

SAUCON VALLEY SCHOOL DISTRICT
HELLERTOWN, PENNSYLVANIA

COMPENSATION AND BENEFITS PLAN
BOARD OF SCHOOL DIRECTORS

and

THE EDUCATIONAL SUPPORT STAFF
(Staff Nurses, Instructional Paraprofessionals, Non-Instructional Paraprofessionals)

EFFECTIVE

July 1, 2022 to June 30, 2025

COMPENSATION AND BENEFITS PLAN
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July 1, 2022 to June 30, 2025

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COMPENSATION AND BENEFITS PLAN

I. EFFECTIVE DATE OF PLAN

This plan is effective July 1, 2022 and shall continue until June 30, 2025.

II. EMPLOYEE GROUPINGS

a. There shall be three group classifications of employees within this Compensation Plan: (*attached “Employee Listing” defines these classifications*)

1) Staff Nurses

2) Instructional Paraprofessionals – include “grandfathered” para-professionals

3) Non-Instructional Paraprofessionals

b. Wages and Salary Provision

The wages and salaries to be affected by this Compensation Plan are reflected in Appendix A, attached to and made a part of this Compensation Plan. The schedule of wages and salaries set forth in Appendix A shall remain in force for the period of this Compensation Plan.

III. EMPLOYEE BENEFITS

The employee benefits to be provided for under this Compensation Plan are reflected in Appendix B, C, D attached to and made a part of this Compensation Plan.

IV. WAGES AND SALARIES

a. Salary Increases:

2022-2023 2.5%

2023-2024 2.0%

2024-2025 2.0%

During 2022-2023, Employees shall receive a \$500 bonus off the scale and not PSERS eligible.

b. To codify what is an established practice, employees under this Plan shall be provided with one paid prep day before the beginning of the school year.

c. Note: Direct deposit of paychecks is required for all District employees

d HOURLY WAGES

	2022-2023	2023-2024	2024-2025
Staff Nurses **	\$27.31	\$27.85	\$28.41
Paraprofessional Assistants (Grandfathered)	\$20.84	\$21.26	\$21.68
Instructional Paraprofessionals	\$20.16	\$20.56	\$20.98
Non-Instructional Paraprofessionals	\$19.39	\$19.78	\$20.18

*** Note: Staff Nurses must have RN or LPN certification to be eligible for Staff Nurse Pay Rate.*

e. NEW EMPLOYEES

All new employees will be employed at fifty cents (\$.50) less per hour than the Plan rate for a total of ninety (90) calendar days and shall not be eligible for benefits. After the probationary period of ninety (90) calendar days, on the 91st day, the employee shall be eligible to receive current wages and any benefits allowed under this Plan.

APPENDIX “A”

EMPLOYEE BENEFITS – Full-Time Employees

Full-Time employees with a normal work week of 30 hours or more receive Employee only modified¹ Health Benefits and Dental Insurance as noted below:

1. Healthcare Benefits

a. The Saucon Valley School District shall make available two PPO plan options for District employees in accordance with the following provisions.

From July 1, 2022 through December 31, 2022:

The PPO Plan 1 whose plan design is attached at Appendix “D” to this Agreement shall be made available with employees contributing 10% of the total cost of the annual premium in 2022-2023.

The PPO Plan 2 whose plan design is attached at Appendix “D” to this Agreement shall be made available with employees contributing 3% of the total cost of the annual premium in 2022-2023.

The current Healthcare Plan & Prescription Drug Plan Designs shall sunset on 12/31/2022.

For all employees hired on or after July 1, 2021, the only plan available to participate in shall be the PPO Plan 2.

Effective January 1, 2023,

The PPO Plan 1 (Option 1) whose plan design is attached at Appendix “E” to this Agreement shall be made available with employees contributing 11% of the total cost of the annual premium in 2022-2023; 12% of the total cost of the annual premium in 2023-2024; and 13% of the total cost of the annual premium in 2024-2025.

The PPO Plan 2 (Option 2) whose plan design is attached at Appendix “E” to this Agreement shall be made available with employees contributing 3% of the total cost of the annual premium in 2022-2023; 4% of the total cost of the annual premium in 2023-2024; and 5% of the total cost of the annual premium in 2024-2025.

Notwithstanding the contributions listed above, to the extent the total employee costs to annual premiums change under the Saucon Valley Educational Support Professionals contract, those changes shall be reflected herein.

