

## **Town of Cary Health Insurance Plan Highlights**

### **07/01/2018 - 06/30/2019**

<b>Benefits</b>	<b>In Network</b>								
<b>Office Visit</b> <i>Also applies to mental health office visits</i>	\$0 preventative care copay \$25 primary care office visit copay \$40 specialist office visit copay \$40 Chiropractic Office visit copay								
<b>Vision</b>	\$0 exam copay \$15 materials copay (applies to lenses and frames, not contact lenses) \$15 contact lens fitting Members may incur additional costs if hardware/contact lenses exceeds the standard allowance. Refer to the Superior Vision summary for details on annual allowances and discounts such as refractive surgery								
<b>Urgent Care</b>	\$25 copay								
<b>Emergency Room</b>	\$150 /\$450 copay The first visit to the Emergency Room for any covered member is a \$150 copay. Any subsequent visit(s) for the same person through the remainder of the plan year is a \$450 copay.								
<b>Hospital Facility - Inpatient / Outpatient</b>									
<b>Deductible (Individual / Family)</b>	\$500 Individual / \$1000 Family (two individuals)								
<b>Coinsurance</b>	After deductible is met, Employee pays 20% of allowed charges / Plan pays 80%.								
<b>Employee Medical Out-of-Pocket Limit</b> <i>Total of deductible, copays (office visits, urgent care, Emergency Dept.) and coinsurance</i>	<b>\$3,500 Individual / \$7,000 Family (two individuals)</b>								
<b>Prescriptions</b>									
<b>Employee Rx Out-of-Pocket Limit</b> <i>Total of Rx copays</i>	<b>\$1,500 Individual / \$3,000 Family (two individuals)</b>								
<b>Retail Pharmacy</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Tier 1 (Generic)</td> <td style="text-align: center;">Tier 2</td> <td style="text-align: center;">Tier 3</td> <td style="text-align: center;">Tier 4 (Specialty Drugs)</td> </tr> <tr> <td style="text-align: center;">\$0</td> <td style="text-align: center;">\$25</td> <td style="text-align: center;">\$50</td> <td style="text-align: center;">\$0</td> </tr> </table>	Tier 1 (Generic)	Tier 2	Tier 3	Tier 4 (Specialty Drugs)	\$0	\$25	\$50	\$0
Tier 1 (Generic)	Tier 2	Tier 3	Tier 4 (Specialty Drugs)						
\$0	\$25	\$50	\$0						
<b>Mail Order</b> <i>2 copays for a 90-day supply</i>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Tier 1 (Generic)</td> <td style="text-align: center;">Tier 2</td> <td style="text-align: center;">Tier 3</td> <td style="text-align: center;">Tier 4 (Specialty Drugs)</td> </tr> <tr> <td style="text-align: center;">\$0</td> <td style="text-align: center;">\$50</td> <td style="text-align: center;">\$100</td> <td style="text-align: center;">\$0</td> </tr> </table>	Tier 1 (Generic)	Tier 2	Tier 3	Tier 4 (Specialty Drugs)	\$0	\$50	\$100	\$0
Tier 1 (Generic)	Tier 2	Tier 3	Tier 4 (Specialty Drugs)						
\$0	\$50	\$100	\$0						
<b>Per Paycheck Deductions</b>	<b>Rates</b>	<b>Reward Rates</b>							
<b>Individual</b>	<b>\$88.75</b>	<b>\$29.41</b>							
<b>Employee + Spouse</b>	<b>\$212.90</b>	<b>\$153.55</b>							
<b>Employee + Child(ren)</b>	<b>\$171.52</b>	<b>\$111.62</b>							
<b>Family</b>	<b>\$289.13</b>	<b>\$229.78</b>							