



# Health Plan Deductible: Overview

## Hampshire County Group Insurance Trust

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INSURANCE | BENEFITS | HR SOLUTIONS

## Basics of Deductibles and Copayments

### What is a deductible?

A deductible is the amount you must pay out of pocket for certain services before your insurance starts covering costs.

### How is my deductible satisfied?

The deductible is satisfied once per plan year. After meeting the amount, you won't have to pay it again until the next plan year.

### What are the Individual and Family Plan deductibles for HCGIT?

- **If you are on an Individual Plan; each person pays their own deductible of \$250.**
- **If you are on a Family Plan; each family member pays up to \$250, with a total family cap of \$500.** For example, if one family member incurs \$275 for an applicable service, \$250 will apply to the family deductible. If another family member has an applicable service costing \$300, \$250 will apply to the family deductible. The family will have met their \$500 deductible cap for the year.

### What is a copayment?

A copay is a fixed amount you pay for specific services after your applicable deductible has been met. Examples include, but are not limited to, payments for office visits, specialist visits, and urgent care as follows:

- **Primary Care Visit:** \$20
- **Specialist Visit Copay:** \$60
- **Urgent Care:** \$60
- **Emergency Room:** \$100

### What is an out-of-pocket maximum?

The out-of-pocket maximum is the maximum amount you will pay in a plan year for covered services. After reaching this amount, the insurance covers 100% of costs.

## Example Scenarios: Deductible & Copayment Applicability

Are there differences in what the deductible applies to between the HMO and PPO?

- **For HMO Blue New England:** The deductible applies to all services except office visits and emergency room services.
- **For Blue Care Elect Preferred PPO Plan:** The deductible applies to all services.

Service Type	Copayment	Example Scenario
Office Copay PCP	\$20	<p>A member visits their primary care physician for a routine checkup costing \$275.</p> <ul style="list-style-type: none"> <li>• <b>Under the HMO Blue plan,</b> they pay a \$20 copay for the visit, as the deductible does not apply to office visits.</li> <li>• <b>Under the Blue Care Elect Preferred PPO plan,</b> they must first pay their deductible (if not already met), followed by a \$20 copay.</li> </ul>
Emergency Room Visits	\$100	<p>A member goes to the emergency room due to an injury that costs \$1,200.</p> <ul style="list-style-type: none"> <li>• <b>Under the HMO Blue plan,</b> they pay a \$100 copay, as the deductible does not apply to emergency room visits.</li> <li>• <b>Under the Blue Care Elect Preferred PPO plan,</b> they must first pay their deductible (if not already met), followed by a \$100 copay.</li> </ul>

<b>Specialist Visits</b>	<b>\$60</b>	<p>A member sees a specialist for a condition, with the visit costing \$200.</p> <ul style="list-style-type: none"> <li>• Under the <b>HMO Blue plan</b>, they pay a \$60 copay for the visit, as the deductible does not apply to office visits.</li> <li>• Under the <b>Blue Care Elect Preferred PPO plan</b>, they must first pay their deductible (if not already met), followed by a \$60 copay.</li> </ul>
<b>Urgent Care Visits</b>	<b>\$60</b>	<p>A member visits an urgent care facility for a minor injury costing \$150.</p> <ul style="list-style-type: none"> <li>• Under the <b>HMO Blue plan</b>, they pay a \$60 copay for the visit, as the deductible does not apply to office visits.</li> <li>• Under the <b>Blue Care Elect Preferred PPO plan</b>, they must first pay their deductible (if not already met), followed by a \$60 copay.</li> </ul>
<b>Laboratory Services</b>	<b>Covered at 100 percent after deductible</b>	<p>A member has lab work costing \$400.</p> <ul style="list-style-type: none"> <li>• Under both the <b>HMO Blue plan</b> and the <b>Blue Care Elect Preferred PPO plan</b>, they must first pay their deductible (if not already met) before coverage applies to either plan option.</li> </ul>
<b>Inpatient</b>	<b>\$500</b>	<p>A member has an inpatient hospital stay costing \$8,000.</p>

		<ul style="list-style-type: none"> <li>Under both the <b>HMO Blue plan</b> and the <b>Blue Care Elect Preferred PPO plan</b>, they must first pay their deductible (if not already met), followed by a \$500 copay.</li> </ul>
<b>Outpatient</b>	<b>\$250</b>	<p>A member has an outpatient procedure costing \$4,000.</p> <ul style="list-style-type: none"> <li>Under both the <b>HMO Blue plan</b> and the <b>Blue Care Elect Preferred PPO plan</b>, they must first pay their deductible (if not already met), followed by a \$250 copay.</li> </ul>
<b>Preventive Visits</b>	<b>Preventive services for in-network providers are covered at 100%, with no member share or deductible applicable.</b>	Individuals or families who receive annual preventive screenings, such as vaccinations, physicals, or wellness checkups, may not need to make any out-of-pocket payments, even if their deductible has not been met.
<b>Prescription Medications</b>	<b>\$100 individual and \$200 family. Does not combine with the medical deductible.</b>	Members must first pay their deductible, then copay per drug category and supply.

## Appendix A: Deductible & Copay Summary by Plan

BCBSMA HMO BLUE NEW ENGLAND	
Network Benefits	Effective 7/1/26
Plan Year Plan Deductible <i>(Individual / Family)</i>	\$250 per Individual Not to exceed \$500 per Family <i>Network Benefits Only</i>
Office Copay PCP	\$20 Copay
Office Copay Specialist	\$60 Copay
Urgent Care	\$60 Copay
Emergency Room	\$100 Copay
Lab	Member pays \$250 Deductible, then covered at 100%
Inpatient	Member pays \$250 Deductible, then \$500 Inpatient Copay, then covered at 100%
Outpatient	Member pays \$250 Deductible, then \$250 Outpatient Copay, then covered at 100%
Plan Year Out of Pocket Maximum <i>(Individual / Family)</i>	\$5,000 / \$10,000

BCBSMA BLUE CARE ELECT PREFERRED PPO	
Current	Proposed
Plan Year Plan Deductible <i>(Individual / Family)</i>	\$250 / \$500 Network and Non-Network Combined
Office Copay PCP	Member pays \$250 Deductible, then \$20 PCP Copay, then covered at 100%
Office Copay Specialist	Member pays \$250 Deductible, then \$60 Specialist Copay, then covered at 100%
Urgent Care	Member pays \$250 Deductible, then \$60 Urgent Care Copay, then covered at 100%
Emergency Room	Member pays \$250 Deductible, then \$100 ER Copay, then covered at 100%

<b>Lab</b>	Member pays \$250 Deductible, then covered at 100%
<b>Inpatient</b>	Member pays \$250 Deductible, then \$500 Inpatient Copay, then covered at 100%
<b>Outpatient</b>	Member pays \$250 Deductible, then \$250 Outpatient Copay, then covered at 100%
<b>Plan Year Out of Pocket Maximum (Individual / Family)</b>	\$5,000 / \$10,000

