

# Plan Design

	PREMIUM SAVER		BALANCED SAVER		LEGACY PPO	
	EMPLOYEES COVERING JUST THEMSELVES	EMPLOYEES COVERING FAMILY MEMBERS	EMPLOYEES COVERING JUST THEMSELVES	EMPLOYEES COVERING FAMILY MEMBERS	EMPLOYEES COVERING JUST THEMSELVES	EMPLOYEES COVERING FAMILY MEMBERS
Preventive Exams Screenings and some RXs	FREE	FREE	FREE	FREE	FREE	FREE
Murray State HSA Contribution Opportunity					N/A	N/A
Racer Wellness Incentive Opportunity	Racer Wellness Pledge Completing Phase results in a incentive for Completion of Phase results in an additional incentive					
Deductible excludes copays		/Individual /Family		/Family		/Individual /Family
EE Coinsurance after deductible	Hospital Surgery % Other Services %	Hospital Surgery % Other Services %	Hospital Surgery % Other Services %	Hospital Surgery % Other Services %	% to all services not subject to a copay	% to all services not subject to a copay
Emergency Room					copay	copay
Office Visits General / Specialist	No copays	No copays	No copays	No copays	/	/
RX Generic / Brun.5 74791 320.80-3.->18.9<14>6.8 ( ) Tj6 74791 320.80-3.->18.9<14>6.8 ( ) Tj6 74791 320.80-3.->18.9<14>6.8 ( ) Tj6 74791 2 0 Tm 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 4679	Deductible	Deductible	Deductible	Deductible		

