

BCBS Plan Options Comparison at a Glance

Benefit	Enhanced Plan (PPO) Embedded (Individual Based)***		Basic Plan (HSA) Aggregate (Family Based)**		BlueHPN ₁ Embedded ***
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network
Individual Deductible	\$750	\$1,500	\$2,500	\$2,500	\$1,500
Family Deductible	\$1,500	\$3,000	\$5,000	\$5,000	\$3,000
HSA — Employer Contribution	N/A	N/A	\$500 Ind/\$1,000 Family	N/A	N/A
Individual Out-of-Pocket (OPX)Max	\$5,000	\$10,000	\$5,950	\$11,900	\$5,500
Family Out-of-Pocket (OPX) Max	\$10,000	\$20,000	\$9,450	\$23,800	\$11,000
Office Visit (PCP/Specialty)	80%*	50%*	80%*	60%*	\$25/\$50 PCP/Specialist
Preventive Care	100%	50%	100%	60%	100%
Emergency Room	80%* after \$150 ER copay		80%*		100% after \$250 ER copay
Inpatient Admission	80%* after \$250 inpatient deductible per admission	50%* after \$500 inpatient deductible per admission	80%*	60%*	100%* after \$250 inpatient deductible per admission
Virtual Visit by MDLIVE (\$48 visit)	80%*		80%*		Not Covered
All Other Covered Services	80%*	50%*	80%*	60%*	80%*
Pharmacy (ESI)	\$10/\$40/\$60	50%*	80%*	60%	\$10/\$40/\$60

¹ No coverage for out-of-network care, except in emergency/urgent situation

* After deductible

**Aggregate: Entire family limit (deductible or OOP) must be met before benefits apply to any individual. This amount can be met by any one individual or combination of individuals on the plan. Aggregate plans have an individual limit that applies to self only populations; however, a family limit applies to anyone other than self only (2 or more people on the plan.)

*** Embedded: Once a person meets individual amount, no more (deductible or OPX) is required for that individual. No participant will contribute more than the individual amount to the family amount.