Medical Plan Highlights

ASPIRUS HEALTH PLAN	HMO \$2,000 \$4,000		
SIGNATURE NETWORK			
Deductible			
Single	\$2,000		
Family	\$4,000		
Out-of-Pocket Maximum			
Single	\$4,000		
Family	\$8,000		
Coinsurance	100%		
PHYSICIAN SERVICES			
Routine / Preventive Care	Select Services Covered In Full		
Virtual Care			
*Primary Care Physician	Deductible, then 100%		
Specialist	Deductible, then 100%		
HOSPITAL SERVICES			
Inpatient	Deductible, then 100%		
Outpatient	Deductible, then 100%		
WALK-IN CLINICS / URGENT CARE / ER			
Urgent Care	Deductible, then 100%		
Emergency Care	Deductible, then \$200 Copayment		
PRESCRIPTION DRUG	Retail / Mail Order		
Generic	\$10		
Brand	\$40		
Non-Preferred	\$80		
Specialty	25% to \$250		

*Please Note: Upon enrollment, members are required to elect a Primary Care Physician (PCP). Otherwise, a randomized provider will be assigned by Aspirus Health Plan. Each member within a household may have a different PCP. The role of the PCP is to manage and direct your care by referring to other physicians or specialists within the network.

Refer to the Summary Plan Descriptions (SPDs) or Summary of Benefits Coverage (SBCs) for detailed medical plan coverage information.

Signature RATES	24 Pay Period 8/15/23 > 6/30/24	20 Pay Periods (Teachers)	18 Pay Periods (10 & 11 Month Support Staff)
Single	\$37.49	\$44.99	\$49.99
Family	\$85.10	\$102.11	\$113.46
	The district will again be	n taken on 7/30/2023 for 2 offering cash-in-lieu of \$4,0 aiver form with Human Res	000