

Medical Plan Features	BEK HSA MEDICAL PLAN	BEK PPO MEDICAL PLAN
<b>Tax-free Company contribution</b> The Company contribution will be deposited into your account on the first of the month after you enroll.	\$1,000 individual / \$2,000 family The amount you receive will be prorated, based on the number of months you are enrolled in the HSA	None
<b>Make your own pre-tax contributions</b>	Up to \$3,500 for individual and \$7,000 for family; unused dollars roll over for future use	None
<b>FOR IN-NETWORK CARE, YOU PAY:</b>		
<b>Preventive care</b>	\$0 – the plan pays 100%	
<b>Deductible</b>	\$2,700 individual / \$5,400 family	\$1,000 individual / \$3,000 family
<b>Coinsurance</b>	30%	
<b>Out-of-pocket</b>	\$6,450 individual / \$12,900 family	\$3,000 individual / \$6,000 family
<b>Doctor office visits</b>	Deductible + 30% coinsurance until you reach your out-of-pocket maximum	<ul style="list-style-type: none"> <li>• \$35 for primary care visit</li> <li>• \$50 for specialist visit</li> <li>• \$20 for virtual doctor visit</li> </ul>
<b>Non-maintenance prescription drugs</b>	30% coinsurance after you meet your annual deductible; use money in your HSA or pay out of your own pocket	\$75 annual calendar year deductible per person and: <ul style="list-style-type: none"> <li>• \$15 for generics</li> <li>• \$35 for preferred brand-name</li> <li>• \$75 for non-preferred brand-name</li> </ul>
<b>Maintenance prescription drugs – 90-day supply</b>	30% coinsurance after you meet your annual deductible; use money in your HSA or pay out of your own pocket	<ul style="list-style-type: none"> <li>• \$30 for generics</li> <li>• \$70 for preferred brand-name</li> <li>• \$150 non-preferred brand-name</li> </ul>