

MEDICAL INSURANCE

Hamilton County Government employees are covered under a Health Care plan that allows employees to save money by using in-network providers. We offer four levels of coverage to give you options that fit your particular needs. We also offer an optional flexible spending account that allows you to save dollars, pre-tax, for recurring medical expenses like co-pays, deductibles and prescription drugs. The employee's **monthly** premiums are as follows:

Individual Coverage	\$26.64
Single Parent Coverage	\$47.91
Employee/Spouse	\$55.89
Family	\$79.82

Below is a summary of benefits for the **Hamilton County Government Coinsurance Plan**.

Benefit Features	In Network	Out of Network
Life Maximum Benefit	Unlimited	
Dependent Age Limit	To age 26	
Pre-Existing Condition Waiting Period	12 months (Please call your HR Benefits Dept. for credible coverage information).	
Annual Deductible		
Individual	\$1,000	\$2,000
Family	\$2,000	\$4,000
Out of Pocket Maximums		
Individual	\$2,000	\$6,000
Family	\$4,000	\$12,000
Physician/Specialist Copay	\$25/\$40 per visit	40% after deductible, plan pays 60%
Non-Routine Diagnostic Serv	20% after deductible	40% after deductible, plan pays 60%
Preventive Healthcare		
Well Child Care (to age 6)	\$25 co-pay – (1) visit per yr.	40% after deductible, plan pays 60%
Well Woman Visit	\$25 co-pay – (1) visit per yr.	40% after deductible, plan pays 60%
Immunizations	No charge – children under age 6	40% after deductible, plan pays 60%
Hospital Care		
Inpatient Service	20% after deductible, plan pays 80%	40% after deductible, plan pays 60%
Outpatient Surgery	20% after deductible, plan pays 80%	40% after deductible, plan pays 60%
Advanced radiological imaging	20% after deductible, plan pays 80%	40% after deductible, plan pays 60%
Emergency Care	20% after deductible, plan pays 80%	20% after deductible, plan pays 80%
Surgery (in Phys. Office)	\$30 copay	
Vision Exam	\$20 co-pay – (1) visit per yr.	
Prescription Drugs	Retail Pharmacy	County Pharmacy
Generic	\$10	\$2
Preferred Brand	\$35	\$20
Non-Preferred Brand	\$50	\$35
Erlanger discounts	Erlanger Discounts are applied by Erlanger and are not part of your CIGNA plan benefits.	
	Do not apply to TC Thompson or OB services	
Inpatient Service	\$300 discount	
Outpatient Surgery	\$150 discount	
Advanced radiological imaging	\$ 50 per scan	