MTA RETIREES POST 7/2018 INCENTIVE TIER % 20% INDIVIDUAL TILL 65 YEARS OR 1ST 5 YEARS 2 PERSON/FAMILY 30% TILL 65 OR 1ST 5 YEARS AGE 65 (POST 5 YEARS) 50%

\$20 MVP CO-PAY \$25 CDPHP/BS CO-PAY \$5/\$20/\$35 ESI

	DDEMIIM				RS) 50%	DOADD	DDEMUM	DETIDEE	Desail
HICHMARK SECURE BULLE DRO 84	PREMIUM	20% -MED		PREMIUM	RETIREE 30%-MED	70%+MED	PREMIUM	RETIREE	Board 50%+MED
HIGHMARK SECURE BLUE PPO 81:	951.60		_	951.60	285.48	666.12	I NI/A		
		190.32	761.28				N/A	N/A	N/A
Individual w/ dental	978.43	217.15	761.28	978.43	312.31 30%-MED	666.12 70%+MED	N/A	N/A	N/A 50%+MED
2 Person	N/A	20% -MED N/A	N/A	1,953.20	585.96	_	I NI/A	N/A	N/A
2 Person w/ dental	N/A	N/A	N/A			1,367.24	N/A	N/A N/A	N/A
2 Person w/ dental	IN/A	20% -MED		2,004.20	636.96 30%-MED	1,367.24	N/A		50%+MED
Family	N/A	N/A	N/A	2,770.82	831.25	70%+MED 1,939.57	N/A	N/A	N/A
Family w/ dental	N/A	N/A	N/A	2,851.58	912.01	1,939.57	N/A	N/A	N/A
SECURE BLUE PPO 815	IN/A	20% -MED			30%-MED	70%+MED	IN/A		50%+MED
Medicare - Individual 815	970.04	135.31	834.73	970.04	232.31	737.73	970.04	426.32	543.72
Medicare - Individual w/dental	996.87	162.14	834.73	996.87	259.14	737.73	996.87	453.15	543.72
FOREVER BLUE 799 PPO MAP CF1		20% -MED	THE PERSON NAMED IN COLUMN	The second second second	30%-MED	70%+MED	330.01	THE ROLL OF THE PARTY OF THE PA	50%+MED
FB MAP 799 PPO	851.77	111.65	740.12	851.77	196.83	654.94	851.77	367.19	484.58
FB MAP 799 PPO W/DENTAL	878.60	138.48	740.12	878.60	223.66	654.94	878.60	394.02	484.58
FOREVER BLUE ESSENTIAL CF1	070.00	20% -MED			30%-MED	70%+MED	070.00		50%+MED
FB PPO ESSENTIAL MAP Pla	780.77	97.45	683.32	780.77	175.53	605.24	780.77	331.69	449.08
FB PPO ESSENTIAL W/DENT		124.28	683.32	807.60	202.36	605.24	807.60	358.52	449.08
MVP HMO	007.00	20% -MED			30%-MED	70%+MED	007.00		50%+MED
Individual	1,202.10	240.42		1,202.10	360.63	841.47	N/A	N/A	N/A
Individual w/ dental	1,228.93	267.25		1,228.93	387.46	841.47	N/A	N/A	N/A
marviadar w/ deritar	1,220.00	20% -MED			30%-MED	70%+MED	IN/A		50%+MED
Two Person	N/A	N/A	N/A	2,699.23	809.77	1,889.46	N/A	N/A	N/A
2 Person w/ dental	N/A	N/A	N/A	2,750.23	860.77	1,889.46	N/A	N/A	N/A
2 r erson w/ dental	IN/A	20% -MED	and the second		30%-MED	70%+MED	IN/A		50%+MED
Family	N/A	N/A	N/A	2,922.61	876.78		N/A	N/A	N/A
Family w/ dental	N/A	N/A	N/A	3,003.37	957.54		N/A	N/A	N/A
r arring w/ deritar	14//			0,000.07	301.04	2,040.00	14//	14//	14//
		20% -MFD	80%+MF	D	30%-MFD	70%+MFD		50%-MFD	
Medicare Individual	1.537.15	20% -MED 248.73			30%-MED 402.45	70%+MED 1.134.70	1.537.15		50%+MED
Medicare Individual	1,537.15	248.73	1288.42	1,537.15	402.45	1,134.70	1,537.15	709.88	50%+MED 827.27
			1288.42 80%+ME	1,537.15 D	402.45 30%-2MED	1,134.70 70%+2MED		709.88 50%-MED	50%+MED 827.27 50%+MED
Medicare Individual Medicare 2Person (over 65)	1,537.15 N/A	248.73 20% -MED N/A	1288.42 80%+ME N/A	1,537.15 D 3,397.31	402.45 30%-2MED 901.79	1,134.70 70%+2MED 2,495.52		709.88 50%-MED 1,581.26	50%+MED 827.27 50%+MED 1,816.05
Medicare 2Person (over 65)	N/A	248.73 20% -MED N/A 20% -MED	1288.42 80%+ME N/A 80%+ME	1,537.15 D 3,397.31 D	402.45 30%-2MED 901.79 30%-MED	1,134.70 70%+2MED 2,495.52 70%+MED	3,397.31	709.88 50%-MED 1,581.26 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED
		248.73 20% -MED N/A	1288.42 80%+ME N/A 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25	402.45 30%-2MED 901.79	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17	3,397.31	709.88 50%-MED 1,581.26 50%-MED 1,310.93	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32
Medicare 2Person (over 65) Medicare 1/1 (1over/1under)	N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED	1288.42 80%+ME N/A 80%+ME N/A 80%+ME	1,537.15 D 3,397.31 D 2,739.25	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED	3,397.31	709.88 50%-MED 1,581.26 50%-MED 1,310.93	50%+MED 827.27 50%+MED 1,816.05 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual	N/A N/A 1,251.69	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17	3,397.31 2,739.25	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO	N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18	3,397.31 2,739.25 N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual	N/A N/A 1,251.69	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED	3,397.31 2,739.25 N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental	N/A N/A 1,251.69 1,278.52	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19	3,397.31 2,739.25 N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person	N/A N/A 1,251.69 1,278.52 