



CONTRACTORS HEALTH TRUST

Building Health Since 1968

Health Benefits Program

For Association Members of

**Colorado Contractors Association
and
Associated General Contractors of Colorado**



Hour Bank Premium / Eligibility

Choose an Hour Bank model that allows employer contributions based on hours worked (minimum applies) and allows workers to earn benefits based on hours worked. This model often pays for, and extends benefits through periods of temporary lay-offs or furlough and is ideal for compliance with Davis-Bacon prevailing benefit requirements.

Monthly Premium / Eligibility

- Flexible Premium Options: Hour Bank per hour rate, flat monthly rate for all employees, or Single/2 Party/Family rates

Choice

- Choose From Five Medical Plans
- Choose One or Two Medical Plan Deductibles
- All Plans Qualify for Optional Health Reimbursement Arrangement (HRA) Funding Methods
- One Plan Qualifies for a Health Savings Account (HSA) Option

Dental / Vision* (Optional)

Dental

- No Annual Deductible
- Annual Maximum Benefit \$1,000 per person
- Orthodontic Lifetime Maximum Benefit \$2,000
- 100% Preventive and Diagnostic (Preferred Option)
- 80% Basic Services
- 50% Major with additional Orthodontic Services to age 19

Vision

- \$15 Calendar Year Deductible Per Person Per Year
- Exam, Frames, Lenses - Special Allowances Apply for Contact Lenses and Maximum Allowed Benefits

For more information contact:

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Benefits Payable Before Deductible* - All Plans:

Certain in-network cancer screening, adult physicals and tests, immunization, well baby care, and other preventive services - 100%

Benefits After Co-Payment* – Plan 1, 2, 3 and 4 only:

Primary Care Physician Office Visit - \$30 Co-pay then paid 100%
 Specialist Office Visit or Urgent Care Facility - \$45 Co-pay then paid 100%
 Emergency Room - \$100 Co-pay in addition to Plan Deductible and Co-Insurance

Plan Choices	In and Out-of-Network Deductible Individual/Family	In-Network Co-Insurance	Out-of-Network Co-Insurance	Out of Pocket Maximum	
				In-Network	Out-of-Network
Plan Option 1 HRA Compatible	\$750 / \$1,500 Certain preventive services are not subject to the deductible	80% after deductible certain preventive services are paid at 100%	60% after deductible	Individual/Family \$2,000/\$4,000	Individual/Family \$4,000/\$8,000
Plan Option 2 HRA Compatible	\$1,000/\$2,000 Certain preventive services are not subject to the deductible	80% after deductible certain preventive services are paid at 100%	60% after deductible	Individual/Family \$2,000/\$4,000	Individual/Family \$4,000/\$8,000
Plan Option 3 HRA Compatible	\$1,500/\$3,000 Certain preventive services are not subject to the deductible	80% after deductible certain preventive services are paid at 100%	60% after deductible	Individual/Family \$2,000/\$4,000	Individual/Family \$4,000/\$8,000
Plan Option 4 HRA Compatible	\$2,500/\$5,000 Certain preventive services are not subject to the deductible	80% after deductible certain preventive services are paid at 100%	60% after deductible	Individual/Family \$2,000/\$4,000	Individual/Family \$4,000/\$8,000
Plan Option 5 HRA or HSA Compatible	\$3,000/\$6,000 Certain preventive services are not subject to the deductible	100% after deductible certain preventive services are paid at 100%	80% after deductible	Individual/Family \$0 / \$0	Individual/Family \$2,950/\$5,900

All covered In-Network charges including Rx are paid at 100% after you have met the deductible.

Prescription Drug Coverage* (Up to a 30 day supply)	Plans 1-4 Only	Plan 5
	Co-Insurance/Co-pay	Co-insurance
Generic	20% subject to a Minimum Co-pay of \$10	100% payable after deductible
Brand Formulary	30% subject to a Minimum Co-pay of \$20	100% payable after deductible
Brand Non-Formulary	50% subject to a Minimum Co-pay of \$40	100% payable after deductible

Mail Order Drugs (Up to a 90 day supply)	Plans 1-4 Only
	Co-Insurance/Co-pay
Generic	\$20 co-pay
Brand Formulary	\$40 co-pay
Brand Non-Formulary	\$80 co-pay
Specialty	\$75 co-pay

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*This is only a highlight of the Plan provisions. The actual Plan documents and policies shall prevail if there is any discrepancy between the statements in this brochure and the actual Plan documents and policies.