Health Plans

Made Simple

When looking for a health plan that meets your ministry's needs, you may come across unfamiliar plan details and terms. At GuideStone®, our goal is to equip you to make the best decisions for your ministry.

Here are the key features you need to know.

Individual Deductible: The amount you pay out-of-pocket for a covered health care service before the co-insurance takes effect. The lower the deductible, the faster you get coverage at the co-insurance level.

Health Plan 500*

Plan Features	
Individual Deductible	$500
Family Deductible	$1,000
Telehealth	$0
Maximum Out-of-pocket (medical and prescription)	$4,750/$7,500
Outpatient Surgery	20% after deductible
Urgent Care **Co-pay**	$50
Plan Pays/Individual Pays **(Co-insurance)**	80%/20%
Wellness and **Preventive Care**	100% no co-pay

Family Deductible: The amount your family needs to pay out-of-pocket for a covered health care service before co-insurance takes effect for the whole family. This amount needs to be met by a combination of two or more plan members.

Maximum Out-of-pocket (MOOP): The annual maximum you will pay under a plan, including your deductible, co-pays and prescription costs. Once you reach this limit, the plan pays 100% of eligible claims.

Co-pay: The fixed amount you pay for certain in-network expenses like urgent care or a primary care visit.

Preventive Care: This includes routine procedures such as check-ups, screenings and immunizations. In this example, preventive care is covered at 100%.

Co-insurance: The split cost between what you and the plan pay for eligible claim expenses. Here, the plan pays 80% of the claim, you pay 20%.

Preferred Provider Organization (PPO) Plan: A type of health plan that contracts with health care providers — such as hospitals and doctors — to create a network of participating providers. You pay less if you use providers that belong to the plan's network; however, you can use doctors, hospitals and providers outside of the network at an additional cost.

Exclusive Provider Organization (EPO) Plan: A managed care plan where services are covered only if you go to health care providers, specialists or hospitals in the plan's network (except in an emergency).

High Deductible Health Plan (HDHP): A plan with a higher deductible than a traditional health plan because it is designed to be used with a Health Savings Account (HSA), allowing you to pay for qualified medical expenses with tax-advantaged dollars.

Need more help? Reach out to better understand your health plan terminology and options.

Visit *GuideStone.org/HealthPlans* or give us a call: **1-844-INS-GUIDE** (1-844-467-4843), Monday through Friday, from 7 a.m. to 6 p.m. CT.

*Health Plan 500 is a fictional plan for illustrative purposes.

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