

**State of Rhode Island  
Alternative Medical Plan  
Choice Plus Plan with a Health Savings Account (HSA)**

Choice Plus Plan with a Health Savings Account (HSA)		In-Network	Out of Network
<b>Annual Deductible</b>	Individual: Family:	\$1,500 \$3,000	\$2,250 \$4,500
<b>Annual Out-of-pocket maximum</b>	Individual: Family:	\$3,000 \$6,000	\$4,500 \$9,000
<b>State of RI HSA annual contribution</b>			
<b>Employees <u>not</u> currently enrolled in a Health Care Flexible Spending Account (FSA)</b>	Individual: Family:	\$1,500 (\$750 on 1/1/16 and \$750 on 7/1/16) \$3,000 (\$1,500 on 1/1/16 and \$1,500 on 7/1/16)	
<b>Employees currently enrolled in a Health Care Flexible Spending Account (FSA)</b>	Individual: Family:	\$1,500 (\$1,500 on 7/1/16) \$3,000 (\$3,000 on 7/1/16)	
<b>Preventive care</b>		100%	Plan pays 70%** after deductible
<b>Coinsurance (e.g., office visit, outpatient surgery, hospitalization)</b>		Plan pays 90%* after deductible	Plan pays 70%** after deductible
<b>Prescription drug benefit (Administered by CVS/caremark)</b>		Retail Pharmacy Network (up to a 30-day supply): Deductible then \$7 copay generic drugs /\$25 copay preferred brand drugs /\$45 copay non-preferred brand drugs.  CVS/caremark Mail Service or CVS/pharmacy (up to a 90-day supply): Deductible then \$14 copay generic drugs/\$50 copay preferred brand drugs /\$90 copay non-preferred brand drugs.  <b>Deductible does not apply to drugs on the Preventive Therapy Drug List.</b>	Plan pays 70%** after deductible

\*10% paid by member \*\*30% paid by member