



Invited

WHICH MEDICAL PLAN IS RIGHT FOR ME?

MEDICAL TERMS TO KNOW		
	Premiums	The amount taken out of each paycheck to pay for your medical coverage. Ranges from \$30 to \$105 for Employee-only and \$55 to \$395 for family.
	Surcharge	Additional \$30 per bi-weekly paycheck added to your premiums if you do not provide the documentation for completing a preventive diagnostic screening by November 30, 2024.
	In-Network (IN)	In-network (IN) refers to a healthcare provider or facility that has a contract with our health insurance plan(s) to provide services to its members at a discounted rate. In-network providers are also known as participating providers. The costs for In-Network providers are significantly less for you and Invited.
	Provider Tiers	Providers are sorted into tiers based on their cost and quality relative to other similar providers. Providers with higher quality and lower cost are typically given the most preferred tier rankings (Tier 1 versus Tier 3). Tiers can be found on the healthcare provider website, app or by contacting HealthJoy.
	Primary Care Physician (PCP)	A Primary Care Physician is the doctor you regularly see for overall wellness, attending to everyday medical needs and emphasizing preventive care alongside immediate concerns.
	Specialist	Specialists have received additional training and focus on a specific area of medicine (i.e., dermatologist, psychiatrist).
	Out-of-Network (OON)	Out-of-network (OON) refers to a healthcare provider or facility that has NOT contracted with our health insurance plan(s) to provide services to its members. OON providers have higher costs to you with higher deductibles, coinsurance and OOP maximum on the UHC plans. On the SimplePay plan providers have higher copays.
	Annual Deductible	The amount of money you are required to pay for covered health care services before your insurance plan begins to pay. Certain payments, such as copays, do not go toward your annual deductible. Ranges from \$0 to \$4,000 for individual and \$0 to \$8,000 for family.
	Copay	A fixed amount you pay when you go to a healthcare provider (PCP or specialist), receive certain healthcare services or prescription drugs. The amount <u>does not</u> count towards your annual deductible. Ranges from \$10 to \$30 for Tier 1 In-Network doctors. Note: The High Deductible Health Plan does not have copayments.
	Coinsurance	A percentage of covered expenses that you must pay after you satisfy the annual deductible. Typically, only used in high deductible health plans or out-of-network costs. Ranges from 20% for Tier 1 In-Network to 60% for Out-of-Network.
	Out-of-Pocket Maximum (OOP)	The maximum amount you will pay for all deductibles, coinsurance and copayments during a calendar year. Costs not covered by the plan do not apply to the OOP. In-Network OOP from \$6,500 to \$9,100 for individual and \$13,000 to \$18,200 for family. You can expect a separate OOP maximum for Out-of-network services.