

Southern Design Services

Employee Medical Offerings Effective August 1, 2011 - July 31, 2012

	High Option	Low Option
Carrier	Blue Cross Blue Shield of SC	Blue Cross Blue Shield of SC
	Renewal In network/Out	Renewal In network/Out
Benefits		
Deductible		
Individual	\$1000/\$1000	\$3000/\$3000
Family	\$2000/\$2000	\$6000/\$6000
Coinsurance	70/50	70/50
Out of Pocket Max		
Individual	\$2000/\$4000	\$2000/\$4000
Family	\$4000/\$8000	\$4000/\$8000
CoPays		
Per Admit to Hospital	\$0	\$0
Primary Care Physician	\$25	\$25
Specialist	\$50	\$50
Emergency Room	Deductible	Deductible
Urgent Care	Deductible	Deductible
MRI	Deductible	Deductible
Generic Drug	\$15	\$15
Brand Drug	\$35	\$35
Non-Preferred Drug	\$55	\$55
Mail Order	3 mon. for 2.5	3 mon. for 2.5
Chiropractic	Not Covered	Not Covered
Wellness Benefit	Included up to a \$500 max	Included up to a \$500 max
Employee Medical Pricing Effective August 1, 2011 - July 31, 2012		
Employee	\$404.81/month(\$93.42/wk)	\$347.79/month(\$80.26/wk)
Employee/Spouse	\$960.66/month(\$221.69/wk)	\$824.89/month(\$190.36/wk)
Employee/Child	\$779.95/month(\$179.99/wk)	\$651.52/month(\$150.35/wk)
Family	\$1336.39/month(\$308.40/wk)	\$1182.22/month(\$272.82/wk)

