



Valders Area School District

HEALTH COVERAGE 2021

Carrier	 Robin HealthPartners	 Robin HealthPartners
Provider Network/Plan Type	Focused Network	Focused Network
Deductible		
<i>Embedded or Non-Embedded</i>	<i>Embedded</i>	<i>Non-Embedded</i>
In-Network (Single / Family)	\$500 / \$1,000	\$1,500 / \$3,000
Out-of-Network (Single / Family)	\$1,000 / \$2,000	\$3,000 / \$6,000
Coinsurance		
In-Network	100%	100%
Out-of-Network	80%	80%
Out-of-Pocket Max	<i>Includes Deductible</i>	<i>Includes Deductible</i>
In-Network (Single / Family)	\$500 / \$1,000	\$1,500 / \$3,000
Out-of-Network (Single / Family)	\$2,000 / \$4,000	\$6,000 / \$12,000
Lifetime Maximum	Unlimited	Unlimited
Office Visits		
In-Network	\$10 Copay	Ded, 100% Coins
Out-of-Network	Ded, 80% Coins	Ded, 80% Coins
Specialist		
In-Network	\$20 Copay	Ded, 100% Coins
Out-of-Network	Ded, 80% Coins	Ded, 80% Coins
Routine/Preventive Care		
In-Network	100% Coverage	100% Coverage
Out-of-Network	Ded, 80% Coins	Ded, 80% Coins
Inpatient Hospital Services		
In-Network	Ded, 100% Coins	Ded, 100% Coins
Out-of-Network	Ded, 80% Coins	Ded, 80% Coins
Outpatient Hospital Services		
In-Network	Ded, 100% Coins	Ded, 100% Coins
Out-of-Network	Ded, 80% Coins	Ded, 80% Coins
Urgent Care		
In-Network	\$50 Copay	Ded, 100% Coins
Out-of-Network	\$50 Copay	Ded, 100% Coins
Emergency Room		
In-Network	\$150 Copay	Ded, 100% Coins
Out-of-Network	\$150 Copay	Ded, 100% Coins
Prescription Drugs - In-Network	\$3,000 / \$6,000 Rx MOOP	
Tier 1 / Tier 2 / Tier 3	\$10 / \$25 / \$50 / 25% \$250 max	Ded, 100% Coins
Mail Order Prescription Drugs	\$3,000 / \$6,000 Rx MOOP	
Tier 1 / Tier 2 / Tier 3	\$20 / \$50 / \$100 / 25% \$250 max	Ded, 100% Coins
Monthly Premium Rates		
Employee	\$834.30	\$691.31
Family	\$1,889.20	\$1,565.41
Monthly Emp. Contrib. Rates (12.6%)		
Employee	\$105.12	\$87.11
Family	\$238.04	\$197.24
NOTE: Company logos are for information purposes only. Agents are independent and are not affiliated with the company.		
Our standard of care and legal duty to the insured in providing insurance products and services is to follow the instructions of the insured in good faith.		
This constitutes only a summary of the Health plan involved. The actual contract or plan document must be consulted to determine the governing contractual provisions, limitations, or exclusions. There is no guarantee, expressed or implied by Associated Benefits and Risk Consulting or vendors of plan provisions or level of payments.		