## Rochester Community Schools Blue Cross Blue Shield of Michigan - PPO 2021 Calendar Year

Group		REA PPO	REA CDHP	RAA PPO	RAA CDHP	RSPA PPO	RSPA CDHP	SMC	Executive	Para Hired Pre 8/1/2011	Para Hired After 8/1/2011	CMGT; Children's Program
Office Visit Co-Pav		\$20	n/a	\$20	n/a	\$20	n/a	\$20	\$20	\$20	\$20	\$20
Emergency Room		\$150	n/a	\$75	n/a	\$250	n/a	\$75	\$75	\$250	\$250	\$250
Emergency Room		Ψ130	After Deductible	Ψ13	After Deductible	Ψ230	After Deductible	Ψ13	Ψ13	Ψ230	Ψ230	Ψ230
Prescriptions	Generic	\$5	\$10	\$5	\$10	\$5	\$10	\$5	\$5	\$5	\$5	\$5
	Preferred	\$35	\$40	\$35	\$40	\$35	\$40	\$35	\$35	\$35	\$35	\$35
	Non-Preferred	\$50	\$80	\$50	\$80	\$50	\$80	n/a	n/a	\$50	\$50	\$50
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Annual Deductible	Individual	\$500	\$1,400	\$500	\$1,400	\$500	\$1,400	\$500	\$250	\$500	\$1,000	\$1,000
(per calendar year)	Family	\$1,000	\$2,800	\$1,000	\$2,800	\$1,000	\$2,800	\$1,000	\$500	\$1,000	\$2,000	\$2,000
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Co-insurance Employee Responsibility		10%	0%	10%	0%	10%	0%	10%	10%	10%	10%	10%
Co-Insurance Limit	Individual	\$1,000	n/a	\$1,000	n/a	\$1,000	n/a	\$1,000	\$1,000	\$1,000	\$1,000	\$1,500
(per calendar year)	Family	\$2,000	n/a	\$2,000	n/a	\$2,000	n/a	\$2,000	\$2,000	\$2,000	\$2,000	\$3,000
Out-of-Pocket Limit	Individual	\$4,000	\$2,250	\$6,350	\$2,250	\$6,350	\$2,250	\$6,350	\$6,350	\$6,350	\$6,350	\$6,350
(per calendar year)	Family	\$8,000	\$4,500	\$12,700	\$4,500	\$12,700	\$4,500	\$12,700	\$12,700	\$12,700	\$12,700	\$12,700
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<b>HSA Funding (Annual)</b>	Individual		\$700		\$700		\$700					
	Two Person		\$1,400		\$1,400		\$1,400					
	Family		\$1,400		\$1,400		\$1,400					
Employee Payroll	Individual	\$127.03	\$113.23	\$127.42	\$113.23	\$126.33	\$113.23	\$128.71	\$136.37	\$126.33	\$120.74	\$120.41
(Monthly)	Two Person	\$304.88	\$267.08	\$305.81	\$267.08	\$303.18	\$267.08	\$308.89	\$327.29	\$303.18	\$289.78	\$288.98
Undated 11/28/2019	Family	\$381.10	\$328.03	\$382.26	\$328.03	\$378.98	\$328.03	\$386.12	\$409.11	\$378.98	\$362.23	\$361.23

Updated 11/28/2019