

**Murray State's 2009 Basic Plan
Compared to the 2010 High Deductible Health Plan – All In-Network**

| Benefit Provision | 2009 Basic | 2010 High Deductible Health Plan |
|--|---|--|
| Annual Deductible | Deductible in network \$2,000 for single \$4,000 for family | Deductible in network** \$2,000 for single \$3,000 for family |
| Maximum Out-of-Pocket (includes deductible) | Maximum Out-of-Pocket in network \$5,000 for single \$10,000 for family | Maximum Out-of-Pocket in network** \$5,000 for single \$10,000 for family |
| Lifetime Maximum | \$1,000,000 | \$5,000,000 |
| Physician Services Office Visit All other services in office | \$30 co-pay Paid at 70%* | Paid at 70%* -- After deductible is met, 70% is paid by MSU; member pays 30% co-insurance for all services. Co-payments are not permitted. Ex.: \$30 office visit co-pay is not permitted with a HDHP. |
| Preventive Care – Not subject to deductible | Covered in full up to \$200 maximum per person per year | Covered in full up to \$750 maximum per person per year |
| Outpatient Physical Medicine Therapies (Combined Network & Non-Network calendar yr limits apply) Physical, Occupational – 30 visit limit Speech & Spinal Manipulations – 20 visit limit | Paid at 70%* | Physical, Occupational, & Speech; 30 visit max Spinal Manipulations: 20 visit max |
| Inpatient Services Unlimited days except for: 180 days Network/Non-Network combined for skilled nursing facility | Paid at 70%* | Paid at 70%* |
| Outpatient Surgery Hospital/Alternative Care Facility | Paid at 70%* | Paid at 70%* |
| Inpatient and Outpatient Professional Charges | Paid at 70%* | Paid at 70%* |
| Medical Supplies, Equipment, & Appliances | Paid at 70%* | Paid at 70%* |
| Home Care Services 30 visit limit for Out-of-Network. Excludes IV therapy | Paid at 70%* | Paid at 70%* |
| Hospice | Paid at 100% | Paid at 70%* |
| Emergency Room (covers all services, co-payment waived if admitted, then inpatient co-payment applies) | \$150 co-pay | Paid at 70%* |
| Urgent Care | \$35 | Paid at 70%* |
| Ambulance | Paid at 70%* | Paid at 70%* |
| Mental Health and Substance Abuse Inpatient – 21 days per calendar year Outpatient – 30 visits per calendar year | Covered same as any other illness | Covered same as any other illness Inpatient – No days limit Outpatient – No visit limit |
| Human Organ and Tissue Transplants | Paid at 70%* | Paid at 70%* |
| Prescription Drugs Retail: 30 day supply Includes diabetic test strips | | |
| Generic Formulary | \$20 co-pay | Paid at 70%* |
| Brand Formulary | \$40 co-pay | Paid at 70%* |
| Gen/Brand Non-Formulary | \$80 co-pay | Paid at 70%* |
| Mail Order: 90 day supply | | |
| Generic Formulary | \$40 co-pay | Paid at 70%* |
| Brand Formulary | \$80 co-pay | Paid at 70%* |
| Gen/Brand Non-Formulary | \$160 co-pay | Paid at 70%* |

MSU Health Services Facility

| MSU Health Services Facility (For all regular FT employees) | 2009 | 2010 |
|---|-------------|--------------|
| Office Visit | NA | No charge |
| Other services referred out | | Paid at 70%* |

*Services subject to the deductible.

**One deductible and out-of-pocket maximum apply to family coverage – the entire family deductible must be met before benefits are paid on any member.

New items in 2010:

- Includes a wellness plan with incentives at various results-based levels and completion of a Health Risk Assessment. (For all Reg. FT EEs)
- HDHP will include an MSU contribution of \$300 employee only / \$600 family for each employee-member who adds a minimum of \$5/bi-weekly or \$11/monthly pay period for at least one quarter. MSU contribution will also include \$50.40 to cover \$15.00 initial account set-up and \$2.95 per month fees for 12 months. Change forms are due in HR 15 days before the start of a new quarter.
- Includes step therapy program to steer members to generic Rx alternatives.
- Birth control pills covered in Rx program.
- Hearing aids and related services for persons under age 18; one hearing aid per ear up to \$1,400 every 36 months.
- Tobacco cessation pharmaceutical products are covered 50% with Rx.