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Chillicothe & Ross County
Public Library

Insurance Company	United Healthcare		United Healthcare		United Healthcare	
Plan Name	AXPH		AXPH Initial Renewal		AXPH Final Renewal	
Health Benefits	Network	Non-Network	Network	Non-Network	Network	Non-Network
Single Deductible	\$5,000	\$1,000	\$5,000	\$1,000	\$5,000	\$1,000
Family Deductible	\$10,000	\$20,000	\$10,000	\$20,000	\$10,000	\$20,000
Coinsurance %	80%	50%	80%	50%	80%	50%
Single OOP Max	\$7,150	\$20,000	\$7,150	\$20,000	\$7,150	\$20,000
Family OOP Max	\$14,300	\$40,000	\$14,300	\$40,000	\$14,300	\$40,000
Inpatient Services	Ded. then 20%	Ded. then 50%	Ded. then 20%	Ded. then 50%	Ded. then 20%	Ded. then 50%
Outpatient Surgery	Ded. then 20%	Ded. then 50%	Ded. then 20%	Ded. then 50%	Ded. then 20%	Ded. then 50%
Doctor Office Copay	\$15	Ded. then 50%	\$15	Ded. then 50%	\$15	Ded. then 50%
Specialist Copay	\$50/\$100	Ded. then 50%	\$50/\$100	Ded. then 50%	\$50/\$100	Ded. then 50%
Urgent Care Copay	\$25	Ded. then 50%	\$25	Ded. then 50%	\$25	Ded. then 50%
ER Copay	\$300 then 20%		\$300 then 20%		\$300 then 20%	
RX Generic Copay	\$10		\$10		\$10	
RX Preferred Brand Copay	\$40		\$40		\$40	
RX Nonpref Brand Copay	\$85		\$85		\$85	
RX Mail Order	\$25/\$100/\$212.50		\$25/\$100/\$212.50		\$25/\$100/\$212.50	
Network	UHC Choice Plus		UHC Choice Plus		UHC Choice Plus	
Website	www.uhc.com		www.uhc.com		www.uhc.com	
TOTAL CENSUS & RATES						
HEALTH	Census	Rate	Census	Rate	Census	Rate
Employee Only	12	\$740.74	12	\$814.07	12	\$770.37
Employee + Spouse	9	\$1,628.13	9	\$1,789.31	9	\$1,693.26
Employee + Child(ren)	2	\$1,250.36	2	\$1,374.15	2	\$1,300.38
Full Family	6	\$2,286.65	6	\$2,513.03	6	\$2,378.12
Monthly Premium	\$39,762.67		\$43,699.17		\$41,353.26	
Annual Premium	\$477,152.04		\$524,390.09		\$496,239.12	
Percentage Change	Current		9.90%		4.00%	