

# Medical Plan Flow Chart

## Employee Only

IN NETWORK BENEFIT FOR ROCKWALL COUNTY'S MEDICAL BENEFIT PLAN			
"Employee Only" Coverage (Without Dependents)			
First Dollar Benefit (1st)	Deductible (2nd)	Co-Insurance Co-Pays (3rd)	Comprehensive Out-of-Pocket Maximum (4th)
Coverage = 100% of the first \$500 Your cost = \$0	Coverage = 0% of the next \$750 Your cost = up to \$750	Coverage = 80%-20% Rx Co-pays & Helping Hands Your cost = Up to \$4,750	Coverage = 100% for the balance of the year Your cost=\$0 \$5,500 out-of-pocket max
Wellness/preventive benefits, as well as dental and vision claims are all handled separately and are not included in the numbers presented above.			

# Medical Plan Flow Chart Employee & Dependents

IN NETWORK BENEFIT FOR ROCKWALL COUNTY'S MEDICAL BENEFIT PLAN			
"Employee and Child(ren)", "Employee and Spouse", "Employee and Family" Coverage (With Dependents)			
First Dollar Benefit (1st)	Deductible (2nd)	Co-Insurance Co-Pays (3rd)	Comprehensive Out-of-Pocket Maximum (4th)
Coverage = 100% of the first \$1,000 Your cost = \$0	Coverage = 0% of the next \$1,500 Your cost = up to \$1,500	Coverage = 80%-20% Rx Co-pays & Helping Hands Your cost = Up to \$9,500	Coverage = 100% for the balance of the year Your cost=\$0 \$11,000 out-of-pocket max
Wellness/preventive benefits, as well as dental and vision claims are all handled separately and are not included in the numbers presented above.			