



Lubbock ISD Health Plan administered by Blue Cross and Blue Shield of Texas



Major Medical Plans	Employee Premium	Office Visit	In Network	Out of Network	Prescriptions
<u>PPO-Bronze Plan</u> \$6,650 Deductible (\$13,300 Family Total)	<i>Monthly Premiums</i> Employee Only \$484 Employee & Children \$574 Employee & Spouse \$635 Employee & Family \$808	100% of allowable costs <i>after</i> Deductible is met <u>HSA Option</u>	100% of allowable costs <i>after</i> Deductible is met \$6,650 max out of pocket	Deductible, then \$5,000 individual \$10,000 Family \$13,300 max out of pocket	100% of allowable costs after deductible is met.
	<u>HMO-Bronze Plan</u> \$6,650 Deductible (\$13,300 Family Total)				
HMO Bronze & HMO Silver require Primary Care Provider referrals for Specialist visits.					
<u>PPO-Silver Plan</u> \$4,000 Deductible (\$8,000 Family Total)	<i>Monthly Premiums</i> Employee Only \$677 Employee & Children \$838 Employee & Spouse \$989 Employee & Family \$1,280	80% of allowable costs <i>after</i> Deductible is met	80% of allowable costs <i>after</i> Deductible is met \$7,050 max out of pocket for an individual	Deductible, then \$8,000 Individual \$16,000 Family \$14,100 max out of pocket for an individual	\$100 Rx Deductible per person: Retail: \$15 for Generic \$35 for Brand Formulary \$60 for Brand Non Formulary Mail In: 3X Retail Co-Pay for 90 day supply of Brand
	<u>HMO-Silver Plan</u> \$4,000 Deductible (\$8,000 Family Total)				

1 In addition to routine annual physical examinations, well-baby exams, immunizations for those 6 years of age and over and any other preventive health services as determined by the U.S. Preventive Services Task Force (USPSTF) will be covered at no cost.

For further information, please contact Risk Management at 806-219-0283

Updated 10/9/19 for 2020 Plan Year