



CEWW Consortium

Platinum Plan 1 and

Platinum Plan 2 Comparison

What is an HRA?

- Employer funded “Gap” Coverage
- Pays the difference related to deductibles, prescription drugs, co-pays, and co-insurance for employees and their dependents

| Plan 1 | | Out of Pocket |
|-----------------------------|----------------|----------------|
| Deductible | Individual | \$50 |
| Deductible | Family | \$125 |
| | | |
| Co-Insurance | Individual | \$400 |
| Co-Insurance | Family | \$400 |
| | | |
| Prescription Pharm (30 Day) | Tiers T1/T2/T3 | Deductible 20% |
| Mail Order (90 Day) | T1/T2/T3 | \$8 |

| Plan 2 with HRA | | Plan B | HRA Pays | Out of Pocket |
|--|----------------|-----------------------------|----------|----------------|
| Deductible | Individual | \$250 | \$200 | \$50 |
| Deductible | Family | \$750 | \$625 | \$125 |
| | | | | |
| Co-Insurance | Individual | \$500 | \$100 | \$400 |
| Co-Insurance | Family | \$1,500 | \$1,100 | \$400 |
| | | | | |
| Prescription Pharm (30 Day) | Tiers T1/T2/T3 | No Deductible \$5/\$15/\$30 | - | \$5/\$15/\$30 |
| Mail Order (90 Day) | T1/T2/T3 | \$10/\$30/\$60 | - | \$10/\$30/\$60 |
| Prescription HRA ensures max \$350/\$1,000 out of pocket | | | | |

Plans include debit cards when coupled with a Flexible Spending Account!

The Preferred Group processes claim and pays all reimbursements out of HRA and/or FSA directly to Employee.

HRA reimbursement are based only on EOB documentation provided by the Insurance Carrier.

The Preferred Group
 PO Box 15136
 Albany, NY 12212-5136
 Claims Line: (866) 989-8995
 Fax Line: (518) 641-0325
www.My-PGP.com