



Portage County Health Insurance Plans

Effective January 1, 2020



Health Plans Effective January 1, 2020				
Plan Name Provider Network	PPO Plan Blue Preferred		High Deductible Health Plan Blue Preferred	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible - Calendar Year*				
Single	\$1,500	\$3,000	\$2,000	\$3,000
Family	\$3,000	\$6,000	\$4,000	\$6,000
Coinsurance	10%	30%	10%	30%
Medical Out-of-Pocket Max** (Includes Deductible)	\$4,925 Single / \$9,850 Family In Network		Includes Deductible + Coinsurance	
	Medical Deductible and Coinsurance			
Single	\$3,000	\$6,000	\$4,000	\$9,000
Family	\$6,000	\$12,000	\$8,000	\$18,000
	Medical Copay Limits			
Single	\$1,925			
Family	\$3,850			
Pharmacy Out-of-Pocket	Pharmacy Copay		Inc. Medical & Rx Copays	
Single	\$1,925		n/a	
Family	\$3,850		n/a	
Office Visits (PCP / SCP)	\$30 PCP/\$50 SCP	30% after ded	10% after ded	30% after ded
Preventive Care	100%	30% after ded	100%	30% after ded
Hospital Services	10% after ded	30% after ded	10% after ded	30% after ded
LiveHealth Online	\$10 PCP/\$30 SCP	30% after ded	10% after ded	30% after ded
Retail Health Clinic	\$15	30% after ded	10% after ded	30% after ded
Urgent Care	\$30	30% after ded	10% after ded	30% after ded
Emergency Room***	\$100 Co-pay, then Ded/Coinsurance		10% after Ded	
Prescription Drugs Retail	30-day Supply \$5 / \$25 / \$50		30-day Supply 10% after ded	
Full Single Monthly Premium	\$867.31		\$805.90	
Full Family Monthly Premium	\$1,929.90		\$1,794.31	
Portage County HSA Contribution	n/a		\$500 for Single Plan, \$1,000 for Family Plan	

*Deductible for the PPO plan is embedded for family (no individual member of the family will incur more than the single deductible). HDHP is a true family deductible.
 ** Medical Out of Pocket Max for the PPO Plan and HDHP is embedded for family (no individual member of the family will incur more than the single out of pocket maximum).
 ***Emergency Room copay is waived upon admittance to the hospital.