

A unique feature of your health benefit plan is that you can keep it into retirement! There are rules however and a vesting schedule to be aware of in order to have benefits when you retire. Please refer to [cpsb.org](http://cpsb.org) or call the Health Insurance Department for more information.

## HIGH OPTION

Plan Features	PPO		Non-PPO
<b>Deductible</b>			
-Individual	\$1,250		\$2,500
-Family	\$3,750		\$7,500
<b>Annual Out-of-Pocket Maximum**</b>			
-Individual	\$4,500		\$8,000
-Family	\$13,500		\$24,000
<b>Doctor Office Visits</b>	\$40 Co-Pay (Primary Care)	\$55 Co-Pay (Specialist)	55% After Deductible
<b>In-Patient/Out-Patient Benefits</b>	85% After Deductible		55% After Deductible
<b>Prescription Drugs (w/ separate deductible)</b>			
• Express Scripts Network	<b>\$250 deductible, then:</b> \$15 Value Drug (Tier 1) \$35 Preferred Brand (Tier 2) \$55 Non-Preferred Brand (Tier 3) \$105 Specialty Drug/Injectible (Tier 4)		
<b>Prescription Drug Mail Order (90-day Supply)</b>			
• Forms available in the Health Insurance Department and at the Blue Cross Office. • 90-day supply available only by mail order	<b>\$250 deductible, then:</b> \$45 Value Drug (Tier 1) \$105 Preferred Brand (Tier 2) \$165 Non-Preferred Brand (Tier 3) N/A Specialty Drug/Injectible (Tier 4)		

## HIGH OPTION – Group Care PPO RATES

Coverage Level	Monthly
Employee Only	\$403.34
Employee + Spouse	\$906.98
Employee + Child(ren)	\$655.96
Family	\$1,159.64

