HDHP Plan Comparison 2026 vs. 2027 (In-Network)

	2026 HDHP	2027 HDHP
Deductible (Individual /Family)	$1,700 / $3,400	$2,800 / $5,600
Out-of-Pocket Maximum (Individual/Family)	$3,400 / $6,800	$5,600 / $11,200
Annual HSA Contribution (Individual/Family)	$550 / $1,100	$1,000 / $2,000
Coinsurance (Plan/Member)	80% / 20%	70% / 30%
Wellness / Preventive Care	100%	100%
Primary Care Office Visit	80% after deductible	70% after deductible
Specialist Office Visit	80% after deductible	70% after deductible
Urgent Care Visit	80% after deductible	70% after deductible
Emergency Room	80% after deductible	70% after deductible
Outpatient Lab / X-Ray	80% after deductible	70% after deductible
Complex Imaging (MRI, CAT, PET)	80% after deductible	70% after deductible
Outpatient Surgical Facility	80% after deductible	70% after deductible
Inpatient Hospital Facility	80% after deductible	70% after deductible
Retail Prescription Drug Copays (Generic/Preferred/Non-Preferred/Specialty)	Wegman's: $0/$40/$80 Other: $10/$50/$100	Wegman's: $5/$40/$80 Other: $10/$50/$100/80% up to $250
Mail Order Prescription Drug Copays	2 copays per 90-day supply	2 copays per 90-day supply

This comparison summarizes St. John Fisher University's medical plan features. Every effort has been made to ensure that this information is accurate. However, legal documents and insurance contracts govern the medical plan. If this comparison differs from the official documents and contracts, the official documents and contracts will rule.