¹ Spouses are not eligible to participate in this plan.

The total cost of the annual premium shall be the equivalent of the COBRA amounts in a given year without the administrative fees for the plan and level of healthcare elected by the employee.

b. For the 2022-2023, 2023-2024 and 2024-2025 school years, in the event the healthcare changes for the Saucon Valley Educational Support Professionals are better than what are provided herein, that plan shall be effective for this group. Healthcare shall include, but not be limited to premium contributions to healthcare and prescription drug plans and co-pay, plan designs and co-pays, deductibles, in-network and out of network coverages, co-pays, etc.

Prescription Drug Plan and Contributions

From July 1, 2022 through December 31, 2022, see Appendix “D” which outlines the contributions for the prescription drug plan.

Effective January 1, 2023, see Appendix “E” which outlines the contributions for the prescription drug plan.

c. Restricted Generic Substitution: If a generic is available and the member wants a brand, the member will pay the brand (either preferred or non-preferred) co-pay plus the difference in the cost between generic and brand. However, if the member’s doctor writes the script for “dispense as written” (DAW) then the patient only pays the preferred or non-preferred brand co-pay.

d. Excise Tax language.

During the term of this Plan, or at any time after its expiration date until such time as a new Plan is implemented, should the premium for any medical plan (in combination with the prescription plan and any Board-provided flexible spending accounts) offered pursuant to the Plan exceed the threshold amounts as stated in the Patient Protection and Affordable Care Act (or any applicable federal or state legislation enacted hereinafter) so as to subject the medical plan or plans to excise taxes, taxes, or penalties as the result of the combined plans exceeding the thresholds, the issue will be addressed as follows:

1) The District shall notify the Paraprofessionals that the health benefit plan or plans that are offered pursuant to the Plan will be subject or will likely be subject to the above-referenced tax or fee;

2) Employees who are enrolled in a health benefit plan or plans that are offered pursuant to this Plan that will be subject to the above-referenced tax or fee will be entitled to receive the richest plan offered by the District that would not be subject to the tax or the fee. Existing Employee premium share shall apply on the same basis as the premium share defined for those plans currently in place covered by this Plan.

3) If all of the health benefit plans offered by the District would be subject to the tax or the fee, the District shall notify the Paraprofessionals that the health benefit plan or plans

that are offered pursuant to this Plan will be subject to the above- referenced tax or fee and what it intends to do to eliminate the tax or fee;

4) The Paraprofessionals will have up to 30 calendar days from the date of such notice to meet and discuss with the Board on addressing the issue of health benefit plan design changes or increased premium share;

5) If the Board elects to adopt any of the suggestions made by the Paraprofessionals during this 30 day time period, that adoption shall become part of the Plan and will supersede any inconsistent provisions.

6) If the Board does not adopt any of the Paraprofessionals' suggestions within the 30 calendar day period referenced in subsection d., all Employees enrolled in the health benefit plan or plans subject to the tax or fee shall no longer be entitled to remain in the health benefit plan or plans that are subject to the tax or fee and would be entitled to receive the richest plan offered by the exchange/marketplace that would not be subject to the tax or fee. Notwithstanding the foregoing, existing Employee premium share shall apply on the same basis as the least rich eliminated health benefit plan.

2. Life Insurance

For each year of the Plan, life insurance will be equal to the annual salary rounded up to the nearest thousand, but not less than \$20,000.

3. Income Protection Coverage

The Saucon Valley School District shall provide for each full-time employee an integrated income protection plan. This benefit shall provide for an income of sixty six and two-thirds percent (66-2/3%) of the then current monthly income of said employee (up to a maximum of \$1,000.00), and shall be integrated with any disability retirement or social security benefits the staff is receiving so that the Plan's obligation is reduced by the level of such benefits and for health benefits (as defined elsewhere in this Plan), each for a period of one year in the instance of a disabling illness or for a period of four years in the instance of a work related accidental disabling injury. Benefits to begin at the end of the 30th consecutive day of sickness, or at the exhaustion of sick leave, whichever shall later occur. Employees will be responsible for payment of their premium share while out on leave. Retirement Benefits

