

Bronze HSA Plan Details

Available Plan Benefits in blue are subject to medical deductible.

Copays in Black are Not Subject to any Deductible and Count Toward the Annual Out-of-Pocket Maximum

STANDARD BENEFITS FOR INDIVIDUALS

Key benefits Bronze 60 Health Savings Account

Individual Deductible	\$4,500 deductible for medical & drugs
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Family Deductible	\$9,000 deductible
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Preventative Care Copay ¹	no cost
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Primary Care Visit Copay	40%
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Specialty Care Visit Copay	40%
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Urgent Care Visit Copay	40%
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Generic Medication Copay	40%
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Lab Testing Copay	40%
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X-Ray Copay	40%
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Emergency Room Copay	40%
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High cost and infrequent services (e.g. Hospital Stay)	40% of your plan's negotiated rate
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Preferred brand copay after Drug Deductible (if any)	40%
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Maximum Out-of-Pocket For One	\$6,250
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Maximum Out-of-Pocket For Family	\$12,500
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¹ in-network only