

Indiana State Police Health Care Plan 2012

This explanation of the Indiana State Police Health Care Plan assumes that claims are paid to an **in-network** provider and the Anthem Allowed Amounts are used in the examples.

Annual Deductible Individual \$500 / Family \$1,000

- A single person will pay a deductible of \$500.
- Each family member will pay no more than \$500 toward the family deductible of \$1,000.
- The family deductible of \$1,000 is a cumulative total of all family members.

Co-insurance 90%/10%

- Once the applicable annual deductible has been met, members will be responsible for a 10% co-insurance on claims (non-Preventive Services).
- If a family member reaches \$500 toward the \$1,000 family deductible, that member will begin to pay 10% on his claims. Other family members are still contributing toward the \$500 that remains on the \$1,000 family deductible.
- Once the family has reached the \$1,000 family deductible, all family members will then pay the 10% on claims.

Annual Out-of-Pocket Maximum Individual \$1,000 / Family \$2,000

- The 10% coinsurance will accrue towards the applicable annual out-of-pocket maximum.
- If a family member reaches \$1,000 toward the \$2,000 family out-of-pocket, that member will no longer pay the 10% on his claims. Other family members are still contributing toward the \$1,000 that remains on the \$2,000 family out-of-pocket.
- Once the family has reached the \$2,000 family out-of-pocket, all family members will no longer pay the 10% on claims.
- Once the applicable annual out-of-pocket maximum has been met, the plan pays 100% of covered charges for the rest of the plan year.

FAMILY SCENARIO

The Jones Family has four members:

- Jack Jones – Father
- Jill Jones – Mother
- Steven Jones – Son
- Stephanie Jones – Daughter

They have a \$1,000 annual family deductible and \$2,000 annual family out-of-pocket maximum. “Preventive” doctor visits do not apply in the following examples. Claim examples accumulate in chronological order and assume the providers are in-network.

Claim #1:

- Jack Jones fell and broke his leg which required a doctor visit.
 - The doctor charged \$100 for the office visit.
 - The radiologist charged \$100 for the x-ray.
1. Jack is responsible for the \$100 doctor charge and the \$100 radiologist charge.
 2. \$200 will be applied toward his individual deductible of \$500.
 3. The same \$200 will also accumulate toward the family deductible of \$1,000.

On the Explanation of Benefits from Anthem for Jack, the information will read:

Individual Deductible	Met \$200	Remaining \$300
Family Deductible	Met \$200	Remaining \$800
Individual Out-of-Pocket	Met \$0	Remaining \$1,000
Family Out-of-Pocket	Met \$0	Remaining \$2,000

Claim #2:

- Jack Jones now has to have surgery for his broken leg.
 - The total charged for the procedure was \$10,000.
1. Jack is responsible for \$300 which will be applied toward his individual deductible of \$500 and his family deductible of \$1,000. (Jack will not contribute more than \$500 toward the family deductible.)
 2. Now Jack has met his deductible, he is responsible for 10% of the remaining balance. $\$10,000 - \$300 = \$9,700$. 10% of \$9,700 is \$970.
 3. The \$970 Jack paid will be applied to the \$1,000 individual out-of-pocket and to the \$2,000 family out-of-pocket.

On the Explanation of Benefits from Anthem for Jack, the information will read:

Individual Deductible	Met \$500	Remaining \$0
Family Deductible	Met \$500	Remaining \$500
Individual Out-of-Pocket	Met \$970	Remaining \$30
Family Out-of-Pocket	Met \$970	Remaining \$1,030

Claim #3:

- Jack Jones has a MRI scan on his head.
 - The MRI scan charge was \$4,000.
1. Jack is only responsible for 10% of the claim up to his out-of-pocket maximum. 10% of \$4,000 is \$400.
 2. Jack is responsible for \$30.00 which is the remaining individual out-of-pocket maximum. (Jack will not contribute more than \$1,000 toward the family out-of-pocket expense.)
 3. The plan will pay \$3,970. ($\$4,000 - \$30 = \$3,970$)
 4. Now Jack has met his individual out-of-pocket maximum, the plan will pay 100% of covered charges Jack has for the calendar year.

On the Explanation of Benefits from Anthem for Jack, the information will read:

Individual Deductible	Met \$500	Remaining \$0
Family Deductible	Met \$500	Remaining \$500
Individual Out-of-Pocket	Met \$1,000	Remaining \$0
Family Out-of-Pocket	Met \$1,000	Remaining \$1,000

FACTS:

- A. Jack Jones has accumulated all he can toward the family deductible and the family out-of-pocket maximums.
- B. The claims for Jill, Steven, and Stephanie will still accumulate toward their individual deductible, the family deductible, and the family out-of-pocket maximums.

Claim #4:

- Jill Jones visited the doctor for an ear infection.
 - The doctor charged \$100.
1. Jill is responsible for the \$100 doctor charge.
 2. \$100 will be applied toward Jill's individual deductible.
 3. \$100 will be applied toward the remaining family deductible of \$500.
 4. Nothing is applied to the family out-of-pocket until the family deductible is met.

On the Explanation of Benefits from Anthem for Jill, the information will read:

Individual Deductible	Met \$100	Remaining \$400
Family Deductible	Met \$600	Remaining \$400
Individual Out-of-Pocket	Met \$0	Remaining \$1,000
Family Out-of-Pocket	Met \$1,000	Remaining \$1,000

Claim #5:

- Steven Jones visited the doctor for his allergies.
 - The doctor performed skin tests and charged \$300 for the visit.
1. Steven is responsible for the \$300 doctor charge.
 2. \$300 will be applied toward the remaining family deductible of \$400.
 3. Nothing is applied toward the remaining family out-of-pocket maximum of \$1,000 because the family deductible is not yet met.

On the Explanation of Benefits from Anthem for Steven, the information will read:

Individual Deductible	Met \$300	Remaining \$200
Family Deductible	Met \$900	Remaining \$100
Individual Out-of-Pocket	Met \$0	Remaining \$1,000
Family Out-of-Pocket	Met \$1,000	Remaining \$1,000

Claim #6:

- Stephanie Jones visited the emergency room for breathing issues at midnight.
 - The charge for the visit was \$1,500.
1. Stephanie is responsible for the \$100 which is applied to the remaining family deductible of \$100, and leaves a balance of \$1,400 on the claim. ($\$1,500 - \$100 = \$1,400$)
 2. Since the annual family deductible has been met, the family now only pays 10% of the remaining charges up to the annual family out-of-pocket of which \$1,000 remains.
 3. Stephanie is now responsible for \$140 which is applied to the family out-of-pocket maximum. (10% of \$1,400 is \$140)

On the Explanation of Benefits from Anthem for Stephanie, the information will read:

Individual Deductible	Met \$100	Remaining \$0
Family Deductible	Met \$1,000	Remaining \$0
Individual Out-of-Pocket	Met \$140	Remaining \$860
Family Out-of-Pocket	Met \$1,140	Remaining \$860

FACT:

- A. Jill, Steven, and Stephanie will continue to pay 10% of future claims until the end of the plan year.
- B. The 10% they pay will continue to accrue to the family out-of-pocket maximum of which \$860 remains.
- C. Once they have met the remaining annual family out-of-pocket maximum, the plan pays 100% of covered charges.