Plan feature	SEQA	EQA	PPO	HDHP
Eligibility	Eligible employees making \$28.00 or less an hour	Eligible employees making \$28.01 or more an hour	All eligible employees	All eligible employees
Provider network	Tier 1* (BSW Premier HMO) only		Tier 1 (BSW Premier HMO) Tier 2 (UnitedHealthcare) Tier 3 (Out-of-Network)	Tier 1 (BSW Premier HMO) Tier 2 (UnitedHealthcare) Tier 3 (Out-of-Network)
Preventive visits	\$0** when you stay in the Tier 1 network		\$0** when you stay in the Tier 1 or Tier 2 network	\$0** when you stay in the Tier 1 or Tier 2 network
Сорау	Varies by care (see Coverage and Cost chart)		Varies by care (see Coverage and Cost chart)	N/A
Deductible	Lower		Medium	Higher
Premium	Lower	Medium	Higher	Lower
Bundled maternity copay***	\$400		\$1,200 (Tier 1 only)	Not eligible
Prescription drugs	Copay/coinsurance		Copay/coinsurance	Coinsurance after deductible met
Flexible Spending Account (FSA)	General-purpose FSA		General-purpose FSA	Limited-purpose FSA [†]
Health Savings Account (HSA)	No		No	Yes

^{*}No out-of-network coverage, except in cases of urgent/emergency care or rare situations when an in-network provider is not available, and authorization is provided.

^{**}In order for preventive care to be covered at 100%, services must be coded as preventive.

Please see BSWHealthPlan.com/BSWH for a complete list of covered preventive care services.

^{***} Copay applies to the facility claim. All other services billed with a maternity/delivery diagnosis code (e.g., OB-GYN, anesthesia, pathology) will be paid at 100%, including prenatal services and well-baby charges if your newborn is added to the plan for coverage.

[†] The limited-purpose FSA can be used for dental, vision and qualified expenses the medical plan doesn't cover until you meet your medical plan deductible. Once your deductible is met, you can use FSA funds for all eligible medical and prescription expenses too.

HDHP enrollees can be enrolled in both the limited-purpose FSA and the HSA.