# **Health Insurance Summary**



There are a lot of details that go into health insurance plans and only you know what plan is right for you and your family. Please take some time to review the materials on the Benefits Library.

Benefits annual enrollment will start on Friday, February 21, 2025 and runs through 5 p.m. on Friday, March 7, 2025. Elections made will be effective April 1, 2025.

### **Health Plans**

There are four options for our enhanced new health plans:

Enrich HMO HDHP Elite

Enrich Point of Service (POS)

• Enrich HMO HDHP Plus

Explore HMO HDHP

## **Dependent Wrap**

A dependent wrap will be available for the Enrich Network. This will allow you to be able to cover dependents living outside of the Health System provider area to have in-network coverage for those dependents.

#### **Embedded Deductible**

Our health insurance plans utilize an embedded deductible. If one family member meets the individual deductible, the deductible is satisfied for his or her claims. The remaining family members' claims accumulate together to equal the remaining amount of the family deductible. Once the family deductible is met, any other dependents of the plan will no longer need to meet their individual deductibles. Please see the Schedule of Benefits for more details.



# **Deductibles, Coinsurance, and Copay Summary**

	Enrich HMO	Enrich HMO	Enrich Point of Service (POS)		E LIMO LIBUR	
HDHP Elite		HDHP Plus	In Network	Out of Network	Explore HMO HDHP	
Deductibles	\$5,000/\$10,000	\$3,500/\$7,000	\$3,000/\$6,000	\$6,000/\$12,000	\$3,500/\$7,000	
Max Out of Pocket	\$6,000/\$12,000	\$5,000/\$10,000	\$9,000/\$18,000	\$18,000/\$36,000	\$5,000/\$10,000	
Coinsurance	20%	20%	20%	40%	20%	
Primary Care Copay	-	-	\$30	Deductible, coinsurance	-	
Specialty Care Copay	-	-	\$60	Deductible, coinsurance	-	
Urgent Care Copay	-	-	\$30	Deductible, coinsurance	-	
Emergency Room Copay	-	-	\$250	\$250	-	
Pharmacy Copay	N/A - includes extended preventive drugs	N/A - includes extended preventive drugs	Tier 1 = \$5 Tier 2 = \$40 Tier 3 = \$70 Tier 4 = 30%  N/A  N/A includes extended preventive drugs			
HSA Eligible	Yes	Yes	No	No	Yes	
Dependent Wrap	Yes	Yes	Yes	Yes	No	

## **Health Plan Provider Networks**

		Enrich HMO HDHP Elite	Enrich HMO HDHP Plus	Enrich Point of Service (POS)	Explore HMO HDHP
Provider Networks	Marshfield Clinic Health System		In Network – Enrich Network	Security Health Plan Contracted Vendor - network broker to find best available	
	UW Health		Out of Network - all other providers		
		Unity Point - Meriter		(includes Dean, Aspirus, Mayo)	network based on location

