

Summary Comparison of Medical Coverage Options

Benefits	Major Medical	HSA Plan	Medical Reimbursement Plan (MRP)
Description	<p>No lifetime limits.</p> <p>The Cape Girardeau Public Schools Health Care Plan is administered by Mutual Medical Plans.</p> <p>The PPO network is HealthLink OAIIL. Hospital charges in Cape Girardeau county are only payable at Southeast Missouri Hospital.</p>	<p>No lifetime limits.</p> <p>The Cape Girardeau Public Schools Health Care Plan is administered by Mutual Medical Plans.</p> <p>The PPO network is HealthLink OAIIL. Hospital charges in Cape Girardeau county are only payable at Southeast Missouri Hospital.</p>	<p>No lifetime limits.</p>
Options/Benefits	<p>Annual Plan Deductible</p> <ul style="list-style-type: none"> • \$2,000 individual • \$4,000 family <p>Out of Pocket Maximum* *includes the deductible</p> <p>In Network</p> <ul style="list-style-type: none"> • \$4,500 individual • \$9,000 family <p>Out of Network</p> <ul style="list-style-type: none"> • No Limit <p>Preventative care services covered at 100%, in network.</p> <p>Office Visit Copays: \$25 ER Copay: \$250</p>	<p>Annual Plan Deductible</p> <ul style="list-style-type: none"> • \$2,500 individual • \$5,000 family <p>Out of Pocket Maximum* *includes the deductible</p> <p>In Network</p> <ul style="list-style-type: none"> • \$2,500 individual • \$5,000 family <p>Out of Network</p> <ul style="list-style-type: none"> • No Limit <p>Preventative care services covered at 100%, in network.</p> <p>All other services subject to the deductible.</p>	<p>Annual Plan Deductible</p> <ul style="list-style-type: none"> • \$0 <p>Out of Pocket Maximum In Network</p> <ul style="list-style-type: none"> • \$0 <p>Preventative care services & Chiropractic services are covered at 100%, in network, when not covered at all by your other insurance.</p>
Cost Share	<p>In Network 80%/20% cost share after deductible</p> <p>Out of Network 50%/50% cost share after deductible</p> <p>Retail Rx Copays: \$10/\$30/\$50/25% max \$150</p> <p>Mail Order Rx Copay: \$25/\$75/\$125</p>	<p>0% cost share after deductible.</p>	<p>The MRP reimburses covered members for 100% of their deductibles, coinsurance and plan co-payments incurred on their other insurance.</p> <p>Employee must submit copies of their other Plan's Explanation of Benefits to Mutual Medical Plans.</p>
Eligibility	Full Time (30 or more hours per week)	Full Time (30 or more hours per week)	Full Time (30 or more hours per week) who have other coverage through a spouse, Tricare or other insurance policy.
How to Change Coverage	Within 31 days of an IRS qualifying change in family status, is required.	Within 31 days of an IRS qualifying change in family status, is required.	Within 31 days of an IRS qualifying change in family status, is required.

Eligibility Family Members: Your lawful spouse who resides with you in common residence and your under age 26 natural child, adopted child, child placed with you for adoption, or stepchild that you or your spouse have legal guardianship or legal custody or had such guardianship or custody when the child turned age 18, without regard to residence, financial support, or marriage. A disabled dependent age 26 or older who was covered under the program this Plan replaced may be covered through calendar year 2017.

Summary Comparison of Medical Coverage Options

Benefits	Maxi/Maxi II Plan	Affordable Care Plan (ACP)
Description	No lifetime limits.	No lifetime limits.
Options/Benefits	<p>Annual Plan Deductible</p> <ul style="list-style-type: none"> • \$0 <p>Out of Pocket Maximum <i>In Network</i></p> <ul style="list-style-type: none"> • \$0 <p>0% cost share.</p> <p>Maxi/Maxi II pays all covered outpatient services in full. Maxi Pays \$1,500 on inpatient bills. Maxi II pays zero on all facility charges. Medicare/Medicaid will pay the balance of the inpatient bill or facility charge. Member will zero out-of-pocket.</p>	<p>Annual Plan Deductible</p> <ul style="list-style-type: none"> • \$0 <p>Out of Pocket Maximum <i>In Network</i></p> <ul style="list-style-type: none"> • \$0 <p>Preventative care services covered and ER visits covered 100%, in network.</p> <p>ACP pays 100% of Exchange policy premiums PLUS all deductibles, coinsurance and copayment incurred on the Exchange policy.</p>
Cost Share	<p>Retail Rx Copays: \$10/\$30/\$50/25% max: \$150 The Maxi Plan will reimburse you for all of your RX copayments.</p> <p>Mail Order Rx Copay: \$25/\$75/\$125. The Maxi Plan will reimburse you for all of your RX copayments.</p> <p>Maxi II does not cover RX but will reimburse all RX copays on Medicaid.</p>	
Eligibility	Full Time (30 or more hours per week) who also have Medicare (Maxi) or Medicaid (Maxi II)	Full Time (30 or more hours per week) who are expected to have claims exceeding \$50,000 in a year.
How to Change Coverage	Within 31 days of an IRS qualifying change in family status, is required.	Changes can be made at any time to the employee's contribution portion.

The benefits available through CGPS are an important part of your total compensation. This is a good time to review all of your benefit options.