4. Retirement Benefits

For employees who have been employed in the school district for at least ten (10) years, unused accumulated sick leave will be recompensed at the rate of Thirty Dollars (\$30.00) per day accumulated, upon retirement from employment within the Saucon Valley School District. In the event the dollar amount is less than \$1,000 in a payout for the sick days, the money shall be paid directly to the Employee with the appropriate tax withholdings. In the event the dollar amount is more than \$1,000, the money will be placed in a 403(b) account. For a retiring full-time employee who has worked a minimum of 20 full-time years for the District at retirement time and who provides the Employer with a letter by July 1, 2022 of their intent to retire no later than August

23, 2022, the Employee will receive from the District paid medical coverage for the employee only, not to include dental, vision or life insurance coverage, until the age of 65 or for a maximum of six (6) years following the date of retirement, whichever is sooner. If this age requirement is declared to be in violation of ADEA by any court of competent jurisdiction, the parties agree that the age requirement shall become null and void and shall immediately be replaced by the phrase “for 6 years following date of retirement.” Payment to be made by the District for the term of this obligation shall be limited to the monthly premium rates in effect for the year in which the employee elects to retire. In addition, eligible Employees shall be obligated to pay a co-payment of \$100 per month. This payment shall be to the Business Office on or before the 10th of the month preceding the month the premium is due. Notice of any premium increase will be provided to the retired Employees at his/her last known address indicated in the District records, as furnished by the retiring Employee. Failure of the retired Employee to pay the additional amounts due will result in immediate and permanent termination of health insurance coverage. If an Employee is not eligible for this benefit, he/she may purchase the individual medical coverage only if he/she is eligible for full retirement without penalty (superannuation). This paragraph will sunset on August 23, 2022. Any Employee who retires after August 23, 2022, will not be entitled to this retirement benefit.

Retirees shall receive the same plan as active Employees.

5. **Sick Leave**

a. **Personal Illness Absence**

1. In any school year, whenever a ten (10) month employee is prevented by illness or accidental injury from following his or her occupation, the School District shall pay to said employee for each day of absence the full salary to which the employee may be entitled as if said employee were actually engaged in the performance of duty for a period of ten (10) days. The same provisions as above are available for illness in the immediate family and are charged to sick leave, however, an employee may only use up to ten (10) days per year for leave under this provision for immediate family members, which shall be defined in this section as Parent, Spouse or Child.

2. Such leave shall be cumulative from year to year and the total number of days accumulated may be used in any year.

3. The Administration reserves the right to require the employee to furnish a certificate from a physician or other practitioner certifying that said employee was unable to perform his or her duties during the period of absence for which compensation is required to be paid under this policy.

6. **Death in Immediate Family**

Absence for death in the immediate family is allowable from the date of death for a maximum of four (4) days. The first three (3) of those days must be consecutive and shall start on the date that immediately follows the date of death in question.

The fourth day available may be reserved for a date in which memorial services and/or observations are to take place involving the deceased immediate family member. In the event the employee requests to take the fourth day non-consecutively with the first three, the Administration reserves the right to request information from the employee demonstrating why the fourth date needs to be taken at a different time.

In extraordinary circumstances in which travel or some other unusual event has or will occur regarding the observance/memorial services, the Administration, at its discretion, may allow the third and fourth days to be taken at a different time from the first two days of bereavement leave.

On the date of death, an employee may use a sick or personal day if they have one available, and the death occurred before the start of the work day. In the event the death occurs on a non-work day, this provision shall not be applicable.

Immediate family shall be defined as father, mother, brother, sister, son, daughter, husband, wife, parent-in-law, grandchild or near relative who resides in the same household, or any person with whom the employee has made his home.

One (1) day of absence to attend the funeral of a near relative shall be compensated at full salary. Near relative shall be defined as first cousin, grandfather, grandmother, aunt, uncle, niece, nephew, son-in-law, daughter-in-law, brother-in-law, or sister-in-law.

7. **Paid Holidays**

Seven Paid Holidays: Good Friday, Memorial Day, Thanksgiving Day, Christmas Day, New Year's Day, Martin Luther King Day and Presidents Day.

8. **Personal Days**

Three (3) Personal Days, of which one may be used as an emergency day, if needed. Such personal days may not be used in succession and may not be taken prior to or subsequent to a Holiday. An exception may be made with a two-week written notice and approval by the supervisor. Written request must be made to the immediate supervisor at least three (3) calendar days prior to such "personal day" except in case of an emergency. The immediate supervisor will grant the personal day requested by the employee, except where the granting of such request will have a disrupting effect on the educational program of that day. At the end of the school year unused personal days shall accumulate as sick leave.

