Health & Wellness



Medical & Prescription Benefits at a Glance Management 2021

Medical Plans`		United Healthcare (UHC) PPO Plan		CDPHP HMO Albany, Blenheim-Gilboa & Clark, plus Dutchess & Orange Counties	Independent Health HMO Flex Fit Active Buffalo/Niagara	Independent Health HMO Flex Fit Family Buffalo/Niagara
Bi-Weekly Cost - Employee Only	\$67.53		\$48.23	\$56.48	\$46.35	\$46.35
Bi-Weekly Cost - Family	\$243.29		\$210.84	\$202.48	\$165.54	\$165.54
Type of Services	In-Network	Out-of-Network	In-Network	In-Network	In-Network	In-Network
Preventive Care copay	\$0	20% coinsurance*	\$0	\$0	\$0	\$0
Virtual Visit copay	\$15	N/A	\$10	\$20	General medicine: \$10 adult / \$25 child	General medicine: \$15 adult / \$0 child
Primary Care copay	\$25	20% coinsurance*	\$20	\$20	\$10 adult / \$25 child	\$15 adult /\$0 child
Specialist copay	\$40	20% coinsurance*	\$35	\$20	\$25	\$25
Chiropractic copay	\$40	20% coinsurance*	\$35	\$20	\$25	\$25
Urgent Care copay	\$40	20% coinsurance*	\$35	\$30	\$35	\$35
Emergency Room Visit copay**	\$150	\$150	\$100	\$50	\$150	\$150
Hospitalization copay	\$0	\$0	\$0	\$0	\$0	\$0
Retail Prescriptions						
Tier 1 / Tier 2 / Tier 3	\$10/\$30/\$45	\$10/\$30/\$45	\$10/\$20/\$35	\$10/\$25/\$40	\$4/\$15/\$30	\$4/\$15/\$30
Mail Order Prescriptions						
Tier 1 / Tier 2 / Tier 3	\$20/\$60/\$90	N/A	\$20/\$40/\$70	\$25/\$62.50/\$100	\$10/\$37.50/\$75	\$10/\$37.50/\$75
Deductible	Individual: \$0 Family: \$0	Individual: \$600 Family: \$1,200	Individual: \$0 Family: \$0	Individual: \$0 Family: \$0	Individual: \$0 Family: \$0	Individual: \$0 Family: \$0
					Out-of-network Deductible Individual: \$1,000 / Family: \$2,000 (20% coinsurance)	
Out-of-pocket Limit	Individual: \$3,000 Family: \$6,000	Individual: \$2,000 Family: \$4,000	Individual: \$2,500 Family: \$5,000	Individual: \$8,550 Family: \$17,100	Individual: \$6,350 Family: \$12,700	Individual: \$6,350 Family: \$12,700
					Out-of-network Deductible Individual: \$10,000 / Family: \$20,000 (20% coinsurance)	
Out-of-network Benefits	,	Yes		No	Yes	Yes

^{*}After deductible **Waived if admitted