,000	\$4,500 / \$9,000 TROOP	\$4,500 / \$9,000 TROOP	\$7,000 / \$14,000 TROOP	\$2,500 / \$5,000 TROOP	\$5,600 / \$11,200 TROOP	\$5,600 / \$11,200 TROOP	n/a
	In-network	In-network	In-network	In-network	In-network	In-network	In-network	In-Network	In-Network	In-Network	In-Network
Office Visit-PCP	\$20 copay, after deduct	100% after deduct	100% after deduct	\$20 copay	100% after deduct	80% after deduct	90% after deduct	\$20 copay	100% after deductible	90% after deductible	70% after deductible
Office Visit- Specialist	\$20 copay, after deduct	100% after deduct	100% after deduct	\$20 copay	100% after deduct	80% after deduct	90% after deduct	\$35 copay	100% after deductible	90% after deductible	70% after deductible
Urgent Care	\$25 copay, after deduct	100% after deduct	100% after deduct	\$20 copay	100% after deduct	80% after deduct	90% after deduct	\$50 copay	100% after deductible	90% after deductible	70% after deductible
Emergency Room	\$50 copay, after deduct	100% after deduct	100% after deduct	\$150 copay	100% after deduct	80% after deduct	90% after deduct	\$50 copay	100% after deductible	90% after deductible	70% after deductible
Ambulance	100%	100% after deduct	100% after deduct	80%	100% after deduct	80% after deduct	90% after deduct	\$50 copay	100% after deductible	90% after deductible	70% after deductible
Hospital	100%	100% after deduct	100% after deduct	80%	100% after deduct	80% after deduct	90% after deduct	100% after deductible	100% after deductible	90% after deductible	70% after deductible
	up to 38-yr, office visit copay	100% after deduct, up to 38-	100% after deduct, up to 38-		100% after deduct, up to	80% after deduct, up to	90% after deduct, up to	\$35 copay, up to	100% after deductible, up	90% after deductible, up to	70% after deductible, up to
Chiropractic Care	may apply	yr	yr	\$20 copay, up to 24/yr	24/yr	24/yr	24/yr	30 visits/yr	to 30 visits/yr	30 visits/yr	30 visits/yr
High Tech Imaging (MRI, PET, etc)	100%	100%	100%	80%	100% after deduct	80% after deduct	90% after deduct	\$150 copay, after deduct.	100% after deductible	90% after deductible	70% after deductible
DME/P&O	100%	100%	100%	80%	100% after deduct	80% after deduct	90% after deduct	100% after deductible	100% after deductible	90% after deductible	70% after deductible
Prescription Drug Copay	\$0/\$2/\$10/\$20/\$40	\$0/\$2/\$10/\$20/\$40	\$0/\$2/\$10/\$20/\$40	\$10/\$40/\$80	\$10/\$40/\$80	\$10/\$40/\$80	\$10/\$40/\$80	\$10/\$40	\$10/\$40	\$10/\$40	\$10/\$40
Prescription Drug Copay (after deductible on HSA plans)	\$0/\$2/\$10/\$20/\$40 Saver Rx	\$0/\$2/\$10/\$20/\$40 Saver Rx	\$0/\$2/\$10/\$20/\$40 Saver Rx	\$10/\$40/\$80 2x mail order	\$10/\$40/\$80 2x mail order	\$10/\$40/\$80 2x mail order	\$10/\$40/\$80 2x mail order	\$10/\$40 1x mail	\$10/\$40 1x mail	\$10/\$40 1x mail	\$10/\$40 1x mail
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(after deductible on HSA plans)		1	1		1	l I	11: " "	1 1	1 1 1 1	1	1
(after deductible on HSA plans) Enrollment Census	Saver Rx	Saver Rx	Saver Rx	2x mail order	2x mail order	2x mail order	2x mail order	1x mail	1x mail	1x mail	1x mail
(after deductible on HSA plans) Enrollment Census Single 43	\$710.42	\$634.26	\$590.50	2x mail order \$702.38	2x mail order \$584.77	2x mail order \$555.29	2x mail order \$506.64	1x mail \$738.41	1x mail \$588.17	1x mail \$522.84	1x mail \$412.77
Enrollment Census Single 43 Double 13	\$710.42 \$1,598.45	\$634.26 \$1,427.09	\$590.50 \$1,328.60	2x mail order \$702.38 \$1,685.98	2x mail order \$584.77 \$1,403.45	\$555.29 \$1,332.71	\$506.64 \$1,215.93	\$738.41 \$1,661.42	\$588.17 \$1,323.38	\$522.84 \$1,176.39	\$412.77 \$866.81
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35	\$412.77 \$866.81 \$1,126.86 \$137,196.20
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96	\$710.42 \$1,598.45 \$1,989.18	\$634.26 \$1,427.09 \$1,775.92	\$590.50 \$1,328.60 \$1,653.38	2x mail order \$702.38 \$1,685.98 \$2,107.12	2x mail order \$584.77 \$1,403.45 \$1,754.31	2x mail order \$555.29 \$1,332.71 \$1,665.88	2x mail order \$506.64 \$1,215.93 \$1,519.91	1x mail \$738.41 \$1,661.42 \$2,067.55	\$588.17 \$1,323.38 \$1,646.88	\$522.84 \$1,176.39 \$1,463.96	1x mail \$412.77 \$866.81 \$1,126.86
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35	\$412.77 \$866.81 \$1,126.86 \$137,196.20
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35	\$412.77 \$866.81 \$1,126.86 \$137,196.20
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35	\$412.77 \$866.81 \$1,126.86 \$137,196.20
