

Medical Plans



Group Medical Plans

What AvMed medical plans are offered?

- Jackson First HMO
- Jackson Select HMO
- Jackson Point of Service (POS)

NOTE: Members are required to select a primary care physician if selecting health insurance.

Jackson First HMO

Plan offers “no referral needed” to access the Jackson-only network. Employee and covered dependents must reside in Miami-Dade, Broward or Palm Beach Counties. The plan provides 100% of benefits for services performed at Jackson Health System facilities and University of Miami (except emergency care) or by any AvMed physician with admitting privileges at Jackson Health System. Concierge services are available under this plan.

- No deductibles
- No copays
- No coinsurance
- Concierge services

NEW: Jackson First Rider (\$45 per pay) - Designed for dependents living outside of the South Florida coverage service area. Offers nationwide network for dependents residing outside the service area. “Away from Home” form required.

Jackson Select HMO

Plan offers “no referral needed” to access the Jackson Select HMO Network of providers. The plan provides 100% of benefits for covered charges after applicable copays. Concierge services and SmartShopper benefits are available under this plan. Provides an “Away from Home” wraparound program for dependents who reside outside of the coverage area.

Jackson Point of Service (POS)

IN NETWORK - Plan offers “no referral needed” to access an expanded network of providers. The plan provides 100% of benefits for covered charges after the applicable copayments. SmartShopper benefits are available under this plan.

OUT OF NETWORK - A fee for service program that provides you the freedom to use any physician or accredited hospital of your choice outside of the network. Payments are based on Maximum Allowable Payment (MAP) charges. Providers who do not participate in the network may balance bill you for the amount which exceeds MAP. Coverage is subject to deductibles and coinsurance.

Why I Choose

Jackson First

“I enrolled in Jackson First when it was initially rolled out.

The plan affords me the opportunity to support my employer, which is important to me. Just as important, customer service, appointment availability, a vast network of physicians to accommodate all my medical needs, and the ease of connecting with a Jackson concierge when help is needed. As a Jackson employee for 12 years, I’ve made a lot of friends and fostered many professional relationships. Being able to entrust my health care in the hands of these same capable individuals gives me a sense of security.”



Dorothy L. Milton

To learn more about the Jackson First HMO or to enroll online, visit JacksonBenefits.org.

Medical Plans

Understanding Your Medical Options

Is my group medical coverage guaranteed?

Yes. Enrollment in any of the group medical plans is guaranteed for those eligible.

How do I pay for these medical plans?

Medical plans are paid through automatic, biweekly payroll deductions. Premiums are deducted from your salary on a pretax* basis to pay for any medical insurance premiums before Federal Income and Social Security taxes are calculated. This reduces your taxable income and increases your spendable income.

How much do the plans cost?

Premiums vary according to the plan you select. Jackson Health System will pay the cost of your personal coverage in the Jackson First HMO medical plan. Dependent premiums are your responsibility and will be deducted from your biweekly check.

Eligible employees will be required to pay a portion of the employees premium for the Jackson Select HMO and Jackson Point of Service (POS) plans.

*Note: Premiums are deducted from your salary on a post-tax basis for Domestic Partners and Adult Children.



Did You Complete Your Wellness Visit?

Employees have the Fiscal Year 2022 (Oct. 1, 2021 - Sept. 30, 2022) to complete an annual wellness visit with their respective provider; employees who do not complete their wellness visit will see an increase of \$50 bi-weekly for the 2023 Plan Year.

CLICK TO DOWNLOAD THE ANNUAL WELLNESS VISIT - PROVIDER VERIFICATION FORM >>

Why I Choose Jackson First

“A few years ago, my son was born for less than the cost of going out to dinner. Seems like a shocking statement, right? It shocked me too. Raising a family of four isn't easy on a resident's salary. Jackson First made that possible. From covering prenatal care to the delivery itself, and every follow up visit thereafter, few things in training have been as easy as our insurance policy. Thank you for lifting some weight off our shoulders!”

Josef Newman

To learn more about the Jackson First HMO or to enroll online, visit JacksonBenefits.org.

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Medical Biweekly Rates

AvMed Employee, Spouse,
Domestic Partner & Child(ren)

	WELLNESS MEDICAL PREMIUM		
	JACKSON FIRST HMO PLAN	JACKSON SELECT HMO PLAN	JACKSON POS PLAN
Employee	\$0.00	\$50.00	\$150.00
Employee + Child(ren) [†]	\$105.00	\$170.92	\$381.35
Employee + Spouse/DP	\$120.00	\$201.30	\$459.62
Family [†]	\$160.00	\$286.34	\$794.53
Jackson First Rider (for dependents) *	\$45.00		

[†] Option also applies to Adult Child(ren) (AC) between 26 through 30 years of age and/or Child(ren) of a Domestic Partner (CDP)

* Offers nationwide network for dependents residing outside the service area.

