



Denair Unified School District

Medical Plan Renewal Rates and Benefits: Effective 10/1/2025 - 9/30/2026



MEDICAL BENEFITS	Summit LG03 HMO	Peak LG10 HMO	Peak LG12 HMO	Vista HD44 HDHP	Trad HMO 30	HMO 1500	HMO 3000	HMO 5000
Deductible Ind / Family	\$0	\$1,500/\$3,000	\$3,000/\$6,000	\$4,000/\$8,000	\$0	\$1,500/\$3,000	\$3,000/\$6,000	\$5,000/\$10,000
Annual Out of Pocket Max Ind / Family	\$1,000/\$2,000	\$4,000/\$8,000	\$6,000/\$12,000	\$6,500/\$13,000	\$1,500/\$3,000	\$4,000/\$8,000	\$6,000/\$12,000	\$7,000/\$14,000
Office Visits (Primary/Specialists)	\$10	\$20	\$20	\$40 after ded	\$30	\$20	\$40	\$50 1st 3 visits
Urgent Care	\$10	\$20	\$20	\$40 after ded	\$30	\$20	\$40	\$50 after ded
Lab/X-ray	\$10/No Charge	\$20/\$10	\$20/\$10	\$40 after ded/ \$15 after ded	\$0/\$0	\$10/\$10	\$10/30%	30% after ded
Preventive Care	No Charge	No Charge	No charge	No charge	No Charge	No Charge	No Charge	No Charge
Emergency Room	\$50	20% after ded	30% after ded	\$150 after ded	\$100	20% after ded	30% after ded	30% after ded
Inpatient Hospital	No Charge	20% after ded	30% after ded	\$500 copay after ded	No Charge	20% after ded	30% after ded	30% after ded
Outpatient Hospital	No Charge	20% after ded	30% after ded	\$40 copay after ded	\$30 per procedure	20% after ded	30% after ded	30% after ded
Hearing Aid Coverage	n/a	n/a	n/a	n/a	\$3000 per device; 1 device per ear	n/a	n/a	n/a

PHARMACY BENEFITS	Summit LG03 HMO	Peak LG10 HMO	Peak LG12 HMO	Vista HD44 HDHP	Trad HMO 30	HMO 1500	HMO 3000	HMO 5000
Rx Deductible Ind / Family	None	None	None	Integrated with medical	None	None	None	Integrated with medical
Generics 30 day supply	\$5 co-pay	\$10 co-pay	\$10 co-pay	\$10 co-pay after ded	\$10 co-pay (up to 100 day supply)	\$10 co-pay	\$10 co-pay	\$15 co-pay after ded
Brand Name 30 day supply	\$20 co-pay	\$30 co-pay	\$30 co-pay	\$30 co-pay after ded	\$30 co-pay (up to 100 day supply)	\$30 co-pay	\$30 co-pay	\$50 co-pay after ded
Non-formulary 30 day supply	\$40 co-pay	\$60 co-pay	\$60 co-pay	\$60 co-pay after ded	n/a	n/a	n/a	n/a

3-TIERED RATES								
Current Rates 10/1/24 - 9/30/25								
Employee Only	\$1,067.10	\$804.20	\$731.70	\$621.10	\$993.72	\$866.97	\$717.34	\$571.71
Employee + One	\$2,134.20	\$1,608.40	\$1,463.40	\$1,242.20	\$1,987.44	\$1,733.94	\$1,434.67	\$1,143.41
Employee + Two or More	\$3,019.90	\$2,276.00	\$2,070.80	\$1,757.60	\$2,812.23	\$2,453.52	\$2,030.06	\$1,617.93

Renewal Rates 10/1/25 - 9/30/26								
Employee Only	\$1,156.80	\$871.80	\$793.20	\$673.30	\$1,021.65	\$880.25	\$728.34	\$571.71
Employee + One	\$2,313.60	\$1,743.60	\$1,586.40	\$1,346.60	\$2,043.30	\$1,760.50	\$1,456.68	\$1,143.41
Employee + Two or More	\$3,273.80	\$2,467.30	\$2,244.90	\$1,905.30	\$2,891.27	\$2,491.11	\$2,061.20	\$1,617.93