N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19	3,397.31 2,739.25 N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person	N/A N/A 1,251.69 1,278.52 N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A N/A 80%+ME	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 70%+MED	3,397.31 2,739.25 N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family	N/A N/A 1,251.69 1,278.52 N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A N/A 80%+ME	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 70%+MED 2,221.55	3,397.31 2,739.25 N/A N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental	N/A N/A 1,251.69 1,278.52 N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A N/A N/A	1288.42 80%+ME N/A 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A N/A 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 70%+MED 2,221.55 2,221.55	3,397.31 2,739.25 N/A N/A N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A N/A 50%-MED N/A N/A N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan	N/A N/A 1,251.69 1,278.52 N/A N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME N/A N/A 80%+ME	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 70%+MED 2,221.55	3,397.31 2,739.25 N/A N/A N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A N/A 50%-MED N/A N/A N/A N/A	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental	N/A N/A 1,251.69 1,278.52 N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME N/A N/A 80%+ME	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 70%+MED 2,221.55 2,221.55 70%+MED	3,397.31 2,739.25 N/A N/A N/A N/A	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual	N/A 1,251.69 1,278.52 N/A N/A N/A N/A 1,586.74 745.83	248.73 20% -MED N/A 20% -MED 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED 258.65 90.47	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A N/A 80%+ME 1328.09 655.36	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,221.55 2,221.55 70%+MED 1,169.42	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A 314.22	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO	N/A N/A 1,251.69 1,278.52 N/A N/A N/A N/A 1,586.74	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED 258.65	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 80%+ME N/A N/A 80%+ME N/A N/A 80%+ME 1328.09	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 70%+MED 2,221.55 2,221.55 70%+MED 1,169.42 580.78	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A 0,4 0,4 0,4 0,4 0,4 0,4 0,4 0,4 0,4 0,4
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental	N/A 1,251.69 1,278.52 N/A N/A N/A 1,586.74 745.83 772.66	248.73 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED 258.65 90.47 117.30 95.50	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 1,169.42 580.78 580.78 598.40	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 314.22 341.05 326.80	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 430%+MED 1,428.32 50%+MED N/A N/A 1,428.32 50%+MED N/A N/A 1,428.32 50%+MED N/A N/A 1,428.32 50%+MED N/A N/A 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.32 1,428.
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental	N/A 1,251.69 1,278.52 N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	248.73 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A N/A 20% -MED 258.65 90.47 117.30	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 70%+MED 1,169.42 580.78 580.78 598.40 598.40	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 314.22 341.05 326.80 353.63	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A 1,428.32 50%+MED N/A N/A 40%+MED 852.06 431.61 431.61 444.20 444.20
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan	N/A 1,251.69 1,278.52 N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A 17.30 95.50 122.33	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 80%+ME	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 1,169.42 580.78 580.78 598.40 70%+2MED	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 852.06 431.61 431.61 444.20 444.20 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan Medicare EPO 2Person (over 6	N/A N/A 1,251.69 1,278.52 N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED 258.65 90.47 117.30 95.50 122.33 20% -MED N/A	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D 3,648.35	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED 977.11	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 2,221.55 2,221.55 70%+MED 1,169.42 580.78 580.78 598.40 70%+2MED 2,671.24	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED 1,706.78	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 852.06 431.61 444.20 444.20 50%+MED 1,941.57
