## Pontiac School District Food Service/PAO's 2020-21

Blue Care Network.

**HMO-500** 

\$500/\$1,000 deductible- \$20 office calls, \$4/\$15/\$40/\$80 prescriptions Most services covered at 90% after deductible or applicable co-pay

See plan document for details

Blue Care Network

HMO-HDHP

\$1,400/\$2,800 deductible -. \$4/\$15/\$40/\$80 prescriptions after deductible has been met

Most services covered at 80% after deductible has been met

**Health Savings Account available** 

MetLife Dental

100% Preventative Care – Class I (In-network) 75% Restorative – Class II (In-network)

50% Specialty Care - Class III (In-network)

\$1,500 Annual Maximum coverage per family member \$1,800 Lifetime Maximum coverage Orthodontia

Life

\$17,000 with AD&D (Food Service)

\$20,000 with AD&D (COPS)

**Vision** 

MESSA - TA's & Food Service

Full Plan Descriptions can be found at www.pontiac.k12.mi.us/Page/225

## Employee Cost-Per pay Period (Based on 21 pays/year)

**HMO Plan** 

Single \$ 64.45 Two Person \$ 254.91 Three or more \$ 281.90

**HMO-HDHP Plan** 

Single \$ no charge Two Person \$ 81.64 Three or more \$ 65.31