



## CFC Health Plan Summary

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### Your Bi-weekly Premium:

- Individual: \$13.45
- Employee + Spouse: \$60.00
- Employee + Child(ren): \$55.38
- Family: \$76.15

Note: Vision and dental premiums are separate and are not included in these rates. You will find dental and vision rates by going to CFCNet, click on My Company and choose Benefits.

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### Annual Deductible:

- \$1,500 for individual coverage
  - \$3,000 for all other coverage levels
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### Co-insurance for Medical Services After Deductible is Met:

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|-------------------|------------------|
| In-Network:       | Out-of-Network:  |
| • Plan pays: 100% | • Plan pays: 60% |
| • You pay: 0%     | • You pay: 40%   |
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### Preventive Care (see Page 10):

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|---|--|
| In-Network  | Out-of-Network:  |
| • You pay: 0% (without having to meet deductible) | • You pay: 40% (without having to meet the deductible) |
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### Prescription Drugs:

You pay full cost until you meet your deductible. After you meet your deductible, you pay the applicable co-pay and co-insurance depending on type of drug and whether you use retail or mail order to purchase your prescriptions. (see Page 11)

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### Providers:

- Our in-network providers are through HealthSpan (Greater Cincinnati) or HealthSmart National Network (outside Cincinnati). In-network providers have an agreement with CFC to provide services at a discounted rate in exchange for the opportunity to treat more patients. If you use these services, your out-of-pocket costs are discounted. You can find a list of in-network providers by going to CFCNet, click on My Company and choose Benefits.
  - Out-of-network providers are also covered by the plan, but you will pay more when you use these providers, as they charge CFC more for their services.
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### Out-of-pocket Maximum:

- For services from in-network providers: After the sum of your deductible, co-pay and co-insurance reaches \$2,500 for individuals or \$5,000 for families, the Plan pays 100% of eligible medical expenses, including prescriptions.
- For service from out-of-network providers: After the sum of your deductible, co-pay and co-insurance reaches \$5,000 for individuals or \$10,000 for families, the Plan pays 100% of eligible medical expenses, including prescriptions.