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan Medicare EPO 2Person (over 6) CDPHP Indemnity Plan	N/A 1,251.69 1,278.52 N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 N/A	248.73 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A 17.30 95.50 122.33 20% -MED N/A 20% -MED	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D 3,648.35 D	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED 977.11	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 70%+MED 1,169.42 580.78 580.78 598.40 70%+2MED 2,671.24 70%+MED	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED 1,706.78 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 852.06 431.61 431.61 444.20 444.20 50%+MED 1,941.57 50%+MED
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan Medicare EPO 2Person (over CDPHP Indemnity Plan Medicare EPO (1 over/1under)	N/A N/A 1,251.69 1,278.52 N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A 17.30 95.50 122.33 20% -MED N/A 20% -MED N/A	1288.42 80%+ME N/A 80%+ME N/A 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50 80%+ME N/A N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D 3,648.35 D 2,838.43	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED 977.11 30%-MED 792.83	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 70%+MED 1,169.42 580.78 580.78 598.40 70%+2MED 2,671.24 70%+MED	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 3,648.35	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED 1,706.78 50%-MED 1,360.52	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 852.06 431.61 444.20 444.20 50%+MED 1,941.57
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan Medicare EPO 2Person (over 6) CDPHP Indemnity Plan	N/A N/A 1,251.69 1,278.52 N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 N/A N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A 17.30 95.50 122.33 20% -MED N/A 20% -MED N/A 20% -MED N/A 20% -MED 258.65	1288.42 80%+ME N/A 80%+ME 1001.35 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50 80%+ME N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D 3,648.35 D 2,838.43 26.83	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED 977.11 30%-MED 792.83 26.83	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 70%+MED 2,065.19 2,065.19 2,065.19 70%+MED 1,169.42 580.78 580.78 598.40 598.40 70%+2MED 2,671.24 70%+MED 2,045.60	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 3,648.35 2,838.43 26.83	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED 1,706.78 50%-MED	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 431.61 444.20 444.20 50%+MED 1,941.57 50%+MED 1,477.91
Medicare 2Person (over 65) Medicare 1/1 (1over/1under) CDPHP EPO Individual Individual w/ dental Two Person 2 Person w/dental Family Family w/ dental CDPHP Indemnity Plan Medicare EPO Individual CDPHP MAP HMO CDPHP MAP HMO w/dental CDPHP MAP PPO CDPHP MAP PPO w/dental CDPHP Indemnity Plan Medicare EPO 2Person (over 6) CDPHP Indemnity Plan Medicare EPO (1 over/1under) Individual Dental	N/A N/A 1,251.69 1,278.52 N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 N/A	248.73 20% -MED N/A 20% -MED N/A 20% -MED 250.34 277.17 20% -MED N/A N/A 20% -MED N/A 17.30 95.50 122.33 20% -MED N/A 20% -MED N/A	1288.42 80%+ME N/A 80%+ME N/A 1001.35 1001.35 80%+ME N/A N/A 80%+ME 1328.09 655.36 655.36 675.50 675.50 80%+ME N/A 80%+ME N/A N/A	1,537.15 D 3,397.31 D 2,739.25 D 1,251.69 1,278.52 D 2,950.27 3,001.27 D 3,173.65 3,254.41 D 1,586.74 745.83 772.66 771.00 797.83 D 3,648.35 D 2,838.43	402.45 30%-2MED 901.79 30%-MED 763.08 30%-MED 375.51 402.34 30%-MED 885.08 936.08 30%-MED 952.10 1032.86 30%-MED 417.32 165.05 191.88 172.60 199.43 30%-2MED 977.11 30%-MED 792.83	1,134.70 70%+2MED 2,495.52 70%+MED 1,976.17 70%+MED 876.18 876.18 876.18 2,065.19 2,065.19 2,065.19 2,221.55 2,221.55 70%+MED 1,169.42 580.78 580.78 598.40 70%+2MED 2,671.24 70%+MED 2,045.60 0.00	3,397.31 2,739.25 N/A N/A N/A N/A N/A 1,586.74 745.83 772.66 771.00 797.83 3,648.35	709.88 50%-MED 1,581.26 50%-MED 1,310.93 50%-MED N/A N/A 50%-MED N/A N/A 50%-MED 734.68 314.22 341.05 326.80 353.63 50%-MED 1,706.78 50%-MED 1,360.52 26.83	50%+MED 827.27 50%+MED 1,816.05 50%+MED 1,428.32 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED N/A N/A 50%+MED 431.61 444.20 444.20 50%+MED 1,941.57 50%+MED 1,941.57

