MEDICAL - Florida Blue

	HDHP BlueCare (HMO)[1] 128/129[3]	Copay Plan BlueOptions[2] 05912
Benefits & Services	**You Pay In-Network**	**You Pay In-Network**
Calendar Year Deductible - Individual / Family - Embedded / Non-Embedded	$2,500 / $5,000[4] Non-Embedded	$500 / $1,500 Embedded
Coinsurance you pay	20%	30%
Out-of-Pocket Maximum - Individual / Family	$5,000 / $10,000[4]	$8,700 / $17,400
Your Deductible, Coinsurance and all Copays are included in the Out-of-Pocket Maximum. This is the most you're expected to pay for In-Network covered services during the calendar year.		
Preventive Care	No Charge	No Charge
BlueVirtualCare	Deductible then 20%	No Charge
Independent Clinical Lab	Deductible then 20%	No Charge
Physician Office Visit - Primary Care / Specialist	Deductible then 20%	$35 / $85 Copay
Urgent Care Facility Visit	Deductible then 20%	$85 Copay
Independent Diagnostic Testing Facility - X-ray / Advanced Imaging	Deductible then 20%	$85 / Ded then Coins.
Emergency Room Facility Visit	Deductible then 20%	$750 Copay
Outpatient Hospital Visit	Deductible then 20%	Deductible then 30%
Inpatient Hospital Stay	Deductible then 20%	Deductible then 30%
Physicians in the ER & Hospital	Deductible then 20%	Deductible then 30%

[1]BlueCare (HMO) plans limit coverage to In-Network services - with the exception of ER Visits and Ambulance Transportation.

[2]BlueOptions plans provide Out-of-Network coverage; subject to a separate and higher Deductible, Coinsurance, and Out-of-Pocket Maximum - and balance-billing.

[3]BlueCare (HMO) 128/129 is an HSA qualified High Deductible Health Plan; 128 is an Individual Plan - employee only coverage, and 129 is a Family Plan - you and any number of dependents.

[4]If you cover one or more dependents, the Family Deductible must be satisfied; however, no one individual will be liable for more than $6,850 Out-Of-Pocket Maximum.

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Benefits & Services	**You Pay In-Network**	**You Pay In-Network**
Ambulatory Surgical Center	Deductible then 20%	Deductible then 30%
Durable Medical Equipment	Deductible then 20%	Deductible then 30%
Home Health Care	Deductible then 20%	Deductible then 30%
Skilled Nursing Facility	Deductible then 20%	Deductible then 30%
Hospice	Deductible then 20%	Deductible then 30%
Mental Health & Substance Use	Deductible then 20%	No Charge
Retail Prescriptions (30-Days) - Generic - Preferred Brand - Non-Preferred Brand	Deductible then: $10 Copay $50 Copay $80 Copay	 $10 Copay $50 Copay $80 Copay
Mail-Order Prescriptions (90 Days) - Generic - Preferred Brand - Non-Preferred Brand	Deductible then: $25 Copay $125 Copay $200 Copay	 $25 Copay $125 Copay $200 Copay

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BlueCare (HMO) plans 128/129 require you to have a primary care physician (PCP) to get your care started. You select your physician at enrollment or one is automatically selected for you. This physician's name is shown in your member account, and you can change it at any time. While you'll have the flexibility to see physicians in your BlueCare network, it's important to have a regular physician that knows your health care needs best.

