## **2024 HOPE GAS MONTHLY PREMIUMS**

				OUT-OF-POCK	PARTICIPANT COPAYMENT			
HSA ESSENTIAL	EMP.	TOTAL	ANNUAL DEDUCTIBLE	IN NETWORK	OUT-OF-NETWORK		IN NETWORK	OUT-OF- NETWORK
EMPLOYEE ONLY	\$31.00	\$31.00	\$5,000	\$6,900	\$13,800	Office Visits	0%	50%
EMPLOYEE + SPOUSE	\$105.26	\$105.26	\$5000/\$10,000	\$6900/\$13,800	\$13,800/\$27,600	Urgent Care/ER	0%	50%
EMPLOYEE + CHILDREN	\$125.00	\$125.00	\$5000/\$10,000	\$6900/\$13,800	\$13,800/\$27,600	Inpatient Hosp.	0%	50%
EMPLOYEE + FAMILY	\$169.04	\$169.04	\$5000/\$10,000	\$6900/\$13,800	\$13,800/\$27,600	Prescriptions	20%	20%
HSA PREMIUM								
EMPLOYEE ONLY	\$35.42	\$35.42	\$3,200	\$3,200	\$9,000	Office Visits	0%	50%
EMPLOYEE + SPOUSE	\$119.26	\$119.26	\$3200/\$6400	\$3200/\$6400	\$9000/\$18,000	Urgent Care/ER	0%	50%
EMPLOYEE + CHILDREN	\$141.42	\$141.42	\$3200/\$6400	\$3200/\$6400	\$9000/\$18,000	Inpatient Hosp.	0%	50%
EMPLOYEE + FAMILY	\$191.34	\$191.34	\$3200/\$6400	\$3200/\$6400	\$9000/\$18,000	Prescriptions	0%	0%
PPO ESSENTIAL				•				•
EMPLOYEE ONLY	\$40.88	\$40.88	\$1,500	\$5,000	\$10,000	Office Visits	20%	50%
EMPLOYEE + SPOUSE	\$98.62	\$98.62	\$1500/\$3000	\$5000/\$10,000	\$10,000/\$20,000	Urgent Care/ER	20%	50%
EMPLOYEE + CHILDREN	\$122.76	\$122.76	\$1500/\$3000	\$5000/\$10,000	\$10,000/\$20,000	Inpatient Hosp.	20%	50%
EMPLOYEE + FAMILY	\$175.84	\$175.84	\$1500/\$3000	\$5000/\$10,000	\$10,000/\$20,000	Prescriptions	20%	20%
PPO PREMIUM								
EMPLOYEE ONLY	\$92.16	\$92.16	\$750	\$3,000	\$6,000	Office Visits	20%	50%
EMPLOYEE + SPOUSE	\$193.48	\$193.48	\$750/\$1500	\$3000/\$6000	\$6000/\$12,000	Urgent Care/ER	20%	50%
EMPLOYEE + CHILDREN	\$236.00	\$236.00	\$750/\$1500	\$3000/\$6000	\$6000/\$12,000	Inpatient Hosp.	20%	50%
EMPLOYEE + FAMILY	\$331.82	\$331.82	\$750/\$1500	\$3000/\$6000	\$6000/\$12,000	Prescriptions	20%	20%
DENTAL								
EMPLOYEE ONLY	\$10.00	\$10.00						
EMPLOYEE + SPOUSE	\$20.00	\$20.00						
EMPLOYEE + CHILDREN	\$24.00	\$24.00						
EMPLOYEE + FAMILY	\$36.00	\$36.00						
VISION								
EMPLOYEE ONLY	\$4.00	\$4.00						
EMPLOYEE + SPOUSE	\$8.00	\$8.00						
EMPLOYEE + CHILDREN	\$8.00	\$8.00						
EMPLOYEE + FAMILY	\$10.00	\$10.00						