

Missouri State University 2024 Medical and Pharmacy Benefits

Member Responsibility

Buy-Up Plan	Magers Health Center	In-Network	Out-of-Network
Medical Benefits			
Preventive Care	0% Plan Pays 100%	0% Plan Pays 100%	Regular Benefits
Deductible Individual (maximum) Family (maximum)	\$0 \$0	\$800 \$1,600	\$1,600 \$3,200
Coinsurance Individual (maximum) Family (maximum)	20% \$2,000 \$4,000		40% \$4,000 \$8,000
Office Visit Copay Primary Care* Specialist*	\$5 \$5	\$20 \$30	N/A N/A
Emergency Room Deductible (per incident)*	N/A	\$250	\$250
*Copay & ER Deductible Individual (maximum) Family (maximum)	\$700 \$1,400		No Maximum No Maximum
Total Medical Out of Pocket			
Individual (maximum) Family (maximum)	\$3,500 \$7,000		No Maximum No Maximum
Pharmacy Benefits			
Pharmacy Preventive	0% Plan Pays 100%	0% Plan Pays 100%	N/A
Pharmacy All Other	20%	30%	N/A
Total Pharmacy Out of Pocket			
Individual (maximum) Family (maximum)	\$1,500 \$3,000		
Total Out of Pocket Maximum**			
Individual (maximum) Family (maximum)	Magers + In-Network \$5,000 \$10,000		Out-of-Network No Maximum No Maximum
**Total Out of Pocket Maximum does not include ineligible amounts, including amounts over Usual and Customary.			
Monthly Premium			
Employee Only	Without Incentive \$93	With Incentive \$63	
Employee + Spouse	\$511	\$481	
Employee + Child(ren)	\$388	\$358	
Employee + Family	\$577	\$547	