

- Includes HSA to offset your costs
- No referrals needed for specialists
- In-network and out-of-network coverage
- Comprehensive preventive care coverage
- No copayments at physician visits
- Nationwide provider network
- Out-of-network may be balanced billed
- Lower premiums, but higher deductibles

Pelican HSA 775

The Office of Group Benefits (OGB) offers this plan in partnership with Blue Cross Blue Shield of Louisiana. This plan includes the potential of an annual employer contribution of \$775 into a Health Savings Account (HSA).

What is the HSA and my cost share?

The HSA may be used for those eligible to participate. Your employer contributes \$200 and then matches contributions you make up to \$575. Employees can contribute additional monies up to IRS limits. Unused funds are rolled over every year with no limit. Unlike the HRA, the money in an HSA follows the member.

Medical Coverage	Employee Only	Employee + 1	Employee + Children	Family
Employer Contribution to HSA	\$200, plus up to \$575 more dollar-for-dollar match of employee contributions			
Deductible (in-network)	\$2,000	\$4,000	\$4,000	\$4,000
Deductible (out-of-network)	\$4,000	\$8,000	\$8,000	\$8,000
Coinsurance (in-network)	20%	20%	20%	20%
Coinsurance (out-of-network)	40%*	40%*	40%*	40%*
Out-pocket-max (in-network) (out-of-network)	\$5,000 \$10,000	\$10,000 \$20,000	\$10,000 \$20,000	\$10,000 \$20,000

^{*}Once the deductible is met, you will pay 40% of the allowable charge, plus 100% of the difference between the allowable charge and billed amount (this is balance billing).

What doctors are in my network?

The Pelican has both in-network and out-of-network benefits. In-network coverage is Blue Cross Blue Shield of LA Preferred Care Providers and Blue Cross Blue Shield National Providers. Out-of-network coverage is considered any provider that does NOT accept Blue Cross Blue Shield nationwide.

