**High Deductible Health Plan May Save Members Cost**

Many members of the EHA plan are seeing less out of pocket cost for their health insurance by selecting the $2,850 High Deductible Health Plan (HDHP) option. The HDHP is offered as a Dual Choice option by schools with either the $350 PPO plan or the $600 PPO plan. The $2,850 deductible is an all-inclusive deductible for the employee. This means that the deductible will include qualified medical claims, the total cost for the office visits (not just the $35 copay), and the total Rx cost (not just the coinsurance). The deductible is twice, or $5,700 for the Employee/Spouse, Employee/Children or Family options. These deductibles have to be met before qualified medical benefits are covered at 100% for the remainder of the calendar year. Furthermore, all qualified wellness benefits will be covered at 100% under this plan, like the PPO options offered through the EHA. Finally, members will still receive the contracted Blue Cross Blue Shield of Nebraska discounts for all qualified benefits.

Earlier this year, the EHA Board of Directors made a change to the Dual Choice option to allow groups who pay 100% of the cost for the health insurance without cash in lieu of option to continue to receive the 5% discount on rates and offer the Dual Choice plan. This can happen as long as the difference in the PPO option and the HDHP premium is put into a health savings account on the member’s behalf. The difference in premium could be substantial for a member or family. The difference between the $350 PPO option and the $2,850 HDHP premiums for a member is over $1,200. For a family, the difference in these two deductibles is over $3,400.

When you consider the out of pocket maximum cost between these two options, you can see the potential of savings for the member. Under the $350 PPO option, you must first meet your $350 deductible before any services are paid. After the deductible is met, a member will have up to $2,000 of out of pocket for qualified medical expenses. Furthermore, the member also has an Rx copay maximum of $2,500 and the $35 physician office visits. When you add all this up, the member, if they had a bad claims year, could have $4850 or more in cost per calendar year. With the $2,850 HDHP, the maximum cost per calendar year is $2,850, all services included. With the difference in premiums of $1,226, your maximum exposure is only $1,624, a difference of over $3,200 ($4850 - $2,850-1,226)!

Below is a summary of premium options for the $350 PPO, $600 PPO and the $2,850 HDHP.



To see if this option is available at you school, please contact your school’s NSEA negotiating representative, Human Resources or Business manager.

A cost comparison can be done on our website, [www.ehaplan.org](http://www.ehaplan.org). Information you would need is how much in deductible and claims that you have paid for the last calendar year, number of office visits, and total cost of your prescription drugs (quarterly drug summary).