



## Employee Benefits - Standard Plan Summaries

Effective 7/1/24 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at [www.mmiaeb.net](http://www.mmiaeb.net) and must be referenced for details of all coverages.

	Bridger	Madison	High Deductible (HSA-Qualified)
<b>Deductible (Individual/Family) (January 1 - December 31)</b>	\$500 / \$1,000	\$1,000 / \$2,000	\$3,200 / \$6,400
<b>Benefit Percentage (what the plan pays if the Deductible is waived or after the Deductible is met)</b>			
<ul style="list-style-type: none"> <li>All Montana Providers and Non-Montana Cigna Providers</li> <li>Non-Montana, Non-Cigna Providers</li> </ul>	80%	70%	80%
	60%	50%	60%
<b>Annual Out-of-Pocket Maximum</b> (the most you will pay for covered services in a plan year) Individual/Family	\$2,000 / \$4,000	\$4,000 / \$8,000	\$6,400 / \$12,800
<b>Medical Services</b>			
Preventive care as recommended by the US Preventive Services Task Force, CDC, and Health Resources & Services Administration at <a href="http://www.healthcare.gov">www.healthcare.gov</a>	100% Plan-paid		
Accidental Injury Benefit	100% up to \$300, then standard benefits apply		Deductible applies
Diabetic Education	100% Plan-paid		
Hospice Care	100% Plan-paid		
<b>Professional Provider Services</b>			
Alternative Medicine Benefit - up to \$500	Deductible waived (Plan pays Benefit %)		Deductible applies
Chiropractic Benefit - up to \$400, plus \$100 x-ray benefit			
Home Health Care			
Newborn Initial Care			
Nutritional Counseling - up to 10 visits per year			
<b>Facility Provider Services</b>			
Emergency Room Care	Deductible applies		
Obesity Surgery - one per lifetime, up to \$30,000	Deductible applies		
<b>Prescription Drug Benefit</b>			
Generic	\$4 Retail (30 day) / \$8 Mail Order (90 day)		Deductible applies
Brand Formulary	\$20 Retail (30 day) / \$40 Mail Order (90 day)		
Brand Non-Formulary	\$50 Retail (30 day) / \$100 Mail Order (90 day)		