



## Employee Benefits - Standard Plan Summaries

Effective 7/1/26 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at [mmiaeb.net](http://mmiaeb.net) and must be referenced for details of all coverages.

	Bridger	Madison	Pintler	High Deductible (HSA-Qualified)
Deductible (Individual/Family) <b>January 1 - December 31</b>	\$750 / \$1,500	\$1,000 / \$2,000	\$2,000 / \$4,000	\$3,500 / \$7,000
<b>Benefit Percentage (what the plan pays if the Deductible is waived or after the Deductible is met)</b>				
All Montana and Non-Montana Cigna Providers	80%	70%	70%	80%
Non-Montana, Non-Cigna Providers	60%	50%	50%	60%
<b>Annual Out-of-Pocket Maximum</b> (the most you will pay for covered services in a plan year) Individual/Family	\$2,500 / \$5,000	\$4,000 / \$8,000	\$5,000 / \$10,000	\$7,000 / \$14,000
<b>Medical Services</b>				
Preventive care as recommended by the US Preventive Services Task Force, CDC, and Health Resources & Services Administration at <a href="http://www.healthcare.gov">www.healthcare.gov</a>	100% Plan-paid			
Accidental Injury Benefit	100% up to \$300, then standard benefits apply			Deductible applies
Diabetic Education	100% Plan-paid			
Hospice Care				
<b>Professional Provider Services</b>				
Alternative Medicine Benefit - up to \$500	Deductible waived (Plan pays Benefit %)			Deductible applies
Chiropractic - up to \$400, plus \$100 x-ray benefit				
Home Health Care				
Newborn Initial Care				
Nutritional Counseling - up to 10 visits per year				
<b>Facility Provider Services</b>				
Emergency Room Care	Deductible applies			
Obesity Surgery - one per lifetime, up to \$30,000				
<b>Prescription Drug Benefit</b>				
Generic	\$4 Retail (30 day) / \$8 Mail Order (90 day)			Deductible applies
Brand Formulary	\$20 Retail (30 day) / \$40 Mail Order (90 day)			
Brand Non-Formulary	\$50 Retail (30 day) / \$100 Mail Order (90 day)			