Premiums above are subject to the completion of your Annual Wellness. If you did not complete your wellness visit, your premiums will include an additional \$50 increase bi-weekly.

Why I Choose Jackson First

“When it was time to choose an insurance plan for my healthcare needs, choosing Jackson First was a no brainer.

The fact that I would have access to top-notch specialists and facilities throughout the Jackson/ UHealth network was important to me. Furthermore, the ability to see a specialist without a referral made addressing my healthcare needs seamless. If that weren't enough, not having any out of pocket expenses and/or deductibles was the cherry on top. I highly recommended the Jackson First plan to anyone debating between the other options as you won't be disappointed in doing so.”

Cleiton Santos



“One of things I love most about working at Jackson is working alongside our diverse, caring, and dedicated nurses, especially within the pediatric and maternity units. When it came to choosing the best insurance plan for my prenatal care, there was no better choice than Jackson First. As a breastfeeding-friendly health system with physicians prepared for routine to highly complex births, I knew the providers on the Jackson First network would offer the best care possible to my family and me.”



Suzzette Curia

To learn more about the Jackson First HMO or to enroll online, visit JacksonBenefits.org.

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Understanding Your Medical Options

2022 MEDICAL PLAN CHARTS - avmed.org/jhs

	JACKSON FIRST HMO	JACKSON SELECT HMO
	<ul style="list-style-type: none"> Freedom to choose from a variety of JHS and UM healthcare professionals. Jackson First Rider Wraparound: separate plan with buy-up option of \$45 per pay period; designed for dependents living outside of South Florida. Access to a concierge appointment scheduling Savings of up to \$3,284 annually 	<p>HMO Plan offered to Jackson Health System employees and covered dependents who reside or work in Miami-Dade, Broward and Palm Beach counties. Members who enroll in the JHS Select Network plan must receive all medical care except for emergency and urgent care services through an AvMed contracted Jackson Health System Select HMO Network Provider.</p> <ul style="list-style-type: none"> Offers nationwide network for dependents residing outside of service area
Concierge Services	Concierge Services Available	Concierge Services and Smartshopper Benefits Are Available
Deductibles	\$0	\$0
PCP Office Visits	\$0	\$15
Specialist Office Visits	\$0	\$30
Preventive Services	\$0	\$0
Pediatrician Office Visits	\$0	\$15
Routine Physical	\$0	\$0
Obstetrical/Gynecological	\$0	\$30
Maternity	\$0	\$30 Copay for First Visit. No Charge For Subsequent Visits
Preventive Mammogram/Pap Smears	\$0	\$0
Hospitalization - In-Patient	Benefits Covered At 100%	Benefits payable at 100% after \$100 copayment
Urgent Care	\$50 participating; \$100 Non-Participating \$5 copay/visit at Uhealth Jackson Urgent Care Centers	
Emergency	\$100 copay/Visit; \$50 copay for age 17 and under (Waived if Admitted)	\$100 copay/Visit; \$50 copay for age 17 and under (Waived if Admitted)
Outpatient Surgery	\$0	\$200

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2022 MEDICAL PLAN CHARTS - avmed.org/jhs

	JACKSON POS IN NETWORK	JACKSON POS OUT OF NETWORK
	Access to an expanded network of providers in the state of Florida. In addition, AvMed offers a nationwide network for those residing outside of the service area.	A fee for service program that provides Jackson Health System employees and covered dependents the freedom to use any physician or accredited hospital of their choice outside of the network. Payments are based on maximum allowable payment (MAP) charges. Providers who do not participate in the network may balance bill members for the amount which exceeds MAP. Coverage is subject to deductibles and coinsurance.
Concierge Services	Smartshopper Benefits Are Available	Smartshopper Benefits Are Available
Deductibles	\$0	\$200 Deductible Individual/\$500 Family
PCP Office Visits	\$15	Plan Pays 70% Coinsurance, After Deductible Is Met
Specialist Office Visits	\$30	Plan Pays 70% Coinsurance, After Deductible Is Met
Preventive Services	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
Pediatrician Office Visits	\$15	Plan Pays 70% Coinsurance, After Deductible Is Met
Routine Physical	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
Obstetrical/Gynecological	\$30	Plan Pays 70% Coinsurance, After Deductible Is Met
Maternity	\$30 copay for first visit. No charge for subsequent visits.	Plan Pays 70% Coinsurance, After Deductible Is Met
Preventive Mammogram/Pap Smears	\$0	Plan Pays 70% Coinsurance, After Deductible Is Met
Hospitalization - In-Patient	Benefits payable at 100% after \$200 copayment	Plan Pays 70% Coinsurance, After Deductible Is Met
Urgent Care	\$100 at both participating and non-participating; \$5 copay/visit at Uhealth Jackson Urgent Care Centers	
Emergency	\$150 copay/\$100 for age 17 and under (Waived if Admitted)	\$150 copay/\$100 for age 17 and under (Waived if Admitted)
Outpatient Surgery	Benefits payable at 100% after \$200 copayment	Plan Pays 70% Coinsurance, After Deductible Is Met