Employees may carry over one unused personal day to another year for a total of four in a given year. Employees may also split one personal day into two ½ personal days.

9. **Family and Medical Leave Act of 1993 (FMLA)**

Family and Medical Leave shall be granted in accordance with Board Policy and the Federal Family and Medical Leave Act. FMLA will run concurrently with all leaves. The District utilizes a rolling year methodology for purposes of leave eligibility.

10. **Vacancies**

If an Educational Support Staff position opens in the District, it shall be posted within the District so that any employees with the skills required for the job has an opportunity to apply for the position. The Board of School Directors, upon recommendation of the Administration, shall select the employee that best meets the needs of the District.

11. **Inclement Weather**

If school is cancelled because of inclement weather, the full-time Education Support Staff employees will be paid for the regular hours that would have been worked. For example, if a regular work day is six hours, the employee will receive six hours pay to a maximum of four days. The four “inclement weather days” will not include “late-start” and/or “early-dismissal” days. Full-time employees will be paid for any hours if they come to work on a “late-start” day or are dismissed on an “early-dismissal” day.

12. **Reopener Clause**

In any year during the term of the Compensation and Benefits Plan, the District reserves the right to reopen the Compensation and Benefits Plan.

APPENDIX “B”

EMPLOYEE BENEFITS – Part-Time Employees

Part-Time Employees with a normal work week less than 30 hours receive the following benefits.

1. **Retirement Bonus**

For employees who have been employed in the school district for at least ten (10) years, unused accumulated sick leave will be recompensed at the rate of twenty dollars (\$20.00) per day accumulated, upon retirement from employment within the Saucon Valley School District. In the event the dollar amount is less than \$1,000 in a payout for the sick days, the money shall be paid directly to the Employee with the appropriate tax withholdings. In the event the dollar amount is more than \$1,000, the money will be placed in a 403(b) account.

2. **Sick Leave**

See the language at Appendix “A”, 5. Sick leave is prorated for part-time employees, who are only entitled to five (5) days per year (cumulative).

3. **Death in Immediate Family**

Absence for death in the immediate family is allowable from the date of death for a maximum of four (4) days. The first three (3) of those days must be consecutive and shall start on the date that immediately follows the date of death in question.

The fourth day available may be reserved for a date in which memorial services and/or observations are to take place involving the deceased immediate family member. In the event the employee requests to take the fourth day non-consecutively with the first three, the Administration reserves the right to request information from the employee demonstrating why the fourth date needs to be taken at a different time.

In extraordinary circumstances in which travel or some other unusual event has or will occur regarding the observance/memorial services, the Administration, at its discretion, may allow the third and fourth days to be taken at a different time from the first two days of bereavement leave.

On the date of death, an employee may use a sick or personal day if they have one available, and the death occurred before the start of the work day. In the event the death occurs on a non-work day, this provision shall not be applicable.

Immediate family shall be defined as father, mother, brother, sister, son, daughter, husband, wife, parent-in-law, grandchild or near relative who resides in the same household, or any person with whom the employee has made his home.

One (1) day of absence to attend the funeral of a near relative shall be compensated at full salary. Near relative shall be defined as first cousin, grandfather, grandmother, aunt, uncle, niece, nephew, son-in-law, daughter-in-law, brother-in-law, or sister-in-law.

4. **Personal Day**

Three (3) personal days, of which one may be used as an emergency day, if needed. Such personal days may not be used in succession and may not be taken prior to or subsequent to a Holiday. An exception may be made with a two- week written notice and approval by the supervisor. Written request must be made to the immediate supervisor at least three (3) calendar days prior to such “personal day” except in case of an emergency. The immediate supervisor will grant the personal day, requested by the employee, except where the granting of such request will have a disrupting effect on the educational program of that day. At the end of the school year unused personal days shall accumulate as sick leave.

5. **Leave of Absence**

The parties also recognize and agree to comply with the rights of the District and the employees under the Family and Medical leave Act (FMLA) of 1993. All paid or unpaid leaves of absence allowed under this Plan or under Board Policy which would also have been allowable under FMLA shall be designated as use of FMLA benefits. The District shall post appropriate notices approved by the U.S. Department of Labor advising employees of their rights under the Act. A year shall be deemed to be on a rolling year basis as defined by the FMLA. The decision of the Board of School Directors on such personal leaves will be final.

