HEALTH BENEFITS COMPARISON

Plans administered by Wellmark® Blue Cross® and Blue Shield®



As a University of Iowa employee, you have the choice of two health plans: **UISelect** or **UIChoice**. **Before this year's open enrollment period from November 1-15, review** and compare the two plans so you can choose the one that is right for you.

COMPARE YOUR OPTIONS

The charts below will help you compare your health plan options and make an informed decision for 2022. Be sure to consider each plan's details, including premiums, deductibles, coinsurance, copays and out-of-pocket maximums.

WHAT HAPPENS IF I DON'T DO ANYTHING?

If you do not update your benefits during the open enrollment period, your existing elections will continue, with the exception of your flexible spending accounts (FSAs). If you have an FSA, you must re-enroll each year during open enrollment. Visit hr.uiowa.edu/fsa to learn more.

UISELECT

This plan may be a good option if you and your family get your health care in the state of lowa. If you are traveling out of state, only emergency care and care from Doctor On Demand® are covered.











LEVEL 1
Most affordable care options
Includes University of Iowa
Hospitals and affiliated clinics,
UI Urgent Care, UI QuickCare,
Washington County Hospitals
and Clinics and The Iowa Clinic
in Des Moines.

LEVEL 2
Providers from the
Blue Access® network

Locally, Level 2 includes Mercy Hospital and most providers in and around lowa City who are not in Level 1.

LEVEL 3

Not covered. Exceptions include emergencies or care with a Wellmark-approved out-of-network referral.

(Dependent children attending college, long-term travelers, and families living apart may be covered through guest membership.)

UICHOICE

With this plan, you can see health care providers in Iowa and across the nation. However, you'll pay less for care when you choose in-state doctors and hospitals on lower levels.











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Hospitals and affiliated clinics,
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Washington County Hospitals
and Clinics and The Iowa Clinic in
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LEVEL 2
Providers from the
Blue Choice® network

Locally, Level 2 includes Mercy Hospital and most providers in and around lowa City who are not in Level 1. LEVEL 3
Providers from the
BlueCard® network

BlueCard providers are readily available throughout the U.S. and around the globe.

To locate a provider, visit wellmark.com/finder and choose the Find a Provider or Facility link.

► HEALTH COSTS	UISELECT		UICHOICE		
	LEVEL 1	LEVEL 2	LEVEL 1	LEVEL 2	LEVEL 3
ANNUAL DEDUCTIBLE	Employee: \$400 Employee: \$800 Family: \$800 Family: \$1,600		N/A. Deductible for inpatient hospital care only. See annual inpatient care deductible below.		
INPATIENT CARE DEDUCTIBLE Semi-private room	See deductible		\$400 deductible followed by 10% coinsurance Per admission	\$600 deductible followed by 10% coinsurance Per admission	\$800 deductible followed by 40% coinsurance Per admission
COINSURANCE	15%	25%	10%	20%	Varies based on location & service
ANNUAL OUT-OF-POCKET MAXIMUM (OPM)	Levels 1 and 2 participating providers combined		Levels 1, 2, and 3 BlueCard participating providers combined Employee: \$1,700 Family: \$3,400		
	Employee: \$2,000 Family: \$3,400	Employee: \$3,000 Family: \$6,000	Non-participating providers N/A		Non-participating providers Employee: \$2,000 Family: \$4,000
PREVENTIVE CARE Includes preventive exams, gynecological exams, immunizations, mammograms, and well-child care	\$0 copay Not subject to deductible		\$0 copay	\$0 copay	Participating providers \$0 copay Non-participating providers Outpatient 40% coinsurance In office 50% coinsurance Coinsurance waived for out-of-network immunizations & well-child care.
DOCTOR ON DEMAND®	\$0 copay		\$0 copay		
Mental health visits are not covered UI QUICK CARE	\$5 copay	N/A	\$5 copay	N/A	N/A
URGENT CARE VISIT	\$10 copay	\$35 copay	\$10 copay	\$25 copay	50% coinsurance
OFFICE VISIT		Primary care: \$35 copay Specialist: \$50 copay pay will apply to , physical, speech	\$10 copay	\$25 copay	50% coinsurance
EMERGENCY ROOM VISIT Copay waived if admitted	\$100 copay followed by 10% coinsurance includes out-of-state ER visit		\$100 copay followed by 10% coinsurance		
MENTAL HEALTH CARE VISIT	\$10 copay		\$0 copay	\$0 copay	50% coinsurance
► PHARMACY	BLUE RX VALUE PLUS™		BLUE RX COMPLETE™		
TIER 1 Generic drugs	\$0 copay		\$0 copay		
TIER 2 Name-brand drugs	30% coinsurance		30% coinsurance		
TIER 3 Name-brand, non-formulary drugs	50% coinsurance		50% coinsurance		
TIER 4 Name-brand, non-formulary drugs	N/A		50% coinsurance		
PHARMACY ANNUAL OUT-OF-POCKET MAXIMUM	Employee: \$1,100 Family: \$2,200		Employee: \$1,100 Family: \$2,200		

UI Pharmacy fills specialty drugs for both UISelect and UIChoice plans.

QUESTIONS?

If you're still not sure which health plan is right for you, you have resources:

▶ Visit <u>hr.uiowa.edu/benefits/open-enroll-2022</u> and download the 2022 Annual Benefits & Enrollment Guide to get additional details about each plan, including out-of-pocket costs. You can also use the site to submit questions directly to the benefits team.