Medical Benefits Quick Overview

Choose Your Plan

	Buy-Up PPO	Base PPO	QHDHP (HSA) Plan
	In-network	**In-network**	**In-network**
Deductible (calendar year basis)			
Individual	$1,000	$1,500	$3,400
Family	$2,000	$3,000	$6,800
Coinsurance			
Individual pays	20%	30%	0%
Out-of-Pocket Maximum (Calendar Year Basis)			
Individual	$3,000	$4,000	$3,400
Family	$6,000	$8,000	$6,800
Copay/cost share			
Preventive services	Covered at 100%	Covered at 100%	Covered at 100%
Primary care or specialist	$25/$25 copay	$40/$40 copay	Deductible
Urgent care	$25 copay	$40 copay	Deductible
Virtual visit	$25 copay	$40 copay	Up to $59
Hospital/facility services			
Inpatient/outpatient	Deductible, then 20%	Deductible, then 30%	Deductible
Emergency room	$150 copay, then deductible, then 20%	$150 copay, then deductible, then 30%	Deductible
Prescription drugs retail copay/cost share (up to 31-day supply)			
Tier 1 (generic)	$12 copay	$12 copay	Deductible
Tier 2 (formulary brand drug)	$35 copay	$35 copay	Deductible
Tier 3 (non-formulary drug)	$60 copay	$60 copay	Deductible
Prescription drugs mail order copay/cost share (up to 120-day supply)			
Tier 1 (generic)	$36 copay	$36 copay	Deductible
Tier 2 (formulary brand drug)	$105 copay	$105 copay	Deductible
Tier 3 (non-formulary drug)	$180 copay	$180 copay	Deductible
Please refer to the summary plan description in the Carrier Contacts and Resources Tab for out-of-network benefits and more details.			

How Much You Will Pay

Buy-up PPO plan ($1,000 deducible)	Total plan cost	Cargo Largo contribution	Associate monthly cost	Associate weekly cost (wellness*)	Associate weekly cost (non-wellness)
Employee only	$889.05	$580.82	$282.10	$65.10	$76.64
Employee + spouse	$2,068.43	$991.13	$1,032.71	$238.32	$249.86
Employee + child(ren)	$1,753.26	$840.11	$875.35	$202.00	$213.54
Family	$2,671.94	$1,280.31	$1,334.02	$307.85	$319.39

Base PPO plan ($1,500 deductible)	Total plan cost	Cargo Largo contribution	Associate monthly cost	Associate weekly cost (wellness*)	Associate weekly cost (non-wellness)
Employee only	$773.43	$594.26	$179.16	$41.35	$52.88
Employee + spouse	$1,799.47	$983.15	$816.32	$188.38	$199.92
Employee + child(ren)	$1,525.26	$833.33	$691.93	$159.68	$171.21
Family	$2,324.48	$1,269.98	$1,054.50	$243.35	$254.88

QHDHP (HSA) plan ($3,300 deductible)	Total plan cost	Cargo Largo contribution	Associate monthly cost	Associate weekly cost (wellness*)	Associate weekly cost (non-wellness)
Employee only	$659.48	$596.64	$62.84	$14.50	$26.04
Employee + spouse	$1,534.36	$993.42	$540.94	$124.83	$136.37
Employee + child(ren)	$1,300.53	$842.03	$458.51	$105.81	$117.35
Family	$1,982.02	$1,283.25	$698.77	$161.25	$172.79

* Wellness participants must complete a wellness visit and health risk assessment on an annual basis.

Associate cost assumes a Wellness Participant. Non-wellness participants pay an additional $50.00/month.

Contact Human Resources for information on becoming a wellness participant.