

**SUMMARY COMPARISON OF
 LEON COUNTY MEDICAL PLAN DESIGN
 WITH OTHER LOCAL GOVERNMENTAL ENTITIES CHP PLAN DESIGNS**

COVERAGE	LEON COUNTY 1/2010 with Mental Health Parity	STATE OF FLORIDA 1/2010 with Mental Health Parity	CITY OF TALLAHASSEE 1/2010 with Mental Health Parity	LEON COUNTY SCHOOL BOARD 10/2009
PCP	\$10	\$15	\$15	\$15
Specialist	\$10	\$25	\$25	\$40
After Hours/Urgent Care	\$15	\$15	\$20	\$25
Emergency Room	\$100	\$50	\$100	\$250
Inpatient Hospital	\$0	\$250/Admit	\$250/Admit (\$750 max/yr	\$250/Admit
Outpatient Surgery performed in a hospital	\$0	\$0	\$100/visit	\$250 (at hospital)
Outpatient Surgical Physician	\$10	\$0	\$25	\$40
Ambulatory Surgical performed in an Ambulatory Center	\$0	\$0	\$100	\$100 (at ambulatory center)
Rehab Therapies (ST,OT,PT)	\$10	\$25	\$25	\$40
Behavioral Health- Inpatient	\$0	\$250/Admit	\$250/Admit (\$750 max/yr	\$250/Admit- 31 days max/yr
Behavioral Health- Outpatient	\$20/visit	\$25/visit	\$25/visit	\$40/visit-20 visits/yr
Routine Vision	\$10	\$15	\$15	\$15
Out of Pocket Maximum	\$1,500/\$3,000- excludes RX copays	\$1,500/\$3,000	\$2,000/\$4,500- excludes RX copays	\$2,000/\$4,500- excludes RX copays
MRI/PET/CT	\$0	\$0	\$25 per scan	\$100/per scan
Prescriptions	\$7/\$20/\$35	\$10/\$25/\$40	\$15/\$30/\$50	\$15/\$30/\$50

**Monthly Premium and Contribution Comparisons
 Local Government Entities**

Leon County 1/2010	Monthly Premium	Employer Contribution %	Employee Contribution %
Employee	\$487.90	90%	10%
Employee + 1	\$1009.92	90%	10%
Family	\$1292.80	90%	10%
State of Florida* 1/2010 thru 4/30/2010			
State of Florida* 1/2010 thru 4/30/2010	Monthly Premium	Employer Contribution %	Employee Contribution %
Employee	\$498.68	89.9%	10.1%
Employee + 1	N/A	N/A	N/A
Family	\$1127.74	84%	16%
City of Tallahassee 1/2010			
City of Tallahassee 1/2010	Monthly Premium	Employer Contribution %	Employee Contribution %
Employee	\$426.54	84%	16%
Employee + 1	\$853.25	78%	22%
Family	\$1166.37	69%	31%
Leon County School Board 10/2009			
Leon County School Board 10/2009	Monthly Premium	Employer Contribution %	Employee Contribution %
Employee	\$380.93	80%	20%
Employee + 1	\$781.05	60%	40%
Family	\$1104.83	60%	40%

*State of Florida rates will be \$523.62 for employee and \$1,184.14 for Family effective May 1, 2010.