6. **Paid Holiday**

Two Paid Holidays: Thanksgiving Day and Christmas Day.

7. **Inclement Weather**

If school is cancelled because of inclement weather, the part-time Educational Support Staff employees will be paid for the regular hours that would have been worked. For example, if a regular work day is three hours, the employee will receive three hours pay to a maximum of four days. The four “inclement weather days” will not include “late-start” and/or “early-dismissal” days. Part-time employees will be paid for any hours if they come to work on a “late-start” day or are dismissed on an “early-dismissal” day.

APPENDIX “C”

Educational Support Staff Employees – Grandfather Clause

For the term of this Plan, the Full-Time Paraprofessional employees listed below will be entitled to the differential pay rate as detailed in Article IV. d., Grandfathered Paraprofessional Educational Support Staff Employees:

Deborah Panariello

APPENDIX “D” - HEALTHCARE PLAN DESIGNS – 7/1/2022 THROUGH 12/31/2022
The current Healthcare Plan & Prescription Drug Plan Designs shall sunset on 12/31/2022.

Benefits	Plan 1 - Changes to the plan as of 2021-22 school year		Plan 1 - Changes to the plan as of 2022-23 school year		Plan 2 - Available to employees as of 2021-22 and only plan option for new hires after July 1, 2021	
Medical:	PPO		PPO		PPO	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Deductible: In network	\$500 / \$1000	\$0	\$500 / \$1000		\$750 / \$1500 / \$2250	
Out of Network	\$0	\$500 / \$1000		\$500 / \$1000		\$1500 / \$3000 / \$4500
PCP Copay:	\$20	20% after ded	\$20	20% after ded	\$25	20% after ded
Specialist Copay:	\$40	20% after ded	\$40	20% after ded	\$50	20% after ded
Urgent Care Copay:	\$50	20% after ded	\$50	20% after ded	\$75	20% after ded
ER Copay: Waived if admitted from ER.	\$100	20% after ded	\$100	20% after ded	\$150	20% after ded
Inpatient Hospital Stays	\$0	20% after ded	\$0	20% after ded	\$200 copay per admission	20% after ded
Diagnostic Testing	100% after ded	20% after ded	100% after ded	20% after ded	100% after ded	20% after ded
Hi Tech Imaging Copay (EX: MM, CT):	100% after ded	20% after ded	100% after ded	20% after ded	\$75 copay after ded	20% after ded
Outpatient Surgery Facility	\$0	20% after ded	\$0	20% after ded	\$50	20% after ded
PT - Unlimited; ST, OT - 10 visits	\$40	20% after ded	\$40	20% after ded	\$50	20% after ded
Chiropractic Copay - unlimited	\$40	20% after ded	\$40	20% after ded	\$50	20% after ded
Private Duty Nursing	100% after ded	20% after ded	100% after ded	20% after ded	100% after ded	20% after ded
R.X. (Copays)						
Retail: Tier 1:	\$10		\$10		\$20	No Benefits Available
Tier 2:	\$25		\$30		\$40	
Tier 3:	\$50		\$60	No Benefits Available	\$80	
Mail Order: Tier 1:	\$20	Not covered	\$20		\$40	
Tier 2:	\$60		\$60		\$80	
Tier 3:	\$120		\$120		\$160	

APPENDIX “E” – HEALTHCARE PLAN DESIGNS – EFFECTIVE 1/1/2023

Saucon Valley School District

Proposed Plan Option 1

GROUP 1 ONLY (PARAPROFESSIONALS)

