here are many options available with medical insurance plans and we understand everyone wants a plan that will give them the best benefit for their unique family situation at the lowest cost. This summary is intended to help you understand how the Premier plan works, and there are a few notes about the “high deductible plans” at the bottom.

Your Premier medical insurance plan will start paying 100% of your covered care costs after the following:

**Base Plan**

First, your deductible. As an individual, as soon as you pay $750 in deductible, 80% of your future health care costs are paid by insurance. If more than one person in your family gets medical care and all the deductibles you pay together add up to $1,250, then 80% of your future covered in-network health care costs are paid by insurance for ALL covered people in your family. Note: Office visit co-pays are not counted toward your deductible.

Second, your out of pocket expenses. As an individual, as soon as you pay $4,250 out-of-pocket (including deductibles, co-pays, and your 20% of co-insurance costs) all of your future covered health care costs are 100% paid for by insurance.

If more than one person in your family gets sick and your family’s total out-of-pocket expenses reach $7,750, ALL family members are covered after that for 100% of their covered care costs.

**Wellness Plan**

Everything is the same as above, but the totals you pay will be a lot lower. Check your plan comparison sheet for details.

**So what is the deal with High Deductible Plans?**

One major difference with the Consumer Choice and Bronze plans is that any one person on a family plan can meet the annual deductible and out-of-pocket maximums. The total annual family deductible must be met before anyone on the family plan receives co-insurance, and the full family out-of-pocket maximums must be met before covered in-network care costs are paid at 100%. Note: Office visits and even drug co-pays are counted towards your out-of-pocket max with the high deductible plans.

A great benefit with the high deductible plans is that you can open a Health Savings Account (HSA) and STSIG will contribute $750 annually to it for those on an individual plan, and $1,500 for those on a family plan!
Did you know? Here are some facts that are often confusing to plan members.

**In-network provider:** Medical service providers we have contracted with to save you money.

**High deductible plan:** A plan that has a higher deductible and out of pocket max up front, but has lower premiums, and qualifies for an HSA. As a bonus, the JPA deposits some money in your HSA account for you!

**EoB: Explanation Of Benefits.** A form sent to the member explaining in detail all actions taken on a submitted claim.

**Pharmacy Definitions**

**Generic:** A less expensive version of the preferred drug with a generally lower co-pay.

**Preferred:** Drugs that are preferred by Envision due to safe use, clinical efficacy, therapeutic need and cost.

**Non-preferred:** Usually higher-cost medications new to the market; they will have a higher co-pay.

**Specialty Drugs:** Expensive medications for chronic diseases like rheumatoid arthritis, MS, or hepatitis C. Needs special handling and care.

**Formulary list:** A list of prescription drugs that offer the greatest overall value.

- If you are on the premier base plan, go to the emergency room and are not admitted, then you have to pay a $200 copay that is NOT counted toward your annual deductible. If you are on the Wellness plan it is only $100.

- Under the premier plan, you have to pay a small copay for all office visits, plus 20% co-insurance for the remainder of the bill. The copays do not count toward your annual deductible, but do count toward your max out-of-pocket expense, along with the 20% co-insurance.

- Under the high deductible plans, you don't have any copays for office visits, instead you pay the whole cost until your deductible is met for the year.

- If you are in a family premier plan, each person must meet the individual deductible before co-insurance kicks in for them, but once the family deductible is met, co-insurance kicks in for everyone.

- If you are in a family high deductible plan, any one person can meet the family deductible and co-insurance kicks in for everyone.