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium CAP ANALYSIS	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35	\$412.77 \$866.81 \$1,126.86 \$137,196.20
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium CAP ANALYSIS Annual Plan Cost vs Cap Allowance	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58 \$1,931,154.96	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67 \$2,595,764.04	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78 \$2,416,653.36	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60 \$3,052,843.20	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72 \$2,541,644.64	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18 \$2,413,526.16	\$506.64 \$1,215.93 \$1,519.91 \$183,503.97 \$2,202,047.64	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89 \$3,022,018.68	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73 \$2,407,148.76	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35 \$2,139,784.20	\$412.77 \$866.81 \$1,126.86 \$137,196.20 \$1,646,354.40
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium CAP ANALYSIS Annual Plan Cost vs Cap Allowance Maximum Allowable School Cost	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58 \$1,931,154.96	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67 \$2,595,764.04	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78 \$2,416,653.36	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60 \$3,052,843.20 \$2,338,613.11	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72 \$2,541,644.64	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18 \$2,413,526.16	2x mail order \$506.64 \$1,215.93 \$1,519.91 \$183,503.97 \$2,202,047.64	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89 \$3,022,018.68	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73 \$2,407,148.76	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35 \$2,139,784.20	\$412.77 \$866.81 \$1,126.86 \$137,196.20 \$1,646,354.40
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium CAP ANALYSIS Annual Plan Cost vs Cap Allowance Maximum Allowable School Cost Projected Total Premium	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58 \$1,931,154.96	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67 \$2,595,764.04 \$2,338,613.11 \$2,595,764.04	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78 \$2,416,653.36 \$2,338,613.11 \$2,416,653.36	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60 \$3,052,843.20 \$2,338,613.11 \$3,052,843.20	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72 \$2,541,644.64 \$2,338,613.11 \$2,541,644.64	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18 \$2,413,526.16 \$2,338,613.11 \$2,413,526.16	\$506.64 \$1,215.93 \$1,519.91 \$183,503.97 \$2,202,047.64 \$2,338,613.11 \$2,202,047.64	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89 \$3,022,018.68 \$2,338,613.11 \$3,022,018.68	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73 \$2,407,148.76 \$2,338,613.11 \$2,407,148.76	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35 \$2,139,784.20 \$2,338,613.11 \$2,139,784.20	\$412.77 \$866.81 \$1,126.86 \$137,196.20 \$1,646,354.40 \$2,338,613.11 \$1,646,354.40
(after deductible on HSA plans) Enrollment Census Single 43 Double 13 Family 96 Projected Monthly Premium Projected Annual Premium CAP ANALYSIS Annual Plan Cost vs Cap Allowance Maximum Allowable School Cost Projected Total Premium Projected Employee Cost	\$710.42 \$1,598.45 \$1,989.18 \$160,929.58 \$1,931,154.96	\$634.26 \$1,427.09 \$1,775.92 \$216,313.67 \$2,595,764.04 \$2,338,613.11 \$2,595,764.04	\$590.50 \$1,328.60 \$1,653.38 \$201,387.78 \$2,416,653.36 \$2,338,613.11 \$2,416,653.36	2x mail order \$702.38 \$1,685.98 \$2,107.12 \$254,403.60 \$3,052,843.20 \$2,338,613.11 \$3,052,843.20	2x mail order \$584.77 \$1,403.45 \$1,754.31 \$211,803.72 \$2,541,644.64 \$2,338,613.11 \$2,541,644.64	2x mail order \$555.29 \$1,332.71 \$1,665.88 \$201,127.18 \$2,413,526.16 \$2,338,613.11 \$2,413,526.16	\$506.64 \$1,215.93 \$1,519.91 \$183,503.97 \$2,202,047.64 \$2,338,613.11 \$2,202,047.64	1x mail \$738.41 \$1,661.42 \$2,067.55 \$251,834.89 \$3,022,018.68 \$2,338,613.11 \$3,022,018.68	\$588.17 \$1,323.38 \$1,646.88 \$200,595.73 \$2,407,148.76 \$2,338,613.11 \$2,407,148.76	\$522.84 \$1,176.39 \$1,463.96 \$178,315.35 \$2,139,784.20 \$2,338,613.11 \$2,139,784.20	\$412.77 \$866.81 \$1,126.86 \$137,196.20 \$1,646,354.40 \$2,338,613.11 \$1,646,354.40

