

Affiliated Benefits Program Deductibles and Copayments

2012 Medical

Medical Dues	
Member	\$583/mo.
Member & Child/Children	\$865/mo.
Member & Spouse	\$1,197/mo.
Family	\$1,559/mo.

Annual Deductibles, Minimum	1.5% of Salary (Network & Non-Network)	2.5% of Salary (Out of Network)
Employee	\$475	\$950
Spouse &/or Children	\$475	\$950

Annual Deductibles, Maximum		
Employee	\$970	\$1,940
Spouse &/or Children	\$970	\$1,940

Annual Family Copayment Maximums	4% of Salary (Network & Non-Network)	12% of Salary (Out of Network)
Minimum	\$1,520	\$4,550
Maximum	\$3,100	\$9,300

Minimum Salary for determination of deductibles and copayment maximum is \$38,000.

Maximum Salary for determination of deductibles and copayment maximum is \$81,900.

Medical deductibles do not count toward copayment limit.

2012 Prescription Drugs Benefits

Type of Pharmacy	Maximum fill	Your Cost Per Prescription*		
		Generic	Formulary	Non-Formulary
Retail pharmacy	Up to a 30-day supply	\$8	30% of cost; min \$20 to max \$100	50% of cost; min \$50 to max \$150
Mail-order service	Up to a 90-day supply	\$20	30% of cost; min \$50 to max \$300	50% of cost; min \$125 to max \$450

* The maximum amount you pay each year in out-of-pocket prescription costs is \$2,500. This does not apply to non-formulary drugs or surcharges.

2012 Healthcare Deductibles and Copayment Maximums¹

Salary Range ²	Deductible ³		Copayment Maximum ⁴	
	Network 1.25%	Out of Network 2.50%	Network 4%	Out of Network 12%
\$0 - 42,299	\$475	\$950	\$1,520	\$4,550
\$42,300 - \$46,699	\$530	\$1,060	\$1,690	\$5,075
\$46,700 - \$51,099	\$585	\$1,170	\$1,870	\$5,605
\$51,100 - \$55,499	\$640	\$1,280	\$2,045	\$6,130
\$55,500 - \$59,899	\$695	\$1,390	\$2,220	\$6,660
\$59,900 - \$64,299	\$750	\$1,500	\$2,400	\$7,190
\$64,300 - \$68,699	\$805	\$1,610	\$2,570	\$7,715
\$68,700 - \$73,099	\$860	\$1,720	\$2,750	\$8,245
\$73,100 - \$77,499	\$915	\$1,830	\$2,925	\$8,775
\$77,500 or more	\$970	\$1,940	\$3,100	\$9,300

¹ For covered inpatient and outpatient medically necessary services, not counting prescription drug costs and office visit copays

² Deductibles and copayment maximums are rounded and based on the medical minimum salary basis of \$38,000 and the maximum of \$81,900

³ Members with dependents are responsible for two deductibles, one for the member and one for all other family members combined. These are not counted toward the copayment maximum.

⁴ After a member reaches the annual copayment maximum, the Medical Plan pays 100% of eligible expenses up to the plan allowance, except for office visits. The copayment maximum applies to the entire family combined. (70% of max)

2012 Copayments

	Network Area		Non-Network Area
	Network	Out of Network	
Copayment (other than office visit physician fee)	20%	40%	20%
Office visit physician fee ⁵	\$0 for eligible preventive care \$25 for primary care ⁶ \$45 for specialists	50%	\$0 for eligible preventive care \$25 for primary care ⁵ \$45 for specialists

⁵ Office visit copays do not count toward the deductible or the copayment maximum.

⁶ A primary care physician is an internist, a family or general practitioner, or a pediatrician.