

2025 Plan Year

Plan 1

Plan 2

Plan 3

Plan 4

Medical Insurer

UnitedHealthcare

UnitedHealthcare

UnitedHealthcare

Hartford Life & Health

Prescription Drug Coverage

Express Scripts Medicare

Express Scripts Medicare

Express Scripts Medicare

Express Scripts Medicare

Medical Benefits

Medical Deductible (In-Network)	\$0	\$0	\$0	\$0
Maximum Out of Pocket Medical	\$2,000	\$2,000	\$3,400	No Max Out of Pocket
Primary Care Visit	\$0	\$0	\$0	\$15
Specialist Care Visit	\$30	\$20	\$30	\$15
Inpatient Copay Per Day	\$165 Days 1-5	\$150 Days 1-5	\$200 Days 1-7	\$0 Days 1-150
Outpatient Copay	\$100	\$100	\$225	\$0
Outpatient Hospital Services	20%	20%	20%	\$0
Skilled Nursing Copay (Days 1-20)	\$0	\$0	\$0	\$0
Skilled Nursing Copay (Days 21-100)	\$125	\$0	\$125	\$0
Imaging: MRI, CT Scans	\$100	\$0	\$200	\$0
Ambulance	\$100	\$100	\$150	\$0
Emergency Room	\$50	\$50	\$65	\$50

Vision Benefits

Diabetic Eye Exam	\$0	\$0	\$0	Not Included
Routine Eye Exam	\$30	\$20	\$30	Not Included
Eyewear 1 per Year	Included	Included	Included	Not Included
Max for Eyewear	\$150	\$150	\$150	Not Included

Hearing Benefits

Medicare Covered Exam	\$30	\$30	\$30	Not Included
Routine Exam	\$0	\$0	\$0	Not Included
Hearing Aid Allowance - Every 3 Years	\$500	\$500	\$500	Not Included

Dental Benefits

Medicare Covered Exam	\$30	\$20	\$20	Not Included
Preventive (Exams, X-Ray, Cleanings)	\$0	Not Included	Not Included	Not Included
Annual Allowance Preventive	Not Included	Not Included	Not Included	Not Included

Prescription Drug Benefits

Tier 1: Preferred Generics				
31-Day Supply	\$5	\$4	\$5	\$5
32-90 Day Supply	\$10	\$8	\$10	\$10
Tier 2: Generics				
31-Day Supply	\$10	\$9	\$10	\$10
32-90 Day Supply	\$20	\$18	\$20	\$20
Tier 3: Preferred Brand				
31-Day Supply	\$25	\$30	\$45	\$25
32-90 Day Supply	\$50	\$60	\$90	\$50
Tier 4: Non-Preferred Drugs				
31-Day Supply	\$50	\$55	\$80	\$50
32-90 Day Supply	\$100	\$110	\$160	\$100
Tier 5: Specialty				
	33%	33%	33%	33%

Monthly Medical + Prescription Drug Premiums

Per Member Per Month	\$299.72	\$274.85	\$233.27	\$424.85
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Benistar Customer Service: 844-235-4727