**DENTAL IS PAID 100% BY RETIREE

www.MohonasenMeds.com An optional mail order program which may be used for specific brand named prescriptions with \$0 co-pay. You must be enrolled in a health plan to be eligible for this service.

MEDICARE ADVANTAGE PLANS = MAP HIGHLIGHT ROSE
MEDICARE INDEMNITY PLANS = BLUE HIGHLIGHT

MEDICARE REIMBURSEMENT \$58.70

SECURE BLUE PPO 815 Out of pocket maximum \$6850 individual \$13,700 family

Combines coverage for hospitalization, medical/surgical and major medical.

Co-Pay for doctor exams is \$25 Emergency Room co-pay \$150 Telemedicine co-pay \$0 Urgent Care co-pay \$35

Inpatient hospital care - \$250 co-pay

Prosthetics are not covered

Vision exam every two years unless medically needed. Discount eyewear allowance through Davis

Vision Networks. www.bsneny.com

FOREVER BLUE MAP PPO 799 Co-pay primary \$10. Co-pay specialists \$15. \$3350 Calendar Year Out of Pocket Max Preventative services \$0. Emergency room \$50. Vision\$15/Hearing Exam \$15-\$45. Eyewear allowance \$200. Dental allowance \$200. Hearing Aid Allowance (TruHearing) \$699/\$999.

FOREVER BLUE ESSENTIAL

MAP

Co-pay primary \$25. Co-pay specialists \$40. \$3.400 Calendar Year Out of Pocket Max Preventative services \$0. Emergency room \$50 Vision\$25-\$40/Hearing Exam \$40-\$45

Eyewear allowance \$200 Dental allowance \$200. Hearing Aid Allowance (TruHearing) \$699/\$999.

MVP

You can use a doctor in the MVP network now without a referral, but

you still must select a primary care physician.

Co-pay for doctor exams is \$20 Emergency Room co-pay \$50 Inpatient hospital care – \$240 co-pay

Vision exam every two years unless medically necessary.

Preventative dental for children under 19 - Co-Pay \$25 www.mvp.com

CDPHP EPO

You can use a doctor in the CDPHP network. You no longer need to get a referral to see a specialist or doctor other than your primary physician, but you are responsible to make sure prior approval from CDPHP is obtained. You will need prior approval for any infusion therapy. You have access to more than 550,000 participating practitioners and providers nationwide, including many major hospitals.

