

UnitedHealthcare

ANGLICAN CHURCH IN NORTH AMERICA (ACNA)

Effective Date: 1/01/2021 | Customer Number 00919435

	Option 1	Option 2	Option 3
	BALQ-Mod (UHIC PA) Rx Plan: 455	BAGD-Mod2 (UHIC HSA) Rx Plan: 512-INT	BADN-Mod (UHIC HSA) Rx Plan: 512-INT
Plan Name			
Product	Choice + Insurance *	Choice + Insurance *	Choice + Insurance *
Option	Option 1	Option 2	Option 3
Plan Offering	Multiple Option	Multiple Option	Multiple Option
Multiple Option with:			
HRA or HSA	No	HSA	HSA
Benefits*	Network Single/Family	Network Single/Family	Network Single/Family
Office Copay (PCP/SPC)	PCP 0%, SPC \$60	PCP D&C, SPC D&C	PCP D&C, SPC D&C
Hospital Copays	OP D&C, IP D&C	OP D&C, IP D&C	OP D&C, IP D&C
UC/ER/Major Diag Copay	UC \$50, ER \$250 POD, MD D&C	UC D&C, ER D&C, MD D&C	UC D&C, ER D&C, MD D&C
Other	ENRP D&C minor lab & x ray	ENRP D&C minor lab & x ray, Motion	ENRP D&C minor lab & x ray, Motion
Deductible	\$2,500/\$5,000 (Emb)	\$3,500/\$7,000 (Emb)	\$5,000/\$10,000 (Emb)
Coinsurance	80%	80%	70%
Out-of-Pocket	\$7,350/\$14,700	\$6,000/\$12,000	\$6,650/\$13,300
Pharmacy	\$250 Ded, \$5/\$50/\$100/\$250, 2.5 MO (Adv PDL)	Med Ded, \$15/\$60/20%/30%, 2.5 MO (Ess PDL)	Med Ded, \$15/\$60/20%/30%, 2.5 MO (Ess PDL)
	Out of Network Single/Family	Out of Network Single/Family	Out of Network Single/Family
Deductible	\$5,000/\$10,000 (Emb)	\$7,000/\$14,000 (Emb)	\$10,000/\$20,000 (Emb)
Coinsurance	60%	60%	50%
Out of Pocket	\$15,000/\$30,000	\$12,000/\$24,000	\$15,000/\$30,000
	Rates (Billed per month)	Rates (Billed)	Rates (Billed)
Rates			
Employee	\$842.41	\$707.16	\$646.19
Employee + Spouse	\$1,749.27	\$1,465.23	\$1,337.19
Employee + Child(ren)	\$1,584.39	\$1,327.40	\$1,211.55
Employee + Family	\$2,491.24	\$2,085.47	\$1,902.56

Voluntary Vision:

Cost will be entered as a separate line item at billing.

Employee	\$6.65
Employee + Spouse	\$12.63
Employee + Child(ren)	\$13.29
Employee + Family	\$19.54

Voluntary Dental:

Cost will be entered as a separate line item at billing.

Employee	\$37.87
Employee + Spouse	\$77.19
Employee + Child(ren)	\$88.25
Employee + Family	\$132.60