

Medical Benefits									
	HDHP ¹			OAP Open Access Plan			PPO Premier		
	Ardent Network	AccessDirect Platinum Network ²	Open Access Network ³	Ardent Network	AccessDirect Platinum Network ²	Open Access Network ³	Ardent Network	AccessDirect Platinum Network ²	Open Access Network ³
Calendar-Year Deductible									
Individual	\$1,700	\$3,000	\$4,000	\$700	\$1,000	\$3,000	\$200	\$600	\$2,000
Family	\$3,400	\$6,000	\$8,000	\$1,400	\$2,000	\$6,000	\$400	\$1,200	\$4,000
Out-of-Pocket Maximum⁴									
Individual	\$3,000	\$5,000	\$6,500	\$3,000	\$3,900	\$6,000	\$1,000	\$3,000	\$4,500
Family	\$6,000	\$10,000	\$13,000	\$6,000	\$7,800	\$12,000	\$2,000	\$6,000	\$9,000
Coinsurance	20%	30%	40%	10%	20%	30%	10%	20%	40%
Preventive Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Office Visit									
Primary Care Physician	20% after deductible	30% after deductible	20% after deductible	\$0 copay	\$30 copay	\$40 copay	\$0 copay	\$15 copay	\$30 copay
Specialist					\$45 copay	\$60 copay		\$30 copay	\$50 copay
Urgent Care	20% after deductible	30% after deductible	40% after deductible	\$0 copay	\$40 copay	\$60 copay	\$0 copay	\$30 copay	\$40 copay
Hospital Care									
Inpatient	20% after deductible	30% after deductible	40% after deductible	10% after deductible	20% after deductible	30% after deductible	10% after deductible	20% after deductible	40% after deductible
Outpatient									
Emergency Room Visit & Care	20% after deductible	30% after deductible	40% after deductible	\$150 copay	\$300 copay	\$300 copay	\$150 copay	\$300 copay	\$350 copay
Lab and X-Ray: Outpatient and Free Standing	20% after deductible	30% after deductible	40% after deductible	\$25 copay	\$35 copay	\$75 copay	\$20 copay	\$40 copay	\$60 copay
Prescription Drug Benefits ⁵									
	HDHP ¹			OAP Open Access Plan			PPO Premier		
	In-Network			In-Network			In-Network		
Retail (30-day supply)									
Generic	20% after calendar-year deductible			\$15 copay			\$10 copay		
Preferred Brand				20% copay—max cost \$70			20% copay—max cost \$50		
Non-Preferred Brand				30% copay—max cost \$225			30% copay—max cost \$150		
Specialty Drugs				30% copay—max cost \$250			30% copay—max cost \$200		
Mail Order (90-day supply)									
Generic	20% after calendar-year deductible			\$30 copay			\$20 copay		
Preferred Brand				20% copay—max cost \$140			20% copay—max cost \$100		
Non-Preferred Brand				30% copay—max cost \$450			30% copay—max cost \$300		

1. The High Deductible Health Plan option includes:

- A combined medical and pharmacy deductible.
- A non-embedded deductible. This means that all family members’ expenses will be combined to meet the entire family deductible before the plan begins contributing to your family’s health care expenses.

2. AccessDirect Platinum (ADP) Network

This is the primary network for the UT Health system and offers choice of providers and facilities covering nine counties: Smith, Cherokee, Rusk, Panola, Henderson, Van Zandt, Wood, Camp and Gregg. Services not available at UT Health can be covered at Children’s Medical Center or UT Southwestern at the ADP tier of benefits.

No coverage will be offered at:

- CHRISTUS Trinity Mother Frances Health System, except for emergency services.
- Texas Spine and Joint, except for emergency services and Ear, Nose & Throat (ENT) procedures.

3. No coverage will be offered at:

- Northwest Texas Healthcare System (TX) except for emergency, mental health and alcohol/drug treatment.
- Presbyterian Health Services (NM) except for emergency, mental health and alcohol/drug treatment.
- Ascension St. John (OK) except for emergency, mental health, alcohol/drug treatment and colorectal services.
- St. Francis Health System (OK) except for emergency, mental health, alcohol/drug treatment and pediatric services (for members under age 17).
- Akumin Amarillo/Preferred Imaging (TX).

4. Out-of-pocket (OOP) maximum

Includes deductibles, copays and coinsurance.

5. Mandatory generic provision

If a generic drug is available and you or your doctor chooses a brand-name drug, you will be responsible for the generic coinsurance or copay amount, brand dispensed and the generic.