

GOLDEN SPIKE TOWER

Prepared by

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An Exclusive Service of OCI Insurance & Financial Services

GOLDEN SPIKE TOWER



MEDICAL SUMMARY

Effective: 2/1/2023

Proposal Type	CURRENT	RENEWAL	PROPOSED	PROPOSED
Carrier	UHC	UHC	BCBSNE	MEDICA
Note	Assured			
Plan Name	\$4,000 70% - CO-B2	\$4,000 70% - CV-3U	\$4,100 70% - SPB23 (NB)	\$4,000 60% (Three Free)
Option Type	Essential PDL*	Silver	Silver	Silver
Network	In Network	In Network	In Network	In Network
Deductible - EE	\$4,000	\$4,000	\$4,100	\$4,000
Deductible - Family	\$8,000	\$8,000	\$8,200	\$8,000
Coinsurance	70%	70%	70%	60%
Out of Pocket Max	\$7,000	\$8,000	\$9,000	\$9,100
Out of Pocket Max - Family	\$14,000	\$16,000	\$18,000	\$18,200
Physician/Specialist Copay	Ded then \$30/\$60*	Ded then \$30/\$60*	\$50/\$75	\$40*/\$120
Copay Note				First 3 Primary or Urgent Visits Free
Standard Telehealth Copay	\$0	No Charge	\$10	\$0
Urgent Care Copay	\$50	\$50	\$75	\$40*
Emergency Room Copay	Ded of \$500 then Ded then 30%	Ded then 30%	Ded then 30%	Ded then 40%
X-Ray/Lab	Ded then 30%/Ded then 50%*	Ded then 30%/50%*	Ded then 30%	Ded then 40%
Major Diagnostic (MRI,CT,etc.)	Ded then 50%*	Ded then 50%*	Ded then 30%	Ded then 40%
Prescriptions(Rx)	\$10/\$40/\$105/\$250	\$10/\$40/\$105/\$250*	\$10/\$30/\$50/\$125*	\$15/\$60/\$120
Specialty Rx	Refer to Formulary	Refer to Formulary	Ded then 40%/50%*	\$500*
Rx Notes	Preferred Rx, SBC has addt'l info	Preferred Rx, SBC has addt'l info	Designated Rx, SBC has addt'l info	Preventive Drug Benefit
Provider Network	Choice Plus	Choice Plus	NETwork Blue	Medica Choice National
Employee	2 \$682.94	2 \$748.89	2 \$678.39	2 \$685.22
Employee + Spouse	0 \$1,365.87	0 \$1,497.78	0 \$1,356.78	0 \$1,370.44
Employee + Child(ren)	1 \$1,263.43	1 \$1,385.45	1 \$1,255.03	1 \$1,267.66
Employee + Family	0 \$1,946.36	0 \$2,134.34	0 \$1,933.42	0 \$1,952.88
Employee Total	\$2,048.81	\$2,246.67	\$2,035.18	\$2,055.66
Dependent Total	\$580.49	\$636.56	\$576.63	\$582.44
Combined Monthly Total	\$2,629.30	\$2,883.23	\$2,611.81	\$2,638.10
% Variance		9.66%	-0.67%	0.33%

Rates and benefits are illustrative only and represent only a brief summary of the plan highlights. Final rates will be determined from effective date, actual enrollment and/or health conditions.

*Please refer to the benefit summary for more specific details regarding this benefit.

^Please refer to the carrier proposal and/or benefit summary for more specific details.

Age Banding Report - GOLDEN SPIKE TOWER - 2/01/2023

MEDICAL

UHC - \$4,000 70% - CO-B2 - CURRENT

Line	Name	Item Cvg	Age	Sp. Age	Gender	EE	SP	CH1	CH2	CH3+	AC	Total
1	Kim Martin	1 EE	50		F	\$912.54						\$912.54
2	Kirsten Parker	2 EE	44		F	\$713.78						\$713.78
3	Keri Allen	3 CH	33		F	\$612.11		\$390.87				\$1,002.98
Total:						\$2,238.43	\$0.00	\$390.87	\$0.00	\$0.00	\$0.00	\$2,629.30

UHC - \$4,000 70% - CV-3U - RENEWAL

Line	Name	Item Cvg	Age	Sp. Age	Gender	EE	SP	CH1	CH2	CH3+	AC	Total
1	Kim Martin	1 EE	51		F	\$1,016.87						\$1,016.87
2	Kirsten Parker	2 EE	45		F	\$787.33						\$787.33
3	Keri Allen	3 CH	34		F	\$661.92		\$417.11				\$1,079.03
Total:						\$2,466.12	\$0.00	\$417.11	\$0.00	\$0.00	\$0.00	\$2,883.23

BCBSNE - \$4,100 70% - SPB23 (NB) - PROPOSED

Line	Name	Item Cvg	Age	Sp. Age	Gender	EE	SP	CH1	CH2	CH3+	AC	Total
1	Kim Martin	1 EE	51		F	\$921.15						\$921.15
2	Kirsten Parker	2 EE	45		F	\$713.21						\$713.21
3	Keri Allen	3 CH	34		F	\$599.61		\$377.84				\$977.45
Total:						\$2,233.97	\$0.00	\$377.84	\$0.00	\$0.00	\$0.00	\$2,611.81

MEDICA - \$4,000 60% (Three Free) - PROPOSED

Line	Name	Item Cvg	Age	Sp. Age	Gender	EE	SP	CH1	CH2	CH3+	AC	Total
1	Kim Martin	1 EE	51		F	\$930.42						\$930.42
2	Kirsten Parker	2 EE	45		F	\$720.39						\$720.39
3	Keri Allen	3 CH	34		F	\$605.64		\$381.65				\$987.29
Total:						\$2,256.45	\$0.00	\$381.65	\$0.00	\$0.00	\$0.00	\$2,638.10