

## BlueCross BlueShield Plan Information 2023-2024

	High Deductible Blue Choice PPO	Platinum Blue Essentials HMO	Gold Blue Essentials HMO
<b>Deductible (Individual / Family)</b>	<b>\$3,000 / \$9,000</b>	<b>\$1,250/<b>\$3,500</b></b>	<b>\$3,500 / <b>\$10,500</b></b>
<b>Max Out of Pocket (Individual/Family)</b>	<b>\$5,000 / \$15,000</b>	<b>\$5,000/\$15,000</b>	<b><b>\$7,500</b>/\$18,500</b>
<b>Coinsurance</b>	<b>20%</b>	<b>10%</b>	<b>30%</b>
<b>Physician Services</b>			
<b>Primary Care</b>	<b>Deductible + 20%</b>	<b><b>\$30</b></b>	<b><b>\$35</b></b>
<b>Specialist</b>	<b>Deductible + 20%</b>	<b><b>\$60</b></b>	<b><b>\$70</b></b>
<b>Virtual Visits - MDLIVE</b>	<b>Deductible + 20%</b>	<b>\$0</b>	<b>\$0</b>
<b>Other Services</b>			
<b>Inpatient Hospitalization</b>	<b>Deductible + 20%</b>	<b>10% Coinsurance after \$500 Ded</b>	<b>30% Coinsurance after Ded</b>
<b>Outpatient Surgery</b>	<b>Deductible + 20%</b>	<b>10% Coinsurance after Ded</b>	<b>30% Coinsurance after Ded</b>
<b>Emergency Room</b>	<b>Deductible + 20%</b>	<b>10% coinsurance after \$500 Copay</b>	<b>30% coinsurance after \$500 Copay</b>
<b>Urgent Care</b>	<b>Deductible + 20%</b>	<b>\$75 Copay</b>	<b>\$100</b>
<b>Complex Imaging</b>	<b>Deductible + 20%</b>	<b>10% Coinsurance after Ded</b>	<b>30% Coinsurance after Ded</b>
<b>Prescription Drugs</b>			
<b>Rx Deductible</b>	<b>Integrated with Medical</b>	<b>\$250</b>	<b>\$500</b>
<b>Generic</b>	<b>20% After Deductible</b>	<b><b>\$5</b></b>	<b><b>\$15</b></b>
<b>Preferred Brand Name</b>	<b>30% After Deductible</b>	<b><b>\$40</b></b>	<b><b>\$60</b></b>
<b>Non-Preferred brand name</b>	<b>50% After Deductible</b>	<b>\$80</b>	<b>\$130</b>
<b>Specialty</b>	<b>Covered</b>	<b>\$500 Copay</b>	<b>\$500 Copay</b>
<b>Mail Order - 90-day supply</b>	<b>2.5x Retail</b>	<b>2.5x retail</b>	<b>2.5x retail</b>
<b><i>Out of Network</i></b>			
<b><i>Deductible- Ind / Family</i></b>	<b>\$6,000/\$18,000</b>	<b>Not Covered</b>	<b>Not Covered</b>
<b><i>Maximum Out of Pocket - Ind / Family</i></b>	<b>\$18,000/\$54,000</b>	<b>Not Covered</b>	<b>Not Covered</b>
<b><i>Coinsurance</i></b>	<b>50%</b>	<b>Not Covered</b>	<b>Not Covered</b>