

# High vs Base Coverage Comparison

Coverage	Base Plan	High Plan	Difference
Annual Preventive	0.00	0.00	0.00
Deductible Individual	\$700	\$450	\$250
Family	\$1,400	\$900	\$500
Office Visit	\$30/\$40 copay	\$20/\$30 copay	\$10
X-Ray (Diagnostic)	80%/20%	90%/10%	10%
Ambulance	Deductible then 80%/20%	Deductible then 90%/10%	
Hospital	Deductible then 80%/20%	Deductible then 90%/10%	
Outpatient Surgery	Deductible then 80%/20%	Deductible then 90%/10%	
Emergency Room	\$250	\$250	\$0.00
Urgent Care	\$100	\$100	\$0.00
CareATC Wellness Center	\$0.00	\$0.00	\$0.00
Out of Pocket Limit Individual	\$2,000	\$1,500	\$500
Family	\$4,000	\$3,000	\$1,000

# High vs Base Premium Comparison

	High Plan Premiums	Base Plan Premiums	Difference in Premiums	Out Of Pocket High Plan After District Contribution	Out Of Pocket Base Plan After District Contribution
Individual Only	\$827.25	\$636.50	\$190.75	\$132.25	\$-58.50
Individual/Spouse	\$1,764.40	\$1,336.40	\$428	\$779.40	\$366.40
Individual Children	\$1,508.60	\$1,145.50	\$363.10	\$695.60	\$345.50
Individual Family	\$2,447.40	\$1,845.60	\$592.80	\$1,144.40	\$573.60