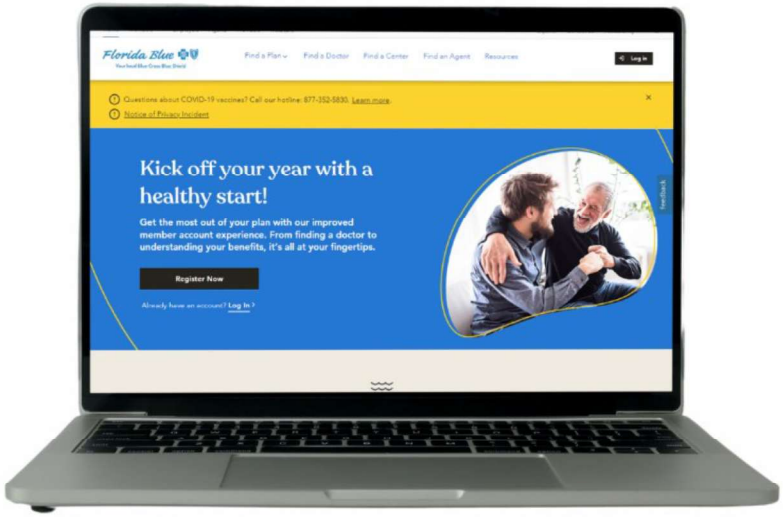
Start with your PCP to understand what type of specialist you may need to see. Florida Blue does not require a referral from your PCP, but some private practices require a referral from your designated PCP, so we encourage you to become an established patient. Talking with your PCP can save you time and may help you get an appointment faster. Plus, when medical services and prescription drugs require an approval before they're covered, your PCP will take care of this step for you!

Unless it's an emergency, BlueCare (HMO) plans do not cover medical services or supplies that you get outside of the BlueCare network. When you use your health coverage, it's always good to ask providers, "Do you participate in the BlueCare (HMO) network?"

You must apply for the Away From Home Care Program Guest Membership for dependents who will be in a different service area for at least 90 consecutive days.

The BlueCare (HMO) network is not available in every County, and the National HMO network is not available in every State. Make sure you are comfortable with the Network access before enrolling in a BlueCare (HMO) Plan.

To designate your own PCP during enrollment, search the online provider directory; select Primary Care as the Provider Type, and narrow your search by selecting Family Practice, General Practice, Internal Medicine or Pediatrician from the Specialty list. Click on the Physician's name to view their Provider Number.



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LOCATE A PARTICIPATING PROVIDER

- Call 1-800-810-2583
- Use the Florida Blue app on your smart phone
- Visit floridablue.com and log in as a registered member
- If you're not a registered member, visit floridablue.com and Click on **Find a Doctor**
- Scroll down to **Find Doctors by Plan**
- Choose **BlueCare** or **BlueOptions** from the dropdown list
- To locate a participating provider outside Florida, scroll down to **Other Provider Searches**
- Click on **Doctors & Hospitals Nationally** or **Worldwide**
- Reference **XJG** for BlueCare (HMO) and **XJB** for BlueOptions

Costs Per Pay (26 Pays)[1]	**HDHP BlueCare (HMO) 128/129**	**Copay Plan BlueOptions 05912**
Employee Only	$15.00	$91.45
Employee & Spouse	$169.21	$343.53
Employee & Child(ren)	$119.28	$272.20
Employee & Family	$288.85	$539.63

[1]A $30 surcharge will be added to the above rates if a covered employee or spouse use tobacco products or vape. If the employee and spouse both use tobacco products or vape, the surcharge is $30 each ($60 total).

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1. Advanced Imaging Services! Florida Blue requires prior authorization on Advanced Imaging Services (AIS): MRI, CAT, PET. Your physician is responsible for obtaining the authorization. Florida Blue uses a third party radiology group to conduct the review. If the AIS is denied, the radiology group will provide an alternate method of treatment. If your physician feels strongly that you need the AIS, have your physician call and request a "peer-to-peer review". The number your physician should call is 1-800-727-2227.

2. Care Consultants! Make informed healthcare decisions. The Care Consultant Team can explain your benefits, identify helpful resources, find providers, price services and more. Call 1-888-476-2227.

3. Chiropractic Care! Florida Blue has contracted with American Specialty Health (ASH) to manage your chiropractic care. Although the plan will cover up to a limited number of manipulations per person per calendar year, the number of covered services must be approved by ASH. Your provider will need to submit medical necessity to determine the number of covered services.

