



WCA GROUP HEALTH TRUST

**SCHOOL DISTRICT OF BOWLER
BENEFIT SUMMARY**

(Effective 07/01/2021)

		Plan Benefits	
Network		UHC Choice +	
Plan Type		EPO w/HDHP	
Accumulation Type		Embedded	
Benefit Accumulator		Plan Year	
		In-Network	Out-of-Network
Deductible		\$3,000/\$6,000	NA
Coinsurance		90%	NA
Total Maximum Out-of-Pocket (Deductible, Coinsurance)		\$5,000/\$10,000	NA
Medical Benefits			
Inpatient Hospital		Deductible/90%	Not Covered
Outpatient Hospital		Deductible/90%	Not Covered
Office Visit		Deductible/90%	Not Covered
Specialist Office Visit		Deductible/90%	Not Covered
Preventive Exam		100%/Deductible Waived	Not Covered
Chiropractic Office Visit		Deductible/90%	Not Covered
Phys/Occ/Speech Therapy (Combined 60 visit per benefit period for PT/OT/ST)		Deductible/90%	Not Covered
Durable Medical Equipment & Prosthetic Devices		Deductible/90%	Not Covered
Urgent Care		Deductible/90%	Not Covered
Emergency Room Care		Deductible/90%	PPO Deductible/90%
Mental Health/Subst. Abuse: Office Visit		Deductible/90%	Not Covered
Inpatient		Deductible/90%	Not Covered
Outpatient		Deductible/90%	Not Covered
High Tech Imaging Coverage		Deductible/90%	Not Covered
Oral Surgery		Deductible/90%	Not Covered
All Other Medical Services		Deductible/90%	Not Covered
Teladoc Benefits		Deductible/100%	
Pharmacy Benefits			
		Generic	Preferred Brand
Retail, 30 Days:		PPO Deductible/90%	PPO Deductible/90%
Retail, 31-90 Days:		PPO Deductible/90%	PPO Deductible/90%
Mail Order 90 Days:		PPO Deductible/90%	PPO Deductible/90%
Specialty, Mail, 30 Days:		PPO Deductible/90%	PPO Deductible/90%
		HDHP Preventive: \$0	
		Mandatory Generics: No	
		Rx Max Out-of-Pocket: Included in Medical	
Value Adds (no additional cost)		Maternity Management UHC Hearing Plan Advisor	