NAU BCBSAZ - Cost Share and Premiums

https://in.nau.edu/human-resources/benefits-offered/

### Deductible
- Individual: $1,400 / $2,800
- Family: $2,800 / $5,600

### Out of Pocket Maximum
- Individual: $2,000 / $5,000
- Family: $4,000 / $10,000

### Life Time Maximum
- None

### Your Cost for Care
- Coinsurance:
  - In-Net: 10%
  - Out-Net: 50%

### Office Visits – per visit
- Preventive Care: 0%
- Campus Health Services: 10%
- Mental Health: 10%
- Primary Care: 10%
- Specialist: 10%

### Radiology (CAT, MRI, PET)
- In-Net: 10%
- Out-Net: 50%

### Emergency – Per Visit
- Urgent Care: 10%
- Emergency Room Visit 1: 10%
- Visit 2: 10%
- Visit 3+:

### Facility
- Inpatient – per admission: 10%
- Out Patient – per procedure: 10%

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1. Members must first meet all deductibles. The family deductible is tracked as a whole - not individually.
2. Members are also responsible for all for any balance billing amounts for out of network services.

### 2021 Per Pay Period Premiums

<table>
<thead>
<tr>
<th>NAU HDHP</th>
<th>You Pay</th>
<th>NAU Pays</th>
<th>Total</th>
<th>NAU HSA Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$5.54</td>
<td>$293.17</td>
<td>$298.71</td>
<td>$23.08</td>
</tr>
<tr>
<td>Employee + Adult</td>
<td>$21.23</td>
<td>$605.39</td>
<td>$626.62</td>
<td>$46.15</td>
</tr>
<tr>
<td>Employee + Child</td>
<td>$16.66</td>
<td>$431.10</td>
<td>$447.76</td>
<td>$46.15</td>
</tr>
<tr>
<td>Family</td>
<td>$47.12</td>
<td>$758.34</td>
<td>$805.46</td>
<td>$46.15</td>
</tr>
</tbody>
</table>