



Renewal Effective September 1, 2020

The EHA Board of Directors has announced the following rate and benefit change decisions for the 2020-21 contract year effective September 1, 2020.

**Premium Rate Change**

The medical rates for all Active Employee plans will increase by 6.97%.

The medical rates for all Early Retiree plans will increase by 6.97%.

The dental rates for all participants will increase by 2.0%.

The overall increase for medical and dental coverage combined is 6.71%.

**Benefit Changes**

1. Deductibles:
  - a. The \$3,500 deductible plan will increase by \$100 In-Network / \$200 Out-of-Network. The family deductible increases to \$7,050 In-Network / \$14,100 Out-of-Network.
2. Out-of-Pocket limits (including deductible, coinsurance, and copayments for medical and pharmacy services):
  - a. The \$650 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$4,600 In-Network / \$9,200 Out-of-Network, 2x family.
  - b. The \$850 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$4,750 In-Network / \$9,500 Out-of-Network, 2x family.
  - c. The \$1,050 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$4,900 In-Network / \$9,800 Out-Of-Network, 2x family.
  - d. The \$1,200 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$5,000 In-Network / \$10,000 Out-of-Network, 2x family.
  - e. The \$1,450 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$5,150 / \$10,300 Out-of-Network, 2x family.
  - f. The \$1,900 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$5,500 In-Network / \$11,000 Out-of-Network, 2x family.

- g. The \$2,500 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$7,350 In-Network / \$14,700 Out-of-Network, 2x family.
- h. The new \$3,600 plan Out-of-Pocket limit will increase by \$250 In-Network / \$500 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$4,250 In-Network / \$12,700 Out-of-Network. The family Out-of-Pocket increases to \$8,150 In-Network / \$25,400 Out-of-Network.
- i. The \$4,000 plan Out-of-Pocket limit will *decrease* by \$50 In-Network / \$100 Out-of-Network, 2x family, bringing the total Out-of-Pocket to \$6,300 In-Network / \$12,600 Out-of-Network, 2x family.

3. Office Visit and Emergency Room Copays:

- a. Copays for the \$650, \$850, \$1,050, \$1,200, \$1,450, and \$1,900 deductible plans will change to the following:

Primary Office Visit Copay: \$35  
 Specialist Copay: \$55  
 Urgent Care Copay: \$55  
 Emergency Room Copay: \$85

- b. Copays for the \$2,500 deductible plan will change to the following:

Primary Office Visit Copay: \$50  
 Specialist Copay: \$70  
 Urgent Care Copay: \$70  
 Emergency Room Copay: \$100

4. Prescription Drugs

- a. Copays for the \$650, \$850, \$1,050, \$1,200, \$1,450, and \$1,900 deductible plans will change to the following:

Generic	25% Coins (\$10 minimum, \$40 maximum)
Formulary Brand	25% Coins (\$50 minimum, \$100 maximum)
Non-Formulary Brand	50% Coins (\$75 minimum, \$150 maximum)
In-Network Specialty (30 Day Supply)	25% Coins (\$125 minimum, \$250 maximum)
Out-of-Network Specialty (30 Day Supply)	50% Coins (\$250 minimum, \$500 maximum)

- b. Copays for the \$2,500 deductible plan will change to the following:

Generic	30% Coins (\$12 minimum, \$45 maximum)
Formulary Brand	30% Coins (\$55 minimum, \$110 maximum)
Non-Formulary Brand	50% Coins (\$75 minimum, \$150 maximum)
In-Network Specialty (30 Day Supply)	25% Coins (\$125 minimum, \$250 maximum)
Out-of-Network Specialty (30 Day Supply)	50% Coins (\$250 minimum, \$500 maximum)