4. Coverage Outside of Florida! Your coverage works outside of Florida. As long as the out-of-state provider participates in their state's PPO (BlueOptions) or HMO (BlueCare) network, your In-Network benefits apply. Search for providers Nationally and Worldwide online at floridablue.com or by calling 1-800-810-2583. When asked for the alpha-prefix, tell them XJB for PPO or XJG for HMO.

5. Discount Programs! Take advantage of the discounts available through Blue365. Services typically not covered by the medical plan are available at discounted prices: Exercise and Weight Management, Apparel and Gear, Health and Wellness, Vision and Hearing Services, Information and Support, and Healthy Travel. Go online to see who in town participates and what their discounts are at blue365deals.com.

6. Durable Medical Equipment! Call on CareCentrix for all your medical equipment, home health services, and infusion therapy needs at 1-877-561-9910. For help transitioning your current services, call 1-866-776-4617.

7. Fill Generic! When prescribed a new medication, ask your provider for samples. If the new medication works, ask for the Generic. When you fill Brand while a Generic equivalent is available, you will pay the Brand copay, plus the difference in cost between the Brand and Generic. If you cannot take Generic, have your physician write "Medically Necessary - Dispense as Written" on your Brand prescription to avoid unnecessary costs.

8. Locate a Participating Urgent Care Facility! If you search the online provider directory for Urgent Care Facilities, you won't get many results. That's because a lot of the facilities we consider to be Urgent Care (walk-in clinics) are actually physician offices. Call the Urgent Care facility near your home and office; verify their participation in your network and note their hours of operation.

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9. Member Health Statements! Don't pay a provider bill without first matching it to your Florida Blue Member Statement. Statements are mailed to your home once a month. You can also view your Statements online at floridablue.com.

10. Mental Health, Behavioral Health, Substance Use! Call Lucet, formerly New Directions, or visit their website to find the right doctors and treatment facilities and confirm provider participation in your network. Call 1-866-287-9569 or visit lucethealth.com.

11. Pharmacy Programs! Florida Blue has programs in place to help control costs. When filling a prescription with Florida Blue for the first time, refer to the Medication Guide to see if your medication requires prior authorization, has a quantity limitation, requires you try an alternate medication first (step-therapy), or is a specialty pharmacy medicine that is only covered when filled through one of two specialty pharmacies. You can view the Large Employer Open Medication Guide online at floridablue.com. If you have questions regarding your prescription coverage, call Prime Therapeutics at 1-888-271-3183 or visit myprime.com. For questions regarding the mail-order pharmacy, log into floridablue.com and visit the Pharmacy section under My Plan or call Amazon Pharmacy Customer Care at 1-855-965-7539.

12. Preferred Lab! In the State of Florida, your preferred Lab is Quest Diagnostics. Ask your providers to use a participating Independent Clinical Lab, or get a prescription and go to a participating Independent Clinical Lab to avoid unnecessary expenses.

13. Prescription Savings! Take advantage of the discounts local pharmacies are making available. Many Generic medications are available for $4 at Walmart. For expensive and/or non-covered medications, find manufacturer assistance, discount programs and coupons at needymeds.org, blinkhealth.com, and goodrx.com; you may also want to inquire about the best price you can get without insurance (don't forget to check with compound pharmacies).

14. Preventive Care! Wellness services are covered at 100% In-Network. Mammograms are covered at 100% whether routine or diagnostic and a routine colonoscopy is covered at 100% for individuals age 45 and older; certain high-risk codes will allow individuals of any age to have a routine colonoscopy covered at 100%.

15. Stay In-Network! Prior to every service, verify the provider that is treating you is In-Network. In Florida, your Medical network is either BlueOptions or BlueCare HMO. It is your responsibility to verify your providers participate in your network, even when your physician refers you to a specialist or lab. You can search for participating providers online at floridablue.com.

16. BlueVirtualCare! Access board-certified Physicians who can diagnose, treat and prescribe; available 24/7/365. BlueVirtualCare can help with general medicine, behavioral and mental health, and dermatology. Visit floridablue.com and/or use the Florida Blue app to access this service.