

Sentara Health Insurance Summary of Costs and Benefits January 1, 2026 to December 31, 2026

THER	Rates Per Pay Period (20 Paydates)				
	CDHP HSA Plan	POS Plan	HMO Plan		
Employee Only	\$10.00	\$23.17	\$37.57		
Employee + Spouse	\$65.00	\$96.35	\$313.87		
Employee + Child(ren)	\$50.00	\$70.50	\$373.12		
Employee + Family	\$150.00	\$333.45	\$1,021.07		

Plan Details	CDHP HSA Plan	POS Plan	HMO Plan
Deductible (Individual / Family)	\$3,400 / \$6,800	\$1,000 / \$2,000	\$250 / \$500
Non-network Deductible (Individual / Family)	None	\$1,500 / \$3,000	None
Out-of-Pocket Maximum (Individual / Family)	\$6,000 / \$12,000	\$6,000 / \$12,000	\$5,000 / \$10,000
Non-network Out-of-Pocket Max (Individual / Family)	None	\$8,000 / \$16,000	None
Non-network Coinsurance	N/A	Deductible, then 30% coinsurance	N/A
Primary Care / Specialist Office Visit	Deductible, then no charge	\$30 / \$60 copay	\$30 / \$60 copay
MD Live Virtual Visit*	\$0 copay	\$0 copay	\$0 copay
Urgent Care Visit	Deductible, then no charge	\$50 copay	\$50 copay
Emergency Room Visit	Deductible, then no charge	Deductible, then 20% coinsurance	\$350 copay
Maternity Care	Deductible, then no charge	\$350 copay	\$200 copay
Outpatient Lab / X-Ray	Deductible, then no charge	Deductible, then 20% coinsurance	\$50 copay
Complex Imaging (MRI, CAT, PET, etc)	Deductible, then no charge	Deductible, then 20% coinsurance	\$350 copay
Outpatient Surgery	Deductible, then no charge	Deductible, then 20% coinsurance	\$300 copay
Inpatient Hospital Facility	Deductible, then no charge	Deductible, then 20% coinsurance	Deductible, then 20% coinsurance
Prescription Deductible (Individual /Family)	Combined with Medical	\$150 / \$300**	\$150 / \$300**
Retail Prescription Drug Copays	After Deductible Tier 1 - \$15 Tier 2 - \$40 Tier 3 - \$50 Tier 4 - 20% to a max of \$200	Tier 1 - \$15 Tier 2 - \$40 Tier 3 - \$50 Tier 4 - 20% to a max of \$200	Tier 1 - \$15 Tier 2 - \$40 Tier 3 - \$50 Tier 4 - 20% to a max of \$200

^{*}The \$0 MD Live fee is for routine medical conditions. The fee for Specialist services such as Mental Health or Dermatology services may vary.

^{**}Prescription drug deductible does not apply to tier 1 drugs.