

Please note that the health plan has a tiered Premium Designated Provider (PDP) program. PDPs have been determined by UHC to provide more effective and efficient care. If the practitioner is a PDP, then office visits and co-insurance costs will be lower than a non-PDP. Finally, the max out of pocket includes the cost of prescriptions.



Plan Benefit	Explanation	2023-24
Deductible	The amount an insured could be responsible for any particular medical procedure.	\$750 Single \$1,500 Family
Max Out Of Pocket (MOOP)	The maximum amount that an insured would be responsible for (includes deductibles, office co-pays, co-insurance) in any plan year.	\$3,000 Single \$6,000 Family
Office visit	The amount that the insured must pay for an office visit; often paid at the time of the visit.	\$30 for PDP \$50 for non-PDP
Rx Plan	Drugs are classified by tiers, with the vast majority being at the lowest tiers. To mitigate significant impact to any member, the max out of pocket on the Rx Plan is merged with the medical MOOP of \$3000/\$6000. The District has contracted with Optum Rx to identify Variable Co-Pay programs with pharmaceutical manufacturers to obtain significant rebates for employees with high-cost drugs.	\$15/\$60/\$150/\$300
Co-Insurance	The percentage of medical costs an insured must pay after the deductible is met.	20% PDP (Tier1) 30% Non-PDP (Non-Tier1)