## State of Indiana Rx Benefit Comparison Summary of Benefits for 2013

## **Deductibles and out-of-pocket maximums:**

	CDHP 1		CDHP 2		Traditional PPO		
	In-	Out-of-	In-	Out-of-	In-	Out-of-	
	Network	Network	Network	Network	Network	Network	
Deductible							
Single	\$2,500		\$1,500		\$ 750	\$1,500	
Family	\$5,000		\$3,000		\$1,500	\$3,000	
Out-of-pocket maximum							
Single	\$4,000		\$3,000		\$2,500	\$5,000	
Family	\$8,000		\$6,	000	\$5,000	\$10,000	

Copay/co-insurance after deductible is met and before out-of-pocket maximum is satisfied (applies to all three plans: CDHP 1, CDHP 2, Traditional PPO):

Prescription drugs	Retail (30 days)	Mail order (90 days)		
Preventive (generics mandated by the Affordable Care Act)	\$0 (not subject to the deductible)	\$0 (not subject to the deductible)		
Generic	\$10 copay	\$20 copay		
Brand, Formulary	20% Min \$30, max \$50	20% Min \$60, max \$100		
Brand, Non-	40%	40%		
formulary	Min \$50, max \$70	Min \$100, max \$140		
Specialty	40% min \$75, max \$150 (30 day supply)			

<sup>\*</sup>For more information on the preventive drugs covered 100% by our plan, call Express Scripts (formerly Medco) at 1-877-841-5241.