

# 2023 Comparison for CSI Non-Medicare Plans



Benefits	CSI 100% (HMO-POS)	CSI 80% (HMO)
Medical deductibles	In-network: \$200	In-network: \$425
	Out-of-network: \$200	Out-of-network: Not covered
Coinsurance out-of-pocket Limit	In-network: \$0	In-network: \$1,500
	Out-of-network: \$1,500	Out-of-network: Not applicable
Total out-of-pocket maximum	In-network: \$8,150	In-network: \$8,150
	Out-of-network: \$16,300	Out-of-network: Not applicable
Doctor visit (in-network)	\$10 copay for primary care provider	\$20 copay for primary care provider
	\$25 copay for specialist	\$35 copay for specialist
Hospitalization	In-network: 100% coverage	In-network: 80% coverage
	Out-of-network: 70% coverage	Out-of-network: Not applicable
Skilled nursing facility (in-network)	100% coverage	100% coverage
Urgent & emergency care (worldwide)	\$40 copay for urgent care visit	\$45 copay for urgent care visit
	\$100 copay for emergency room visit	\$100 copay for emergency room visit
Ambulance	\$75 copay	\$75 copay
Outpatient hospital care (in-network)	100% coverage	80% coverage
Outpatient rehabilitation services (in-network)	\$10 copay	\$20 copay
Diagnostic tests, x-rays and lab services (in-network)	100% coverage	80% coverage
	\$150 copay for diagnostic radiological services	\$150 copay for diagnostic radiological services
DME/P&O (in-network)	80% coverage	80% coverage
Chiropractic services (in-network)	\$10 copay	\$20 copay

Benefits	CSI 100% (HMO-POS)	CSI 80% (HMO)
<b>Preventive screenings</b> (in-network)	100% coverage	100% coverage
<b>Home health care</b> (in-network)	100% coverage	100% coverage
<b>Prescription drugs</b> (for 31-day supply) <b>No deductible</b>	Tier 1: \$10 copay Tier 2: \$10 copay Tier 3: \$40 copay Tier 4: \$40 copay Tier 5 : \$40 copay	Tier 1: \$15 copay Tier 2: \$15 copay Tier 3: \$50 copay Tier 4: \$50 copay Tier 5: \$50 copay
<b>Mail order prescription</b> (for 90-day supply)	Tier 1: \$20 copay Tier 2: \$20 copay Tier 3: \$80 copay Tier 4: \$80 copay Tier 5: 30 day supply only	Tier 1: \$30 copay Tier 2: \$30 copay Tier 3: \$100 copay Tier 4: \$100 copay Tier 5: 31 day supply only
<b>Gym membership</b>	Available through Active & Fit. \$25 monthly membership fee.	Available through Active & Fit. \$25 monthly membership fee.
<b>Dental</b>	Coverage through CSI's Delta Dental plan is included	Coverage through CSI's Delta Dental plan is included
<b>Vision</b>	N/A	N/A
<b>Hearing</b>	N/A	N/A

Total out-of-pocket maximum is a combination of the member's cost on both covered medical and pharmacy benefits (e.g. deductible, coinsurance, co-pay)