

## Chicago Federation of Musicians - HUMANA Proposed Medical Plans

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<b>Benefits</b>	Current Plan Humana PPO <b>High Deductible Health Plan Option 22</b>	Current Plan Humana HMO <b>Option 79</b>	Proposed New Plan Humana HMO Simplicity HMO <b>Option 14</b>	Proposed New Plan Humana HMO <b>Option 40</b>
Deductible	\$5,000 / \$15,000	\$6,000	\$0	\$1,500
Family Deductible	\$15,000 / \$30,000	\$12,000	\$0	\$3,000
Coinsurance	80% / 50%	50%	100%	80%
Out-of-Pocket Max	\$6,750 / \$20,250	\$7,900	\$6,500	\$5,000
Out-of-Pocket Max Family	\$13,500 / \$40,500	\$15,800	\$13,000	\$10,000
Preventive Care	100%	100%	100%	100%
Office Visit Copay	20% / 50% coinsurance	\$40 copay	\$40 copay	\$35 copay
Specialist Office Visit	20% / 50% coinsurance	\$65 copay	\$100 copay	\$60 copay
Urgent Care Copay	20% / 50% coinsurance	100% after \$100 copay	\$125 copay	\$100 copay
Emergency Room	20% / 50% coinsurance	100% after \$350 copay	\$600 copay per test	\$350 copay
Prescription Drug Copays	20% / 50% coinsurance	\$10 / \$45 / \$90 / 25%	\$10 / \$45 / \$90 / 25%	\$10 / \$45 / \$90 / 25%
In-Patient / Out-Patient Surgery	Coinsurance applies	Coinsurance applies	\$2,000 per day for 3 days - In-Patient \$2,000 copay per visit, Out-Patient	Coinsurance applies
Imaging (CT/PET scans, MRI's)	Coinsurance applies	Coinsurance applies	\$600 copay per test	Coinsurance applies
<b>MONTHLY COST</b>				
Member Only	\$952	\$650	\$776	\$910
Member + Spouse	\$2,094	\$1,426	\$1,707	\$1,993
Member + Children	\$1,809	\$1,232	\$1,475	\$1,722
Family	\$2,951	\$2,010	\$2,405	\$2,809

This is a high level Summary of Benefits and does not contain information on all services. Request Benefit Summaries for additional details.