Chart continued on next page.

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	JACKSON FIRST HMO	JACKSON SELECT HMO
Prescription Drugs	If member/physician selects brand when generic is available, member pays difference in cost plus brand copayment. Participating pharmacy retail are CVS, Target, Navarro and Publix (in addition to JHS pharmacies). No charge for generic medications under Jackson First HMO for employees using the Jackson pharmacy.	
Participating Network Pharmacy	\$15 Generic/\$25 Brand/ \$40 Non-Preferred For 30-Day Supply	\$15 Generic/\$25 Brand/ \$40 Non-Preferred For 30-Day Supply
Mail Order	\$30 Generic/\$50 Brand/ \$80 Non-Preferred For 90-Day Supply	\$30 Generic/\$50 Brand/ \$80 Non-Preferred For 90-Day Supply
Specialty Rx	\$50 For 30-Day Supply Through Specialty Pharmacy	\$50 For 30-Day Supply Through Specialty Pharmacy
Substance Abuse Treatment		
Inpatient	\$0	\$100
Outpatient	\$0	\$15 per visit
Behavioral Health		
Inpatient	\$0	\$100
Outpatient	\$0	\$15 per visit
Durable Medical Equipment (DME)	\$50 Per Episode Per Illness	\$50 Per Episode Per Illness
Coverage Area	Jackson Health System; University of Miami • Dependents residing outside the network area may be covered through the PCHS network by electing to buy into the Jackson First Rider. Must complete a "Away From Home" form	Network includes over 33 hospitals and over 7,000 physicians. All AvMed participating providers with admitting privileges at one of the covered hospitals are also covered in the Select HMO. Dependents residing outside the network area may be covered through the PHCS network (Must complete "Away From Home" form for approval).

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2022 MEDICAL PLAN CHARTS - avmed.org/jhs

	JACKSON POS IN NETWORK	JACKSON POS OUT OF NETWORK
Prescription Drugs	Includes prescription contraceptives at participating pharmacies nationwide. Participating pharmacy retail are CVS, Target, Navarro and Publix (in addition to JHS pharmacies). If member/physician selects Brand when Generic is available, member pays difference in cost plus Brand copayment.	
Participating Network Pharmacy	\$15 Generic/\$40 Brand/ \$55 Non-Preferred For 30-Day Supply	Plan Pays 70% Coinsurance, After Deductible Is Met
Mail Order	\$30 Generic/\$80 Brand/\$110 Non-Preferred For 90-Day Supply	Plan Pays 70% Coinsurance, After Deductible Is Met
Specialty Rx	\$100 For 30-Day Supply Through Specialty Pharmacy	Plan Pays 70% Coinsurance, After Deductible Is Met
Substance Abuse Treatment		
Inpatient	Benefits Paid At 100%, After \$200 Copayment	Plan Pays 70% Coinsurance, After Deductible Is Met
Outpatient	\$15 per visit	Plan Pays 70% Coinsurance, After Deductible Is Met
Behavioral Health		
Inpatient	Benefits Paid At 100%, After \$200 Copayment	Plan Pays 70% Coinsurance, After Deductible Is Met
Outpatient	\$15 per visit	Plan Pays 70% Coinsurance, After Deductible Is Met
Durable Medical Equipment (DME)	DME And Orthotic Covered At 100%. External Prosthetic Appliance - No Charge After \$200 Deductible Per Contract Year.	Plan Pays 70% Coinsurance, After Deductible In MET For DME and Orthotic. External Prosthetic Appliance Not Covered Out Of Network.
Coverage Area	Covers hospitals excluded on the Select Plan. Dependents residing outside the network area may be covered through the PHCS network (Must complete "Away From Home" form for approval).	N/A