

# Medical Plan Options

## 2024—NBHP

Northern Buckeye Health Plan  
NW Division of OHI

Plan Options	OpenCare RBP (MedBen) <b>NEW</b>	Access+ PPO (Anthem)	Advantage HDHP (Anthem)	Consumer HDHP (Anthem)
<b>Network</b>	No Network	Anthem/Blue Access		
<b>Preventive Care</b>	Preventive services covered 100% for all plans as defined under the Affordable Care Act (ACA)			
<b>Annual Deductible</b>	\$0	\$1,000 /person \$2,000 /family	\$3,200 /person \$5,000 /family	\$4,500 /person \$9,000 /family
<b>Doctor Office Visit</b>	\$30 for primary care \$60 for specialist	\$30 for primary care \$60 for specialist	Ded, then 80/20	Ded, then 80/20
<b>Urgent Care</b>	\$60 copay	\$60 copay	Ded, then 80/20	Ded, then 80/20
<b>Emergency Room</b>	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)	Ded, then 80/20	Ded, then 80/20
<b>Inpatient Hospital</b>	\$250 per day (copay not to exceed \$750 per admission)	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>Outpatient Surgery</b>	\$250 copay	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>Labs &amp; X-rays</b>	\$40	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>CT Scan</b>	\$150	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>MRI or PET Scan</b>	\$250 copay	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>DME</b>	\$50	Ded, then 80/20	Ded, then 80/20	Ded, then 80/20
<b>Prescription Drugs</b>	Deductible does not apply	Deductible does not apply	After deductible is met	After deductible is met
<b>Retail</b> (34-day supply)	\$15 Generic	\$15 Generic	\$15 Generic after deductible	Ded, then 80/20
	\$45 Brand Formulary	\$45 Brand Formulary	\$45 Brand Formulary after deductible	
	\$85 Brand Non-Formulary	\$85 Brand Non-Formulary	\$85 Brand Non-Formulary after deductible	
	\$100 Specialty	\$100 Specialty	\$100 Specialty after deductible	
<b>Mail Order</b> (90-day supply)	\$30 Generic	\$30 Generic	\$30 Generic	Ded, then 80/20
	\$90 Brand Formulary	\$90 Brand Formulary	\$90 Brand Formulary after deductible	
	\$170 Brand Non-Formulary	\$170 Brand Non-Formulary	\$170 Brand Non-Formulary after deductible	
	\$200 Specialty	\$200 Specialty	\$200 Specialty after deductible	

**Footnotes:**

<sup>1</sup> ACA approved preventative services are found at <https://www.healthcare.gov/coverage/preventive-care-benefits/>. Providers must bill under a preventative code.

<sup>2</sup>HDHP may be adjusted annually as provided under IRS Code to be eligible as a Qualified HDHP (High Deductible Health Plan).

This chart is a summary of benefits for comparison purposes. Refer to the most recent Benefit Book for complete description of Plan benefits.

Plan changes from 2023 to 2024.