



	\$250 PPO	\$500 PPO	\$750 PPO	\$1,000 PPO	\$1,500 PPO
Deductible - Individual	\$250	\$500	\$750	\$1,000	\$1,500
Deductible - Family	\$500	\$1,000	\$1,500	\$2,000	\$3,000
Preventative	Covered 100%				
Primary & Specialist Visit	\$50 Copay After Deductible				
Telemedicine	Free & Unlimited				
Urgent Care	\$50 Copay After Deductible				
Labs/X-Rays	\$25/\$50 Copay After Deductible				
Emergency Room	\$250 Copay After Deductible				
Mental Health	\$50 Copay After Deductible				
Out & Inpatient Services	\$250/\$1,000 Copay After Deductible				
Generic RX	\$0	\$0	\$0	\$0	\$0

<b>AGES 18 - 29</b>	Employee	\$339	\$319	\$299	\$279	\$259
	Emp + Spouse	\$659	\$639	\$619	\$599	\$579
	Emp + Children	\$679	\$629	\$609	\$589	\$569
	Family	\$929	\$879	\$859	\$839	\$819
<b>AGES 30 - 44</b>	Employee	\$409	\$379	\$359	\$339	\$309
	Emp + Spouse	\$729	\$679	\$649	\$629	\$609
	Emp + Children	\$709	\$669	\$639	\$619	\$593
	Family	\$969	\$939	\$909	\$879	\$859
<b>AGES 45 - 54</b>	Employee	\$439	\$409	\$389	\$369	\$349
	Emp + Spouse	\$739	\$719	\$689	\$669	\$659
	Emp + Children	\$729	\$709	\$679	\$659	\$639
	Family	\$1,019	\$989	\$969	\$949	\$929
<b>AGES 55 - 64</b>	Employee	\$489	\$459	\$439	\$419	\$399
	Emp + Spouse	\$759	\$739	\$719	\$699	\$689
	Emp + Children	\$739	\$719	\$699	\$689	\$649
	Family	\$1,049	\$1,029	\$989	\$969	\$949

<a href="#">Doctor Finder Tool</a>	<a href="#">Benefit Summary</a>				
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