Benefit Plan Options for Current \$500 Deductible Plan

	PPO \$500 PLAN - Current Plan		PPO \$500 - Option 1	
Medical:	PPO		PPO	
	In network	Out of Network	In Network	Out of Network
Deductible: In network (PPO - Capital Blue Cross)	\$500 / \$1000		\$750 / \$1500	
Out of Network (PPO - Capital Blue Cross)		\$500 / \$1000		\$1200 / \$2400
Out of Pocket: In network (PPO - Medical & RX)	\$8550 / \$17,100		\$8700 / \$17400	
Out of Pocket (PPO - Medical & RX)		\$8550 / \$17100		unlimited
Preventative Services	\$0	20%	\$0	20%
PCP Copay:	\$20	20% after ded	\$30	20% after ded
Specialist Copay:	\$40	20% after ded	\$60	20% after ded
Urgent Care Copay:	\$50	20% after ded	\$100	20% after ded
ER Copay: Waived if admitted from ER	\$100		\$150	
Inpatient Hospital Stays; copay waived if admitted	\$0 after ded	20% after ded	\$150 after ded	20% after ded
Diagnostic Testing	\$0 after ded	20% after ded	\$60 after ded	20% after ded
Hi Tech Imaging Copay (EX: MRI, CT):	\$0 after ded	20% after ded	\$60 after ded	20% after ded
Outpatient Surgery Facility	\$0 after ded	20% after ded	\$100 after ded	20% after ded
Outpatient Ambulatory Surgery Center	\$0 after ded	Not Covered	\$150 after ded	20% after ded
PT - Unlimited; ST, OT - 10 visits	\$40	20% after ded	\$60	20% after ded
Chiropractic Copay - unlimited	\$40	20% after ded	\$60	20% after ded
MH Inpatient Services	\$0 after ded	20% prof; 50% facility after ded	\$150 after ded	20% after ded
MH Outpatient Services	\$20	20% prof; 50% facility after ded	\$30	20% after ded
SA Inpatient Services	\$0 after ded	20% prof; 50% facility after ded	\$150 after ded	20% after ded
SA Outpatient Services	\$0	20% prof; 50% facility after ded	\$30	20% after ded
RX:				
Retail: Tier 1:	\$10	Not covered	\$20	Not Covered
Tier 2:	\$25		\$40	
Tier 3:	\$50		\$80	
Mail Order: Tier 1:	\$25		\$50	
Tier 2:	\$60		\$100	
Tier 3:	\$120		\$200	
	15			#

Saucon Valley School District

PROPOSED PLAN OPTION 2

Group 1 Only (Paraprofessionals)

Proposed Benefit Plan Options for Current \$750 Deductible Plan

	PPO \$750 PLAN - Current Plan		PPO \$750 - Option 1	
Medical:	PPO		PPO	
	In network	Out of Network	In Network	Out of Network
Deductible: In network (PPO - Capital Blue Cross)	\$750 / \$1500 / \$2250		\$1000 / \$2000 / \$3000	
Out of Network (PPO - Capital Blue Cross)		\$1500 / \$3000 / \$4500		\$2000 / \$4000 / \$6000
Out of Pocket: In network (PPO - Medical & RX)	\$8150 / \$16300 / \$16300		\$8700 / \$17400 / \$17400	
Out of Pocket (PPO - Medical & RX)		\$8150 / \$16300 / \$16300		unlimited
Preventative Services	\$0	20%	\$0	20%
PCP Copay:	\$25	20% after ded	\$30	20% after ded
Specialist Copay:	\$50	20% after ded	\$60	20% after ded
Urgent Care Copay:	\$75	20% after ded	\$100	20% after ded
ER Copay: Waived if admitted from ER	\$150		\$150	
Inpatient Hospital Stays; copay waived if admitted	\$200 after ded	20% after ded	\$150 after ded	20% after ded
Diagnostic Testing	\$0 after ded	20% after ded	\$60 after ded	20% after ded
Hi Tech Imaging Copay (EX: MRI, CT):	\$75 after ded	20% after ded	\$60 after ded	20% after ded
Outpatient Surgery Facility	\$30	20% after ded	\$100 after ded	20% after ded
Outpatient Ambulatory Surgery Center	\$30	Not Covered	\$150 after ded	20% after ded
PT - Unlimited; ST, OT - 10 visits	\$50	20% after ded	\$60	20% after ded
Chiropractic Copay - unlimited	\$50	20% after ded	\$60	20% after ded
MH Inpatient Services	\$200	20% prof; 50% facility after ded	\$150 after ded	20% after ded
MH Outpatient Services	\$50	20% prof; 50% facility after ded	\$30	20% after ded
SA Inpatient Services	\$200	20% prof; 50% facility after ded	\$150 after ded	20% after ded
SA Outpatient Services	\$0	20% prof; 50% facility after ded	\$30	20% after ded
RX:				
Retail: Tier 1:	\$20	Not covered	\$20	Not Covered
Tier 2:	\$40		\$40	
Tier 3:	\$80		\$80	
Mail Order: Tier 1:	\$40		\$50	
Tier 2:	\$80		\$100	
Tier 3:	\$160		\$200	