Note 1: Premiums include estimated Federal and State taxes & fees

\$4,659.50

\$1,481.15

\$4,450.44

\$4,659.50

Per Pay

\$61.71

\$185.44

\$194.15

\$2,100.38

\$567.23

\$2,394.12

\$2,100.38

Per Pay

\$23.63

\$99.76

\$87.52

\$629.90

\$42.11

\$1,212.24

\$629.90

\$1.75

\$50.51

\$26.25

\$6,074.78

\$1,384.67

\$5,500.80

\$6,074.78

Per Pay

\$57.69

\$229.20

\$253.12

Note 2: United Healthcare declined to quote.

CAP Variance (Premium + Deduct.)

Cap Variance / 24 pays

Single

Double

Family

Single Double

Family

Please note: This information is intended to summarize and illustrate the benefits, rates, taxes, and other fees associated with purchase of the proposed plans. These descriptions do not modify any definitions expressly stated in any contracts of insurance. Tax calculations reflect the State and Federal tax assumptions used by the insurance companies and included in their proposed rates. Employers should consult with legal counsel regarding compliance with state and federal laws.

\$779.90

\$1,619.59

\$5,261.56

\$4,779.90

Per Pay

\$67.48

\$219.23

\$199.16

-\$971.74

\$1,035.79

\$3,860.20

\$3,028.26

Per Pay

\$43.16

\$160.84

\$126.18

\$5,599.94

\$1,817.03

\$5,206.08

\$5,599.94

Per Pay

\$75.71

\$216.92

\$233.33

\$551.90

\$14.15

\$1,149.60

\$551.90

Per Pay

\$0.59

\$47.90

\$23.00

-\$1,643.14

-\$769.81

-\$614.28

-\$1,643.14

Per Pay

-\$32.08

-\$25.60

-\$68.46

-\$5,688.34

-\$2,090.65

-\$4,329.24

-\$5,688.34

Per Pay

-\$87.11

-\$180.39

-\$237.01

\$1,841.06

\$1,323.35

\$4,810.44

\$4,541.06

Per Pay

\$55.14

\$200.44

\$189.21