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

	2026 Hybrid	2027 Hybrid
Deductible (Individual/Family)	$400 / $1,200	$1,200 / $3,600
Out-of-Pocket Maximum (Individual/Family)	$2,300 / $6,900	$3,600 / $10,800
Coinsurance (Plan/Member)	80% / 20%	70% / 30%
Wellness / Preventive Care	100%	100%
Primary Care Office Visit	$30 copay	$40 copay
Specialist Office Visit	$50 copay	$60 copay
Urgent Care Visit	$40 copay	$60 copay
Emergency Room	$150 copay (waived if admitted)	$200 copay (waived if admitted)
Outpatient Lab / X-Ray	$50 copay	$60 copay
Complex Imaging (MRI, CAT, PET)	$50 copay	$150 copay
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: $5/$30/$50 w/ $0 Generics for children Other: $10/$40/$75	Wegman's: $5/$30/$50 w/ $0 Generics for children 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.