

2021 LCRA group health plan

	UHC Choice Plus in network	UHC Choice Plus out of network
Office visit copays	\$25 general \$25 Tier 1 specialists \$35 other specialists	Plan pays 60% after deductible
Virtual Visits - telemedicine	\$0 copay	NA
Deductible	\$500 individual \$1,500 family	\$1,000 individual \$3,000 family
Coinsurance	Plan pays 80%	Plan pays 60%
Preventative lab, X-ray	Plan pays 100%	Plan pays 60% after deductible
Major diagnostics (CT, PET and MRI scans, for example)	Plan pays 80% after deductible	Plan pays 60% after deductible
Urgent care	\$50 copay	Plan pays 60% after deductible
Emergency room	Plan pays 80% after deductible	Same as in-network benefits
Hospitalization	Plan pays 80% after deductible	Plan pays 60% after deductible
Combined medical and prescription out-of-pocket maximums	\$4,000 individual \$8,000 family	\$8,000 individual \$16,000 family

UnitedHealthcare provides prescription drug coverage for both group plans

	RETAIL (31-day supply)*	MAIL ORDER (90-day supply)
Tier I	Participant pays 10%, \$10 minimum, \$50 maximum	Participant pays 10%, \$10 minimum, \$100 maximum
Tier II	Participant pays 30%, \$30 minimum, \$100 maximum	Participant pays 30%, \$30 minimum, \$200 maximum
Tier III	Participant pays 50%, \$60 minimum, \$150 maximum	Participant pays 50%, \$60 minimum, \$300 maximum
Specialty Drugs		
Tier I	Participant pays 10%, \$20 minimum, \$100 maximum	
Tier II	Participant pays 30%, \$60 minimum, \$200 maximum	
Tier III	Participant pays 50%, \$120 minimum, \$300 maximum	

*Reminder: For your convenience you can fill a 90-day supply of maintenance prescriptions at a retail pharmacy. The cost would be the equivalent of paying for three months.