



SUMMARY OF BENEFITS

9/1/2024 - 8/31/2025

OPEN ENROLLMENT: 5/1/2024 - 5/31/2024*

* **NOTE:** There will be an additional Open Enrollment opportunity in August 2024 for summer changes.

MEDICAL - BCBS		PPO BUY UP PLAN	PPO BASE PLAN	BLUE EDGE HSA/HDHP
Medical Network		Blue Choice PPO	Blue Choice PPO	Blue Choice PPO
Deductible	Individual (In/Out)	\$500 / \$4,000	\$4,000 / \$8,000	\$3,500 / \$5,000
	Family (In/Out)	\$1,500 / \$12,000	\$8,000 / \$16,000	\$10,500 / \$15,000
Coinsurance (In/Out)		80% / 60%	70% / 50%	100% / 80%
Out of Pocket Max	Individual (In/Out)	\$4,000 / \$5,000	\$9,450 / \$20,000	\$3,500 / \$10,000
	Family (In/Out)	\$11,000 / \$15,000	\$18,900 / \$40,000	\$10,500 / \$20,000
Copays	PCP	\$45	\$45	Deductible + Coinsurance
	Specialist	\$70	\$70	Deductible + Coinsurance
	MDLive	\$45	\$45	100% after Deductible
	Preventive Care	100% of allowable amount	100% of allowable amount	100% of allowable amount
	Urgent Care	\$75	\$75	Deductible + Coinsurance
	Emergency Room	Deductible + Coinsurance after \$500 copay	Deductible + Coinsurance after \$500 copay	Deductible + Coinsurance
Pharmacy Copays (30 Day Supply)		\$0 / \$35 / \$70 / Tier 1, 2, 3	\$15 / \$30 / \$50 / Tier 1, 2, 3	Deductible + Coinsurance
EMPLOYEE MONTHLY COST				
Employee Only		\$215.35	\$89.61	\$131.31
Employee + Spouse		\$694.63	\$451.96	\$532.44
Employee + Child(ren)		\$658.55	\$424.68	\$502.24
Employee + Family		\$1,179.06	\$818.19	\$937.87

Blue Cross Blue Shield (Medical): www.bcbstx.com, **Account Number:** 389492, **Phone Number:** 1-800-521-2227

Should you require any further assistance for your benefits, please feel free to contact any of the following team members:



Brandon Campbell
Benefits/Leave/Workers Compensation Specialist
Direct: 281-689-4004
Email: bcampbell@splendoraisd.org



Sara Payne
Vice President
Direct: 281-235-0918
Email: paynes@anco.com

Ronnie O'Neal
Account Executive
Direct: 979-774-6298
Email: oneal@anco.com

Penny Garcia
Account Manager
Direct: 979-774-6286
Email: garciap@anco.com