Health Plan Options

$750 Deductible Health Plan

- To be eligible for this plan, you and your covered spouse must have already completed a Health Screening, Health Assessment and Latitude Wellness Program during the designated time frames in FY14.
- If you and your covered spouse did not complete the annual requirements for FY15 and are currently enrolled in the lowest deductible plan, you and your covered dependents will be defaulted to the $1,250 Deductible Plan if you do not enroll during Annual Enrollment.
- You must meet a $750 per person or a $1,875 family deductible (family of 3 or more).
- Copayment: Emergency Room $250.
- After the deductible has been met when using a DAKOTACARE network provider, 25% coinsurance applies until the out-of-pocket maximum has been met.
- A separate prescription drug deductible of $50 per person applies before prescription drug coverage begins.

$1,250 Deductible Health Plan

- You must meet a $1,250 per person or a $3,125 family deductible (family of 3 or more).
- Copayment: Emergency Room $250.
- After the deductible has been met when using a DAKOTACARE network provider, 25% coinsurance applies until the out-pocket-maximum has been met.
- A separate prescription drug deductible of $50 per person applies before prescription drug coverage begins.

$1,800 Deductible Health Plan with Health Savings Account (HSA)

- All eligible health plan expenses, including prescription drugs, apply toward meeting the deductible.
- There is a $1,800 deductible for single coverage and a $3,600 deductible for family coverage. The family deductible must be met by one or more individuals before any benefits will be paid.
- After the deductible has been met when using a DAKOTACARE network provider, 25% coinsurance applies until the out-pocket-maximum has been met.
- Members pay for prescription drug expenses, which apply to the deductible until the deductible has been met. After the deductible has been met, the member pays 25% coinsurance after reimbursement by DAKOTACARE.
- An HSA enables you to pay for covered medical expenses with pretax dollars. The contributions you and the State make to the HSA grow with interest over time and can be taken with you when you retire or if you terminate employment with the State.
- If you open an HSA and complete the HSA form, you will receive a $300 employer contribution from the State. The Benefits Program will email HSA forms following Annual Enrollment.
- The HSA must be verified each plan year. A verification email will be sent following Annual Enrollment. If you do not verify your HSA by July 16, 2014, you will not receive the $300 contribution.

HSA MAXIMUM CONTRIBUTION FOR FY15

In addition to the State $300 contribution, with proof of HSA, you may also make tax-free contributions to your HSA, up to limits established by the IRS. The following are the maximum contributions you can make to your HSA in FY15 according to IRS regulations.

	Employer		Employee		HSA Contribution 2014*
Employee only	$300	+	$3,000	=	$3,300
Employee and spouse	$300	+	$6,250	=	$6,550
Employee and child(ren)	$300	+	$6,250	=	$6,550
Family	$300	+	$6,250	=	$6,550

* Catch-up contributions are allowed for individuals age 55 or older and each individual age 55 or older can contribute an additional $1,000 in FY15. Consult your financial planner or accountant for more information.