Out of pocket maximum \$5925 individual \$11,850 family

Co-Pay for doctor exams is \$25 Emergency Room co-pay \$150 Telemedicine co-pay \$10 Urgent Care co-pay \$35

Inpatient hospital care - \$250 co-pay

Vision exam every two years unless medically necessary. www.cdphp.com

CDP MAP HMO

Co-pay primary \$10 Co-pay Specialist \$15 Calendar Year Out of Pocket Max \$2500

ER \$50 Urgent Care \$25 Hearing Aid Allowance

Eyewear Allowance \$100 Preventative Dental Allowance \$250

CDP MAP PPO

Co-pay primary \$10 Co-pay Specialist \$15 Calendar Year Out of Pocket Max \$3350

ER \$75 Urgent Care \$25 Hearing Aid Allowance

Eyewear Allowance \$100 Preventative Dental Allowance \$250

SHINGLES VACCINATION FOR MAP PLANS ONLY AT THE PHARMACY

Express Scripts Information on next page.

MOHONASEN MEDS/CANARX- http://canarx.com/MohonasenMeds/contact.htm

*Blue Shield Dental Rider is also available as an option with the various insurance plans in accordance with negotiated contribution formulas. \$1000.00 maximum coverage per person per calendar year.

All benefit booklets available in the business office.

MOHONASEN CSD \$5/20/35 COPAY PRESCRIPTION DRUG PLAN



Pharmacy Benefits Manager

Eligibility

Employees, spouses and dependents to age 26

Benefits

Participating Local Retail Pharmacy & CuraScript Specialty Pharmacy (see below)

Generic Drugs \$ 5 copay, 30-day supply Formulary Brand Name Drugs \$20 copay, 30-day supply Non-Formulary Brand Name Drugs \$35 copay, 30-day supply

Home Delivery Pharmacy (for maintenance medications that treat chronic conditions)

Generic Drugs \$10 copay, 90-day supply Formulary Brand Name Drugs \$40 .copay, 90-day supply Non-Formulary Brand Name Drugs \$70 copay, 90-day supply

Participating Pharmacy Information

To locate participating pharmacies, visit the Express Scripts website at <u>www.express-scripts.com.</u>

Home Delivery (Mail Order) Pharmacy Information

Send mail service profile form along with original prescription and applicable co-pay in self-addressed envelope found in your Express Scripts welcome packet. Allow 14 business days to receive your prescription.

CuraScript Specialty Pharmacy Information

Exclusive supplier of "specialty medications" (high-cost oral, injectable, infused or inhaled medications that may be self-administered), offering clinical support and therapy management and counseling. First prescription may be obtained at the retail pharmacy with subsequent prescriptions filled through CuraScript and delivered to your home.

General Exclusions

Medications lawfully obtained without a prescription/Devices or appliances, support garments or other non-medicinal substances/Administration charges for drugs or insulin/Investigational or experimental drugs/Unauthorized refills/Prescriptions covered without charge under Federal, State or local programs including Workers' Compensation/Medications for eligible confined to a rest home, nursing home, sanitarium, extended care facility, hospital or similar entity/Medication used for cosmetic purposes.

This summary does not detail all benefits, limitations or exclusions. All benefits subject to coordination of benefits (COB).



\$0 COPAYPRESCRIPTION SAVINGS PROGRAM!

Your employer has teamed up with CANARX to offer eligible members and dependents a FREE international mail order program for certain brand-name medications. This program is intended to help you save money!

Benefits of joining the CANARX program:

- ▶ \$0 copay
- ▶ FREE delivery to your mailbox
- ▶ FREE brand-name medications
- Worry-free refills

ENROLLING IS VERY EASY.



Fill out the online enrollment form



Upload your photo identification



Include your prescriber's information and CANARX can reach out to request a prescription on your behalf

Have the following ready to make enrolling easier:

- ☐ Photo Identification an image of your valid government-issued photo ID
- ☐ Name and strength of medications and vitamins you are using
- ☐ Prescriber's Information
 - First and last name
 Phone number

Need some help? Give CANARX a call at 1-866-893-6337.

Signing up only takes a few minutes and can help you save significantly on your prescription costs!

Scan here to enroll today! canarx.com/enroll | 1-866-893-6337

