

## COMPONENTS OF GROUP PLAN DESIGN



## ESSENTIAL HEALTH BENEFITS CATEGORIES

New small group plans with plan years beginning on or after January 1, 2014, must cover the following Essential Health Benefits categories to a benchmark level of coverage established by the state:

- Ambulatory patient services
- Hospitalization
- Mental health and substance use disorder services
- Rehabilitative and habilitative services and devices
- Preventive and wellness services and chronic disease management
- Emergency services
- Maternity and newborn care
- Prescription drugs
- Laboratory services
- Pediatric services including oral and vision

**Pediatric Dental and Vision** services will be offered to children under the age of 19; services include dental and vision checkups, as well as one pair of glasses per year. These services are integrated into all small group medical plans.

**Prescription Drugs** will be offered with cost sharing within all plans in the marketplace. The new formularies being offered with our plans will cover a larger list of drugs, but may offer only one drug-coverage list per plan.

## ACTUARIAL VALUE AND METAL LEVELS

Under health care reform, insurance companies must define the level of health care costs a particular plan will pay (on average) for covered benefits. To make it easier to understand, the government established metal levels and requires that plans meet the actuarial value in a given metal level.

	Average Coverage Level (Actuarial Value)	Out-of-Pocket Costs	Premiums
Platinum Plans	90%	Lowest	Highest
Gold Plans	80%	Low	High
Silver Plans	70%	Moderate	Moderate
Bronze Plans	60%	High	Low

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**PPO BLUE**  
For Groups of 50 or Fewer Employees  
Western Pennsylvania Region



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## PPO BLUE

PPO Blue offers your clients and their employees broad access to the largest selection of providers, doctors and hospitals. With plan designs to meet the unique needs of their businesses and options across all metal levels, your clients can find a solution to balance their budget and health care preferences.

**Shared Cost** plans offer a variety of monthly premiums across metal levels with fixed copayments on services such as doctor's office visits. These plans offer employees predictable costs that are easier to work into their own budgets.

**Health Savings** plans are high deductible plans that offer lower monthly premiums and involve your employees in their health care decisions. Additionally, clients choosing Health Savings plan options can provide employees with the chance to open a tax-advantaged Health Savings Account (HSA) for greater control and savings. »

# 2014 PPO BLUE

For Groups of 50 or Fewer Employees  
Western Pennsylvania Region

MEDICAL COVERAGE																	HEALTH SPENDING ACCOUNTS		PRESCRIPTIONS
Medical Deductible		Deductible Includes Prescription & Medical	Plan Payment Level (Coinsurance) After Deductible		Out-of-Pocket Maximum		Emergency Room	Urgent Care	PCP	Retail Clinic	Telemedicine	Specialist <sup>1</sup>	Imaging	X-ray & Diagnostic/Laboratory (Outpatient & Professional)	Skilled Nursing Facility	Availability/Employer Contribution		HCR Comprehensive/Incentive	
In-Network (2x Fam)	Out-of-Network (2x Fam)		In-Network	Out-of-Network	In-Network (2x Fam)	Out-of-Network (2x Fam)		In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	In-Network	HRA	HSA	Generic/Brand/Non-Preferred		
<b>PLATINUM</b>																			
<b>Shared Cost PPO \$0</b>	\$0	\$500	NO	100%	80%	\$750	\$1,500	\$100	\$40	\$20	\$20	\$15	\$35	\$50	\$35	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>Shared Cost PPO \$250</b>	\$250	\$500	NO	100%	80%	\$1,000	\$2,000	\$100	\$40	\$20	\$20	\$15	\$35	\$50	\$35	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>GOLD</b>																			
<b>Shared Cost PPO \$500</b>	\$500	\$1,000	NO	90%	70%	\$2,000	\$4,000	\$125	\$60	\$30	\$30	\$20	\$50	\$100	\$50	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>Shared Cost PPO \$750</b>	\$750	\$1,500	NO	90%	70%	\$2,250	\$4,500	\$125	\$60	\$30	\$30	\$20	\$50	\$100	\$50	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>Shared Cost PPO \$1000</b>	\$1,000	\$2,000	NO	90%	70%	\$2,500	\$5,000	\$125	\$60	\$30	\$30	\$20	\$50	\$100	\$50	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>Shared Cost PPO \$1500</b>	\$1,500	\$3,000	NO	90%	70%	\$2,800	\$5,000	\$125	\$60	\$30	\$30	\$20	\$50	\$100	\$50	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70
<b>Shared Cost PPO \$2000 HRA</b>	\$2,000	\$4,000	NO	90%	70%	\$4,000	\$8,000	\$125	\$60	\$30	\$30	\$20	\$50	\$100	\$50	\$0	YES <sup>2</sup> \$500	NO <sup>2</sup>	\$8/\$40/\$70
<b>SILVER</b>																			
<b>Shared Cost PPO \$1500 Integrated Rx</b>	\$1,500	\$3,000	YES	90%	70%	\$6,350	\$12,700	\$150	\$75	\$40	\$40	\$20	\$60	\$150	\$60	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70 <sup>3</sup>
<b>Shared Cost PPO \$1750</b>	\$1,750	\$3,500	YES	90%	70%	\$6,350	\$12,700	\$150	\$75	\$40	\$40	\$20	\$60	\$150	\$60	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70 <sup>3</sup>
<b>Shared Cost PPO \$2000</b>	\$2,000	\$4,000	YES	90%	70%	\$6,350	\$12,700	\$150	\$75	\$40	\$40	\$20	\$60	\$150	\$60	\$0	NO <sup>2</sup>	NO <sup>2</sup>	\$8/\$40/\$70 <sup>3</sup>
<b>BRONZE</b>																			
<b>Health Savings PPO Q\$3500</b>	\$3,500	\$7,000	YES	80%	60%	\$6,350	\$12,700	20% <sup>3</sup>	20% <sup>3</sup>	\$60	20% <sup>3</sup>	\$20	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	NO <sup>2</sup>	YES <sup>2</sup> \$0	30% <sup>3</sup>
<b>Health Savings PPO Q\$4000</b>	\$4,000	\$8,000	YES	80%	60%	\$6,350	\$12,700	20% <sup>3</sup>	20% <sup>3</sup>	\$60	20% <sup>3</sup>	\$20	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	20% <sup>3</sup>	NO <sup>2</sup>	YES <sup>2</sup> \$0	30% <sup>3</sup>

<sup>1</sup>Specialist copayment also applies to mental health, behavioral health and substance abuse visits.

<sup>2</sup>Employer contributions in amounts other than those listed may result in actuarial value changes that may impact compliance as a Qualified Health Plan.

<sup>3</sup>Figure represents member coinsurance or copayment after deductible.