

Health Benefits

<i>Function</i>	Blount	Knox	Sumner	Williamson
Preventive Care	100% No deductible	\$30 copay	100% \$300 max	90%
Office Visits	90%	\$40 copay	90%	90%
Hopital	90%	80%	90%	90%
Individual OOP max	\$1500	\$2250	\$2575	\$1500
Emergency Rm	90% \$50 copay	\$200 copay	90% \$50 copay	90% \$100 copay
X-ray, labs	90%	80%	90%	90%
Prescriptions	\$10/ 30% \$60 max	\$10/\$20/\$40	\$5/\$25/\$35	\$10/20%/35%
Single Monthly rate	\$0	\$38	\$98	\$0
Single + 1	\$100	\$153	\$201	\$146
Family	\$100	\$208	\$248	\$279

