



Freedom Blue PPO (Western Pennsylvania)

		Freedom Blue PPO ValueRx	Freedom Blue PPO Select	Freedom Blue PPO Classic	
HEALTH	BASIC PLAN COSTS	Monthly Plan Premium	SW: \$79.50 WC: \$69.50	SW: \$174.50 WC: \$127.50	SW: \$299.50 WC: \$269.50
		Out-of-Pocket Maximum	\$6,700 / \$10,000	\$6,700 / \$10,000	\$6,700 / \$10,000
		Out-of-Network	30% OON Coinsurance (unless otherwise noted)	30% OON Coinsurance	30% OON Coinsurance
	PHYSICIAN SERVICES	Doctor Office Visit	\$15 IN; \$20 OON	\$10 IN; \$20 OON	\$5 IN; \$10 OON
		Specialist Office Visit	\$40 IN; \$45 OON	\$30 IN; \$45 OON	\$25 IN; \$40 OON
		Lab & Diagnostic Test	Office/Lab: \$5 Copay Outpatient: \$15 Copay	Office/Lab: \$0 Copay Outpatient: \$10 Copay	Covered in Full
		X-rays/Advanced Imaging	\$50 X-Ray/\$200 Advanced Imaging	\$40 X-Ray/\$150 Advanced Imaging	\$20 X-Ray/\$100 Advanced Imaging
		Preventative Testings & Screenings	Covered In Full	Covered In Full	Covered In Full
	FACILITY SERVICES	Outpatient Surgery	ASC: \$200 Copay Facility: \$300 Copay	ASC: \$150 Copay Facility: \$250 Copay	ASC: \$150 Copay Facility: \$250 Copay
		Emergency Room	\$75 Copay	\$75 Copay	\$75 Copay
		Inpatient Hospital Stay	\$250/day (days 1-5)/admit OON: 10% coinsurance	\$200/day (days 1-5)/admit	\$125/day (days 1-5)/admit
		Skilled Nursing Facility (days 1-100 per benefit period per admit)	\$0/day (days 1-20) \$160/day (days 21-100)	\$0/day (days 1-20) \$160/day (days 21-100)	\$0/day (days 1-20) \$160/day (days 21-100)
	ADDITIONAL BENEFITS	Routine Vision (annually)	\$0 Copay for routine eye exam. Standard Eyeglass lenses and frames or contact lenses are covered in full. A \$100 benefit maximum applies to non-standard frames and a \$100 benefit maximum for specialty contact lenses. \$200 benefit maximum for post cataract eyewear.		
		Routine Hearing (2 hearing aids per year)	TruHearing Chime 500: \$699 copay per aid TruHearing Chime 900: \$999 copay per aid	TruHearing Chime 500: \$699 copay per aid TruHearing Chime 900: \$999 copay per aid	TruHearing Chime 500: \$699 copay per aid TruHearing Chime 900: \$999 copay per aid
		Routine Dental	Office Visit: \$30 Copay (1 every calendar year) X-Ray: \$25 Copay (1 every calendar year)	Office Visit: \$30 Copay (1 every calendar year) X-Ray: \$25 Copay (1 every calendar year)	Office Visit: \$20 Copay (1 every calendar year) X-Ray: \$20 Copay (1 every calendar year)
		Routine Chiropractic	\$20 Copay (8 visits)	\$20 Copay (8 visits)	\$20 Copay (8 visits)
		Routine Podiatry	\$40 Copay (10 visits)	\$30 Copay (10 visits)	\$25 Copay (10 visits)
	OTHER PLAN COVERAGE	Ambulance (per one way trip)	\$125 Copay	\$150 Copay	\$125 Copay
		Durable Medical Equipment (including oxygen)	20% Coinsurance	20% Coinsurance	20% Coinsurance
	DRUG	PART D DRUGS (UP TO 31 DAYS)	Initial Coverage	\$3 Pref. Gen, \$15 Non-Pref. Gen, \$47 Pref. Brand, 45% Non-Pref Brand, 33% Specialty	\$3 Pref. Gen, \$15 Non-Pref. Gen, \$47 Pref. Brand, 45% Non-Pref Brand, 33% Specialty
Coverage Gap			Generics (58% coins) Brand (45% coins including 50% discount)	Generics (58% coins) Brand (45% coins including 50% discount)	Generics: Tier 1 (\$3) Generics: Tier 2 (\$15) Generics Tiers 3-5 (58% coins) Brand (45% coins including 50% discount)
Catastrophic Coverage			Greater of: 5% or \$2.95 Gen/Pref. Multi Source or \$7.40 for all others	Greater of: 5% or \$2.95 Gen/Pref. Multi Source or \$7.40 for all others	Greater of: 5% or \$2.95 Gen/Pref. Multi Source or \$7.40 for all others
Mail Order Drugs (up to 90 day supply; specialty tier up to 31 days supply)			\$7.50 Pref. Gen, \$37.50 Non-Pref. Gen, \$117.50 Pref. Brand, 45% Non-Pref Brand, 33% Specialty	\$7.50 Pref. Gen, \$37.50 Non-Pref. Gen, \$117.50 Pref. Brand, 45% Non-Pref Brand, 33% Specialty	\$7.50 Pref. Gen, \$37.50 Non-Pref. Gen, \$117.50 Pref. Brand, 45% Non-Pref Brand, 33% Specialty

SW Counties: Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Washington, Westmoreland

WC Counties: Bedford, Blair, Cameron, Clearfield, Crawford, Elk, Erie, Forest, Huntingdon, Jefferson, McKean, Mercer, Potter, Somerset, Venango, Warren

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