

NCFA Health Plan Overview

NCFA is pleased to offer its members medical, dental, and vision coverage through BlueCross and BlueShield of NC. As a member of the association, you have the opportunity to purchase health insurance for you and your family. Coverage begins on January 1, 2026 and renews January 1, 2027.

MEDICAL PLAN OPTIONS

BCBS NC

	PLATINUM	GOLD	SILVER	HDHP H.S.A
	IN-NETWORK	IN-NETWORK	IN-NETWORK	IN-NETWORK
Deductible				
Individual	\$1,000	\$3,500	\$5,000	\$5,000
Family	\$2,000	\$7,000	\$10,000	\$10,000
Out-of-Pocket Max.				
Individual	\$3,000	\$7,000	\$9,450	\$8,050
Family	\$6,000	\$14,000	\$18,900	\$16,100
Inpatient Services				
Inpatient Facility	20% Coinsurance	30% Coinsurance	30% Coinsurance	30% Coinsurance
Physician Office Visits				
Primary Care	\$15 Copay	\$25 Copay	\$50 Copay	30% Coinsurance
Specialist Office	\$30 Copay	\$50 Copay	30% Coinsurance	30% Coinsurance
Urgent Care	\$30 Copay	\$50 Copay	\$100 Copay	30% Coinsurance
Outpatient Services				
Outpatient Surgical	20% Coinsurance	30% Coinsurance	30% Coinsurance	30% Coinsurance

DENTAL PLAN OPTIONS

BCBS NC

	DENTAL ENHANCED PLAN	DENTAL BASIC PLAN
Annual Deductible	\$50 single / \$100 family	\$50 single / \$150 family
Annual Maximum per Individual	\$1,500	\$1,000
Diagnostic & Preventive		
Cleanings, Space Maintainers, Sealants	100%	100%
Basic Services		
Fillings, Simple Extractions, Oral Surgery, Endodontics, Periodontics	80%	80%
Major Services		
Fixed and removable prosthodontics	50%	50%
Type IV – Orthodontic Services	50% (Child)	N/A

DENTAL INSURANCE EMPLOYEE MONTHLY CONTRIBUTIONS

Single	\$ 51.57	\$ 45.18
Employee + Spouse	\$ 103.14	\$ 90.36
Employee + Child	\$ 123.82	\$ 108.20
Family	\$ 189.31	\$ 165.39

NCFA Health Plan, Continued

VISION PLAN

BCBS NC

	IN-NETWORK
Exam Copy	\$10 Copay
Contact Lens	
Elective	\$130 Allowance + 15% off balance
Medically Necessary	Covered in full
Lenses	\$25 Copay
Frame Allowance	\$130 Allowance + 20% off balance
Lens Upgrades	
PolyCarbonate (single vision/multi-vision)	\$40
Anti-Reflective (single vision/multi-vision)	\$45—20% off
Scratch Resistant (single vision/multi-vision)	\$15
Transitions / Photochromic (single vision/multi-vision)	\$75
VISION INSURANCE EMPLOYEE MONTHLY CONTRIBUTIONS	
Employee Only	\$ 12.75
Employee + Spouse	\$ 20.63
Employee + Child(ren)	\$ 21.50
Employee + Family	\$ 29.73

FAQ

WHO IS ELIGIBLE FOR THE NCFA HEALTH PLAN?

Active NCFA members must have at least one common law employee to be eligible for the NCFA Health Plan. Sole proprietors without at least one common law employee are not eligible to participate in the plan. Please contact CAC Agency with questions.

WHAT IF I'M ALREADY OFFERING A GROUP HEALTH PLAN TO MY EMPLOYEES?

You may transfer to the NCFA at your current plan's renewal or at NCFAs open enrollment period. To begin this process please reach out to CAC group at ncfa@cacgroup.com. Please note that you must notify all impacted employees of this change and allow them the option to opt out. Employees who wish to change their benefit elections must do so through the Simon portal.

WHEN AND HOW DO I ENROLL?

The NCFA Health Plan renews January 1, and our Open Enrollment is held in November each year. Open Enrollment is the one time per year we are allowed to onboard new members to the plan. If your company is an existing plan member and has a new hire, you have the ability to enroll them in the SIMON portal at ncfa.simon365.com.

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