Medical Plan Comparison Chart

	EPO Plan	PPO Plan	ULH Plan — ULH (UofL) Provider	ULH Plan — Anthem Provider	PCA High Plan	PCA Low Plan
Network	Anthem network coverage only[1]	Anthem network and out-of-network coverage provided	Anthem network coverage only[1] (even higher coverage when you see ULH providers considered high performing by Anthem)		Anthem network and out-of-network coverage provided	Anthem network and out-of-network coverage provided
Annual Allowance Amount from UofL in an HRA that can be applied toward the deductible. Any unused balance rolls to the next year, up to 1x the annual amount	N/A				$500 employee (ee) $1,000 ee + spouse/QA $2,000 ee + child(ren) $2,000 ee + family	
ANNUAL DEDUCTABLE						
Per Person	$0	$250	$0	$500	$1,000	$2,000
Per Family	$0	$750	$0	$1,000	$3,000	$4,000
ANNUAL MEDICAL OUT-OF-POCKET MAXIMUM (Copays, coinsurance and deductibles accumulate toward the out-of-pocket max)						
Per Person	$2,000	$2,250	$2,000	$4,500	$4,000	$5,000
Per Family	$4,000	$4,750	$4,000	$9,000	$9,000	$10,000
PRIMARY DOCTOR'S OFFICE VISITS (OBGYN visits covered as primary doctor.)						
UofL Physician	$0	$0	$0	N/A	10% after deductible[2]	20% after deductible[2]
Non UofL Physician	$20	$20	N/A	$25	10% after deductible	20% after deductible
Specialist	$35	$35	$0	$50	10% after deductible	20% after deductible
Telehealth[3] through Anthem's LiveHealth Online	$20	$20	$20	$25	10% after deductible	20% after deductible
PREVENTIVE CARE[4] AND INPATIENT CARE						
Preventive Care[4]	0% (fully covered)					
Inpatient Care (hospital and physician care)	10%	10% after deductible	$300	30% after deductible	10% after deductible	20% after deductible

[1] Out-of-network emergency care is covered.

[2] A $20 discount applies when you see a ULH physician.

[3] Limited to 50 visits per year for physical and occupational therapy combined and limited to 25 visits per year for speech therapy.

[4] Routine physicals, gynecological exams, mammograms, well-childcare and routine immunizations, labs, x-rays or other preventive test