

January 1, 2018 – December 31, 2018: Kettle Moraine School District Plan Comparisons

In-Network Benefits

For Information on Non-Network claims please refer to your SPD

	Plan 1	Plan 2
Single Deductible	\$2700	\$5000
Family Deductible*	\$5400	\$10000
Coinsurance	90%	100%
Single Out of Pocket Max (Includes Deductible, Medical Copays and Rx)	\$3500	\$5000
Family Out of Pocket Max* (Includes Deductible, Medical Copays and Rx)	\$7000	\$10000
Primary Care Dr. Copay	Deductible then \$40	Deductible then 100%
Specialist Copay	Deductible then \$70	Deductible then 100%
Preventive Services	100%	100%
Urgent Care	Deductible then \$75	Deductible then 100%
Emergency Room	Deductible then \$250	Deductible then 100%
Embedded Deductible and Out of Pocket*	Embedded	Embedded
Prescription Drugs		
Tier 1	Deductible then \$10	Deductible then 100%
Tier 2	Deductible then \$50	Deductible then 100%
Tier 3	Deductible then \$75	Deductible then 100%
Tier 4	Deductible then 25%	Deductible then 100%
Network	Blue Priority	Blue Priority
Employee Premium Cost for Wellness Program Participants		
Single	\$30.00	\$15.00
Family	\$98.00	\$65.00
H S A Contribution		
Single	\$15/Month	\$80/Month
Family	\$40/Month	\$230/Month

*Embedded means that each individual in a family is capped at the single thresholds. A family will not collectively exceed the family thresholds.

