

Plan Benefit Changes – Open Enrollment 2023

As a self-funded entity, Porter County Schools Employees' Insurance Trust is on the hook for paying our own medical and pharmacy claims. With medical and drug cost inflation hovering around a 10% increase each year, the board members are tasked with having to make difficult decisions to assure the solvency and healthy financial position of the Trust while also maintaining exceptional benefits for our members. In previous years, the Trust implemented programs outside of Anthem to avoid substantial premium increases. Even with those programs in place, they are only able to offset these premium increases to a certain degree. In an effort to reduce the necessary premium increase as much as possible this year, the Trust decided to adjust some plan benefits. Below is a short summary of the benefit changes that are occurring to the PPO Plan effective October 1, 2023:

- Deductible increasing from \$250/\$500 (single/family) to \$500/\$1,000 (single/family)
- Coinsurance increasing from 10% to 20%
- Annual Out-of-Pocket Maximum increase from \$1,500/\$3,000 (single/family) to \$2,000/\$4,000 (single/family)
- Emergency Room Copay increasing from \$150 to \$300
- Urgent Care Copay increasing from \$40 to \$80
- Formulary Brand Name Prescriptions Copay (Tier 2) increasing from \$20 to \$30 (Mail Order Copay increasing from \$40 to \$60)
- Non-Formulary Brand/Specialty Prescriptions Copay (Tier 3) increasing from \$30 to \$40 (Mail Order Copay increasing from \$60 to \$80)

	2022/2023 Plan Year Health 1 (PPO)		2023/2024 Plan Year Health 1 (PPO)	
	Network	Non-Network	Network	Non-Network
Deductible (Single/Family)	\$250/\$500	\$500/\$1,000	\$500/\$1,000	\$1,000/\$2,000
Coinsurance	90%	70%	80%	60%
Maximum OOP (including deductible)	\$1,500/\$3,000	\$3,000/\$6,000	\$2,000/\$4,000	\$4,000/\$8,000
Physician Office Visits Only (PCP/SCP)	\$30 Copay	Ded./Coins.	\$30 Copay	Ded./Coins.
Preventive Care	100% Covered	Ded./Coins.	100% Covered	Ded./Coins.
Emergency Room ¹	\$150 Copay		\$300 Copay	
Urgent Care	\$40 Copay	Ded./Coins.	\$80 Copay	Ded./Coins.
Prescription Drugs - Pharmacy				
Generic	\$10	50% min \$40	\$10	50% min \$40
Brand	\$20		\$30	
Non-formulary	\$30		\$40	
Mail Order				
Generic	\$20	Not Covered	\$20	Not Covered
Brand	\$40		\$60	
Non-formulary	\$60		\$80	
Separate Rx Maximum OOP	\$5,100/\$10,200	\$10,200/\$20,400	\$5,100/\$10,200	\$10,200/\$20,400

Health Plan 2 (HDHP 1)'s Deductible and Annual Out-of-Pocket Maximum will also be increasing from \$3,000/\$6,000 (single/family) to \$3,500/\$7,000 (single/family), but that won't be effective until January 1, 2024.