



Homeowners Financial Group

2024-2025 Employee Benefits

Eligibility & Enrollment

Full-time employees working a minimum of 30 hours per week are eligible to participate in the benefits program along with their legal spouse/domestic partner and children. Your enrollment choices remain in effect for the benefits plan year, November 1, 2024 – October 31, 2025. New hires are eligible for benefits on the first day of the month, following 30 days from your date of hire.

Medical

Employees are offered medical coverage under a PPO or a High Deductible Health Plan (HDHP) insured by Cigna.

Plan Highlights	Cigna PPO Buy Up Plan	Cigna PPO Mid Plan	Cigna HDHP/HSA Plan	Cigna PPO Base Plan*
	In-network (Open Access Plus)	In-network (Open Access Plus)	In-network (Open Access Plus)	In-network (LocalPlus)
Annual Calendar Year Deductible				
Individual / Family	\$2,500 / \$5,000	\$3,500 / \$7,000	\$3,500 / \$7,000	\$6,000 / \$12,000
Maximum Calendar Year Out-of-pocket				
Individual / Family	\$5,000 / \$10,000	\$6,750 / \$13,500	\$6,250 / \$12,500	\$7,900 / \$15,800
Professional Services				
PCP	\$25 Copay	\$35 Copay	20% After Deductible	\$35 Copay
Specialist	\$50 Copay	\$70 Copay	20% After Deductible	\$70 Copay
Preventive Care	No Charge	No Charge	No Charge	No Charge
X-ray and Lab	No Charge	No Charge	20% After Deductible	No Charge
Complex Diagnostics	\$250 Copay	\$250 Copay	20% After Deductible	\$250 Copay
Hospital Services				
Inpatient / Outpatient	30% After Deductible	30% After Deductible	20% After Deductible	20% After Deductible
Urgent Care	\$75 Copay	\$75 Copay	20% After Deductible	\$75 Copay
Emergency Room	\$300 Copay	\$400 Copay	20% After Deductible	\$400 Copay
Retail Prescription Drugs (30-day)				
Tier 1	\$15 Copay	\$15 Copay	\$10 Copay After Deductible	\$15 Copay
Tier 2	\$35 Copay	\$35 Copay	\$35 Copay After Deductible	\$35 Copay
Tier 3	\$65 Copay	\$65 Copay	\$65 Copay After Deductible	\$65 Copay
Tier 4	\$100 Copay	\$100 Copay	\$100 Copay After Deductible	\$100 Copay
Mail Order (90-day)	2.5x Retail Copay	2.5x Retail Copay	2.5x Retail Copay After Deductible	2.5x Retail Copay

* If you are eligible for the LocalPlus network, this is the base plan you need to elect.