

37 Enrolled Employees				Old Plan - Age Banded						New Plan - Transparent					
				Tufts Health 1000DED		Tufts Health 3000DED		Tufts Health 5000DED		Cigna 1000DED		Cigna 3000DED		Cigna 5000DED	
	Plan 1	Plan 2	Plan 3												
Employee	0	4	23	\$1,385.98	\$881.26	\$758.48			\$757.28	\$627.88	\$561.67				
Employee & Spouse	1	0	2	\$3,075.49	\$1,955.51	\$1,683.09			\$1,680.40	\$1,393.28	\$1,246.36				
Employee & Child(ren)	0	0	5	\$2,799.69	\$1,780.13	\$1,532.15			\$1,529.71	\$1,268.33	\$1,134.59				
Family	0	1	1	\$4,213.38	\$2,679.01	\$2,305.80			\$2,302.13	\$1,908.77	\$1,707.49				
<b>TOTAL:</b>				<b>\$3,075.49</b>	<b>\$6,204.05</b>	<b>\$30,777.77</b>	<b>\$40,057.31</b>	<b>\$1,680.40</b>	<b>\$4,420.29</b>	<b>\$22,791.57</b>	<b>\$28,892.26</b>				
<b>ANNUAL TOTAL:</b>				<b>\$36,905.88</b>	<b>\$74,448.60</b>	<b>\$369,333.24</b>	<b>\$480,687.72</b>	<b>\$20,164.80</b>	<b>\$53,043.48</b>	<b>\$273,498.84</b>	<b>\$346,707.12</b>				
<b>PLAN DESIGN</b>				In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Deductible															
Single				\$1,000	\$2,000	\$3,000	N/A	\$5,000	N/A	\$1,000	\$2,000	\$3,000	\$6,000	\$5,000	\$10,000
Family				\$2,000	\$4,000	\$6,000	N/A	\$10,000	N/A	\$2,000	\$4,000	\$6,000	\$12,000	\$10,000	\$20,000
Out of Pocket Max															
Single				\$2,500	\$5,000	\$4,500	N/A	\$6,000	N/A	\$2,000	\$4,000	\$6,000	\$20,000	\$8,150	\$20,000
Family				\$5,000	\$10,000	\$9,000	N/A	\$12,000	N/A	\$4,000	\$8,000	\$12,000	\$40,000	\$16,000	\$40,000
Coinsurance				0%	20%	0%	N/A	0%	N/A	10%	30%	20%	50%	0%	50%
Preventive Care				No Charge	20% AD	No Charge	N/A	No Charge	N/A	No Charge	30% AD	No Charge	50% AD	No Charge	50% AD
Office Visits															
Primary Care				\$35	20% AD	\$25	N/A	\$25	N/A	\$25	30% AD	\$25	50% AD	\$25	50% AD
Specialist				\$35	20% AD	\$50	N/A	\$50	N/A	\$40	30% AD	\$50	50% AD	\$50	50% AD
Prescription Deductible															
Single				No Ded	No Ded	No Ded	N/A	No Ded	N/A	No Ded	No Ded	No Ded	No Ded	No Ded	No Ded
Family				No Ded	No Ded	No Ded	N/A	No Ded	N/A	No Ded	No Ded	No Ded	No Ded	No Ded	No Ded
Tier 1				\$15	\$16	\$15	N/A	\$15	N/A	\$15	\$15	\$15	\$15	\$15	\$15
Tier 2				30%	30%	30%	N/A	30%	N/A	\$30	\$30	\$40	\$40	\$50	\$50
Tier 3				30%	30%	30%	N/A	30%	N/A	\$50	\$50	\$60	\$60	\$75	\$75
Tier 4				30%	N/A	30%	N/A	30%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Network				Tufts Health	Tufts Health	Tufts Health				Cigna	Cigna	Cigna			

HGRxPreferred replaced this Age-Banded plan with a transparent, medically underwritten plan that saved \$133,980 annually, or 28%.