2026 Plan Comparisons (In-Network)

Health Plans	UMR Core	UMR HSA	Surest
Annual Deductible			
Individual	$750	$3,400	No Deductible
Family	$1,500	$6,800	No Deductible
Employer HSA Contribution	Not eligible for HSA	$750 for individual and $1,500 for Two Person/Family	Not eligible for HSA
Out-of-pocket Limit (includes Deductible)			
Individual	$4,500	$5,000	$4,000
Family	$9,000	$10,000	$8,000
Lifetime Maximum	Unlimited		
Hospital			
Inpatient	20% after Deductible	20% after Deductible	$10-2,000 copay
Outpatient	20% after Deductible	20% after Deductible	$10-2,000 copay
Emergency Room	$250 copay	20% after Deductible	$180 copay
Physician Visits and Ancillary Services			
Preventive Care	Zero cost share		
Virtual Visit	$15 copay	20% after Deductible	Zero cost share
Primary Care (family, Pediatrician, OB/GYN, etc.)	$30 copay	20% after Deductible	$5-40 copay
Specialist Visits	$30 copay	20% after Deductible	$5-40 copay
Chiropractic Care	$30 copay	20% after Deductible	$10 copay
Urgent Care	$75 copay	20% after Deductible	$20 copay
Routine Diagnostic Tests (e.g. X-ray, Lab, Ultrasound)	20% after Deductible	20% after Deductible	Zero cost share
Complex Imaging (e. g. MRI, CT)	20% after Deductible	20% after Deductible	$40-280 copay
Advanced Tests (e.g. EKG, Sleep Study)	20% after Deductible	20% after Deductible	$5 - 450 copay
Please see plan design overview for more Surest copay information.			
Prescription Plans	**UMR Core**	**UMR HSA**	**Surest**
Retail Copays (30-day supply)			
Tier 1	$10	20% after Deductible	$5
Tier 2	$40	20% after Deductible	$20

Tier 3	$60	20% after Deductible	$40
Tier 4 - Specialty	30%	20% after Deductible	30%
Mail Order Copays (90-day supply)			
Tier 1	$20	20% after Deductible	$15
Tier 2	$80	20% after Deductible	$50
Tier 3	$120	20% after Deductible	$100
Bi-Weekly Premiums (41k and Over)			
Employee Only	$85.67	$42.46	$39.16
Employee + spouse	$188.76	$93.55	$86.26
Employee + child(ren)	$142.17	$70.46	$64.97
Family	$235.11	$116.51	$107.44
Bi-Weekly Premiums (Under 41k)			
Employee Only	$73.33	$33.85	$28.47
Employee + spouse	$160.94	$74.58	$62.73
Employee + child(ren)	$121.35	$56.18	$47.25
Family	$200.34	$92.89	$78.14