

# Madison College

## Health Insurance Benefits – Plan Comparison

In 2019, Madison College will offer eligible employees the option of three HMOs, Arise Health Plan, Dean Health Plan and Group Health Cooperative of South Central Wisconsin (GHC-SCW). If the employee resides outside of the 12-county HMO Service Area, the WPS PPO is available. All of the offered plans will offer the same deductibles, coinsurance, copayments and annual out-of-pocket maximums for in-network services so your health plan decision may be determined by your access to the providers you wish to see.

Provision/Benefit	Your Cost (Applies to All Health Plans – In-network*)	Notes
<b>Annual Deductible</b>	\$250 single \$500 family	
<b>Coinsurance</b>	10% (after deductible)	
<b>Office Visit Charge (Primary/Specialty)</b>	\$25	GHC-SCW and WPS PPO members: Copay waived at GHC-SCW Truax Community Clinic
<b>Chiropractic</b>	Dean and GHC-SCW: \$25 Copay Arise and WPS: 10% (after deductible)	
<b>Annual Out-of-Pocket Limit (includes in-network deductible and coinsurance)</b>	\$500 single \$1,000 family	
<b>Maximum Annual Out-of-Pocket Limit (includes in-network deductible, coinsurance and copays)</b>	Dean and GHC: \$6,850 single, \$13,700 family Arise and WPS: \$5,350 single, \$10,700 family	<ul style="list-style-type: none"> <li>Set by Affordable Care Act to limit out-of-pocket liability</li> <li>Unlikely to exceed the annual out-of-pocket limit shown above</li> </ul>
Prescriptions		
<b>Tier 1</b>	\$5	<ul style="list-style-type: none"> <li>Prior authorizations, step therapy and other restrictions may apply</li> <li>Copays shown are for a 30-supply</li> </ul>
<b>Tier 2</b>	\$35	
<b>Tier 3</b>	\$50	
<b>Tier 4 Specialty</b>	\$75 Dean Health Plan does not have Tier 4	
<b>Mail-Order Drugs</b>	All plans offer mail-order prescriptions	Arise and WPS: 3 month supply for 2 copays. GHC/Dean: 3 month supply for 3 copays
Provision/Benefits		
<b>Diagnostic X-ray and Lab (outpatient)</b>	10% coinsurance after deductible	GHC-SCW applies a 20% coinsurance after deductible
<b>Advanced, such as CAT Scans, MRI</b>	\$50 copay	
<b>Hospital and Surgical Center (inpatient/outpatient)</b>	10% coinsurance after deductible	
<b>Hospice</b>	10% coinsurance after deductible	Allows same coverage for inpatient and in-home care
<b>Urgent Care</b>	\$25 copay and/or 10% coinsurance after deductible	
<b>Emergency Care</b>	\$150 copay and/or 10% coinsurance after deductible	<ul style="list-style-type: none"> <li>Copay is waived if admitted as an inpatient</li> <li>Emergency care may be received out-of-network anywhere in the world</li> </ul>

Provision/Benefit	Your Cost (Applies to All Health Plans – In-network*)	Notes
<b>Ambulance Transport</b>	10% coinsurance after deductible	Limited to emergency care
<b>Mental Health/Substance Abuse - Inpatient/Day Treatment Programs</b>	10% coinsurance after deductible	
<b>Mental Health/Substance Abuse - Outpatient</b>	\$25 copay	Arise and WPS PPO: \$0 copay
<b>Durable Medical Equipment</b>	10% coinsurance after deductible	
<b>Hearing Aids</b>	GHC-SCW: 20% coinsurance after deductible Dean: 10% coinsurance after deductible Arise, WPS: 1 hearing aid is covered, per ear, for each member under age 18 every three years	One per ear every 36 months
<b>Physical, Therapy and Occupational Therapy</b>	\$25 per therapy per day	
<b>Home Health Care –</b>	10% coinsurance after deductible	<ul style="list-style-type: none"> <li>• Dean and GHC-SCW: 60 visits per calendar year</li> <li>• Arise and WPS PPO: 40 visits per calendar year</li> </ul>
<b>Skilled Nursing Facility</b>	10% coinsurance after deductible; 30 days per confinement	GHC: limited to 100 days per calendar year
<b>Preventive Services</b>	No cost to you	See list of preventive services at <a href="https://www.healthcare.gov/coverage/preventive-care-benefits/">https://www.healthcare.gov/coverage/preventive-care-benefits/</a>
<b>Telehealth</b>	Arise, WPS: No cost for Teladoc Dean: No cost for Virtual Visit GHC-SCW: 3 free visits for Virtuwell	
<b>Out-of-Network Coverage for Dependents (non-emergency/urgent care)</b>	Arise, WPS: Access to First Health nationwide network Dean: Access to national network GHC-SCW – no coverage	
<b>Annual Vision Exam</b>	Arise, GHC-SCW, WPS: No cost to you Dean: \$25 copay	
<b>Preventive Dental Cleanings</b>	GHC-SCW only: No cost to you	

\*WPS PPO has higher out-of-pocket costs when the member sees an out-of-network provider.

View the [definitions of common health insurance terms](#), e.g., deductible, coinsurance, copayment and deductible.

*This a summary of the benefits offered by these health plans. For full details about each health plan's benefits, please see the Benefits Summaries and Schedule of Benefits and Coverage at <https://facstaff.madisoncollege.edu/in/benefits-matc>; then select the applicable health plan. Some plans may offer additional benefits that are not listed above. If there are any discrepancies between this document and the plan documents, the health plans' documents take precedence.*