

**Sarah Lawrence College
Cigna Plan Comparisons
2024 Employee Contributions**

	LOW PLAN	MEDIUM PLAN	HIGH PLAN
	HDHP	EPO	POS
Benefits	IN NETWORK	IN NETWORK	IN NETWORK
Network	Cigna PPO Network	Cigna PPO Network	Cigna PPO Network
Preventative Care Benefits	NO CHARGE!!	NO CHARGE!!	NO CHARGE!!
Office Copay (PCP/SPC)	Deductible	\$25/\$25	\$25/\$25
Teladoc Service	\$45 (towards deductible)	\$25	\$25
Deductible (Ind/Fam)	\$2,000/\$4,000	\$100/\$200	\$100/\$200
Coinsurance	0%	0%	0%
Out of Pocket Max (Ind/Fam)	\$3,000/\$6,000	\$1,500/\$3,000	\$1,500/\$3,000
Diagnostic Test	Deductible	No Charge	No Charge
MRI, CT, PET scans	Deductible	No Charge	No Charge
Outpatient Hospital	Deductible	Deductible	Deductible
In Patient Hospital	Deductible	Deductible	Deductible
ER Copay	Deductible	\$75	\$75
Urgent Care	Deductible	\$25	\$25
Pharmacy	Deductible \$10/\$20/\$35	\$10/\$20/\$35	\$10/\$20/\$35
Benefits	OUT OF NETWORK	OUT OF NETWORK	OUT OF NETWORK
Deductible (Ind/Fam)	\$6,000 / \$12,000	N/A	\$500/\$1,000
Coinsurance	30%	N/A	20%
Out of Pocket Max (Ind/Fam)	\$12,000/\$24,000	N/A	\$1,500/\$3,000
Monthly Employee Rates			
Single (below \$49,999)	\$75.58	\$172.78	\$288.74
Family (below \$49,999)	\$144.89	\$458.05	\$778.35
Single (\$50,000 - \$74,999)	\$128.74	\$225.94	\$341.90
Family (\$50,000 - \$74,999)	\$285.83	\$598.99	\$919.29
Single (\$75,000 - \$149,999)	\$175.25	\$272.45	\$388.41
Family (\$75,000 - \$149,999)	\$409.15	\$722.31	\$1,042.61
Single (\$150,000 +)	\$235.06	\$332.26	\$448.22
Family (\$150,000 +)	\$567.70	\$880.86	\$1,201.16
Single (guest faculty)*	\$567.32	\$664.52	\$780.48
Family (guest faculty)*	\$1,448.57	\$1,761.73	\$2,082.03

**NOTE: Effective 2020 benefit-eligible, long term guest faculty (those with 10 or more years of service) are eligible to enroll in health insurance coverage under the same terms as tenure and tenure-track faculty of the College (according to salary tier).*