

Diocese of Central Florida

2012 Health and Dental Plan Options and Rates through the Episcopal Church Medical Trust

Plan Name Plan Website	Notes for web site navigation to find a doctor	2012 Monthly Rates			Deductible	Primary Care Physician	Referral Needed for Specialist	In Network Benefit *	Out of Network Benefit*	Annual Cost Differential Versus HMO (Diocesan Std Plan)		
		Single	Emp+1	Family						Single	Emp +1	Family
Empire HDHP/HSA II www.empireblue.com	Across the country Use PPO/EPO Network and choose closest city listed	494	891	1,386	Yes Ind - \$2700 Fam - \$5450 Med & RX	No	No	80%	YES 55%	(492)	(322)	(3,502)
CIGNA HDHP/HSA www.cigna.com	Open Access Plus ONLY	494	891	1,386	Yes Ind - \$2700 Fam - \$5450 Med & RX	No	No	50-80%	YES 55%	100%	100%	100%
United Health Care Choice 80 EPO www.unitedhealthcare.com	Use Plan: UnitedHealthcare Choice	697	1,255	1,953	Yes Ind - \$1000 Fam - \$2000	No	No	50%	NO	(756)	(1,404)	(2,148)
Empire 75/50 PPO http://www.empireblue.com/	Across the country Use PPO/EPO Network and choose closest city listed	705	1,272	1,977	Yes Ind - \$900 Fam - \$1800	No	No	50-75%	YES 25-50%	(660)	(1,200)	(1,860)
DIOCESAN STANDARD PLAN												
Aetna National HMO www.aetna.com	Aetna Std Plans HMO	760	1,372	2,132	No	Yes	Yes	100%	NO	-	-	-
CIGNA Open Access + In-Network EPO www.cigna.com	OAP/OAP-IN	760	1,372	2,132	No	No	No	100%	NO	-	-	-
Empire 80/60 PPO http://www.empireblue.com/	Across the country Use PPO/EPO Network and choose closest city listed	783	1,413	2,196	Yes Ind - \$500 Fam - \$1000	No	No	50-80%	YES 50-60%	276	492	768
United Health Care Choice Plus 80/60 www.unitedhealthcare.com	Use Plan: UnitedHealthcare Choice Plus	783	1,413	2,196	Yes Ind - \$500 Fam - \$1000	No	No	100%	YES 70%	276	492	768

* This is a generalized percentage paid by the plan AFTER you pay any co-pays & deductibles. The actual percentage paid by the plan varies by procedure. Refer to plan documents for more detail
 ** Per the US Internal Revenue Service, the 2012 Annual Contribution Limits for HSA's are \$3,100 for individual and \$6,250 for families. The differential shown is based on the employer funding the HSA at a level where the employer's cost is equal to the cost of the Diocesan Standard Plan (Aetna HMO). Note that there is not a separate deductible for employee + 1, the HSA deductibles are based on a two tie structure (employee and family)

Disclaimer: This document was prepared by combining relevant information from the various Summary Plan Descriptions for each plan and the IRS website (www.irs.gov). The individual Summary Plan Description documents are available on the CPG website (www.cpg.org). This document was developed to help you make an informed decision regarding your health care plan and we have tried our best to ensure its accuracy. However, in the event that there is a discrepancy between this document and the plan document or IRS documents, the Plan document and the IRS documents shall govern.

2012 Dental Plan Options Web site for Dental plans: www.cigna.com

Plan Name	2012 Monthly Rates		
	Single	Emp + 1	Family
CIGNA Preventative Dental PPO	23	40	63
CIGNA Basic Dental PPO	60	109	172
CIGNA Dental and Orthodontia PPO	74	133	208