



Avera HDHP

Group: Hand County
 Effective Date of Coverage: 9/1/2020

Contracts Quoted	
Employee	23
Employee & Spouse	0
Employee & Children	1
Family	0
Total	24

2020 South Dakota Large Group Rating

4 Tier Level Quote

Non-Grandfathered

SIC Code: 9111

High Deductible Health Plan: Medical & Pharmacy

	In-Network		Out-of-Network	
	Individual	Family	Individual	Family
Deductible	\$4,500	\$9,000	\$5,000	\$10,000
Coinsurance	\$0	\$0	\$5,000	\$10,000
Coinsurance %	100%	100%	60%	60%
Out of Pocket Maximum	\$4,500	\$9,000	\$10,000	\$20,000

* HDHP Family Deductible has an embedded Single deductible

	Employee	Employee & Spouse	Employee & Children	Family	Total Monthly Premium
* HDHP Pharmacy plans may not qualify as creditable coverage under Medicare Part D per Medicare Guidelines.					
Preventive Benefits	100% Preventive Benefit - NGF				

High Deductible Health Plan: Riders

Vision	No Coverage				
Employee Assistance Program	EAP - 5 Visits				
Commission Per Employee Per Month:	\$18.00				
Total Premium with Commission:	\$715.54	\$1,413.09	\$1,308.45	\$2,005.99	\$17,765.87

Renewal Rates: The above rates are based on the most recent AHP census/claim information. Rates are valid for twelve months from renewal date provided the group renews within 30 days of receipt of this renewal. Renewals not confirmed within 30 days may be re-rated based on updated census and claims information.

<u>MICHAEL LE BRUN</u> Agent Name	<u>ICE FINANCIAL</u> Agency Name
<u>Doug D. Blue</u> Employer Representative Signature	<u>8/24/20</u> Date

