

Medical Insurance



The **medical** plan provider is BlueCross BlueShield of Mississippi. To find individualized information on your benefit coverage, check the status of claims, or search for physicians and hospitals go to www.bcbsms.com and register for a myBlue account.

Services	In Network	Out of Network
Calendar Year Deductible	\$5,000 Individual \$10,000 Family	\$10,000 Individual \$20,000 Family
Calendar Year Out of Pocket <i>Includes the Deductible and Co-pays and Coinsurance</i>	\$6,550 Individual \$13,100 Family	Unlimited
Inpatient Services (Preadmission Certification required)	Deductible, then 80%	Deductible, then 60%
Outpatient Surgery (including Ambulatory Surgical)	Deductible, then 80%	Deductible, then 60%
Emergency Room (Accident or Medical Emergency)	Deductible, then 80%	Deductible, then 60%
Outpatient Diagnostic Lab, X-ray, Pathology, Dialysis, IV Therapy, Chemotherapy & Radiation Therapy	Deductible, then 80%	Deductible, then 60%
Physician Office Visits	Deductible, then 80%	Deductible, then 60%
Preventive Care – (see: www.bcbsms.com for a list of covered preventive services)	Covered at 100%	Not Covered
Ambulance Service	Deductible, then 80%	Deductible, then 60%
Durable Medical Equipment	Deductible, then 80%	Deductible, then 60%
Prescription Drugs Co-pay - Tier 1/Tier2/Tier 3/Tier 4	Deductible, then 80%	Not Covered

Employee Cost

Coverage Type	Employee Bi-Weekly Premium
Employee Only	\$25.00
Employee plus Spouse	\$224.63
Employee plus Child(ren)	\$97.29
Family	\$346.33