

Medical plan highlights

Most percentages shown are what you pay

	PPO Essential HSA Plan		PPO Moderate HSA Plan		PPO Premier Plan	
	Network ¹	Out-of-Network ¹	Network ¹	Out-of-Network ¹	Network ¹	Out-of-Network ¹
Annual deductible ²						
Individual	\$5,000	\$10,000	\$2,500	\$5,000	\$1,000	\$2,000
Family	\$10,000	\$20,000	\$5,000	\$10,000	\$2,000	\$4,000
Gallagher account contribution						
Individual		\$500		\$500		N/A
Family		\$1,000		\$1,000		N/A
Cost Share (office visits, hospital care, urgent care, X-rays, lab tests, etc.)	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	PCP: \$25 copay ⁴	You pay 40% after deductible
					Specialist: \$50 copay ⁴	
					PT/Chiropractic: \$50 copay ⁴	
					Lab test: You pay 20% after deductible	
Annual out-of-pocket maximum (includes deductible)						
Individual	\$8,000	\$16,000	\$5,000	\$10,000	\$3,000	\$6,000
Family	\$16,000	\$32,000	\$10,000	\$20,000	\$6,000	\$12,000
You may be subject to balance billing by out-of-network providers even after the out-of-pocket maximum is met.						
Preventive care	You pay 0%	You pay 40% after deductible	You pay 0%	You pay 40% after deductible	You pay 0%	You pay 40% after deductible
Inpatient hospital services (pre-authorization required) ³	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible
Emergency room (emergency care only)		You pay 20% after deductible			You pay \$250 facility copay	
Therapy services (outpatient physical, occupational and speech)						
• 30-visit maximum per year	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible
• Excess visits require authorization for medical necessity						
Mental health and substance abuse treatment	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	Inpatient: You pay 20% after deductible	You pay 40% after deductible
					Outpatient: You pay \$25 copay	

1. The network deductible and out-of-pocket expenses offset the out-of-network deductible and out-of-pocket maximums and vice versa.

2. Under the PPO Premier plan, you don't need to meet the deductible before prescription drug coverage and office visit copays apply. For the PPO Essential HSA Plan and PPO Moderate HSA Plan plans, you pay out-of-pocket for prescription drugs until you meet your deductible.

3. Pre-authorization is required at least one business day before an elective admission and within two business days of an emergency or maternity admission. A \$500 penalty applies if not pre-certified for out-of-network facilities.

4. Copays cover the office visit charges that are assessed to consult with a provider or be admitted to an emergency room. Other medical services delivered during a provider appointment or emergency room treatment—e.g., lab work, X-rays, etc.—are billed separately and will be subject to deductible and coinsurance.

Note: If you're considering an HSA and enrolled in an FSA, see Health Care FSA information in the Financial Wellbeing section of the 2027 Benefits & Cost Summary (page 28).