



2016 Non-Medicare medical and drug plan designs

Non-Medicare Medical (Medical Mutual)

	2015 Plan Design	2016 Plan Design
Deductible (In-Network)	\$850	\$1,000
Total (In-Network) Out-of-Pocket Maximum	\$3,350	\$4,900
Deductible (Out-of-Network)	\$1,500	\$2,000
Total (Out-of-Network) Out-of-Pocket Maximum	\$4,500	\$7,000
Office Visit (Medical Home)	\$10	\$15
Office Visit Copay (Primary Care Physician)	\$20	\$25
Office Visit Copay (Specialist)	\$35	\$40
Office Visit Copay (Chronic Conditions)	\$10 (Primary Care Physician) \$20 (Specialist)	\$25
Inpatient Deductible	\$150	No Change
Emergency Room	\$150 (emergency) \$250 (non-emergency)	No Change
Preventive Services	100%	No Change
Skilled Nursing/Hospice	100%	No Change
Other Medical Services*	20% Coinsurance	25% Co-insurance

** Additional enrollee cost-share if non-preferred providers are used for lab work subject to reference pricing.*



2016 Non-Medicare medical and drug plan designs

Non-Medicare Prescription Drug (Express Scripts)

	2015 (Current Plan Design)	2016 Plan Design
Preferred Retail Pharmacy Network	55K pharmacies	No change
Annual Deductible(s)	\$100 (brands only)	\$100 (generics) \$200 (brands)
Formulary	High performance	No change
Generics	\$4 retail/\$10 mail	20% co-insurance: \$4 min/\$8 max retail \$10 min/\$20 max mail
Formulary Brand	30% coinsurance: \$30 min/\$60 max retail \$75 min/\$150 max mail	No change
Non-Formulary Brand	Not covered	No change
Specialty Drugs	40% coinsurance: \$60 max	40% co-insurance \$150 max
Value-Based Insurance Design (VBID) – Generics for chronic conditions	\$0	No change
VBID - Diabetes items for Disease Management participants	\$0	30% co-insurance: \$30 min/\$60 max retail \$75 min/\$150 max mail
OTC/Generic PPIs (heartburn meds)	\$50 coinsurance: \$15 retail/\$40 mail min	No coverage for OTCs, Generic: 50% co-insurance: \$25 retail/\$62.50 mail min
Brand PPIs	Not covered	No Change
Maximum Out-of-Pocket	\$3,250	\$1,950 (per Affordable Care Act limits)

2016 Dental and Vision Plan Designs

Proposed changes to the voluntary dental plan for 2016 reflect current practice standards and coverage differentials to encourage participants' use of network providers. No changes are recommended for the 2016 voluntary vision plan.