BeneFits Quick Reference Guide

BeneFits Portfolio for Small Businesses

Per-member in-network costs are shown here. See the BeneFits product brochure for more details.

Plans	Lifetime Maximum (for most covered services)	Annual Deductible	Annual Out-of-pocket Maximum (includes deductible unless noted and excludes most copayments)	Office Visits (not subject to deductible unless noted)	Prescription Drugs	Inpatient Hospital Coinsurance	Relative Price Low ←→ High
Hospital BeneFits	$6 million	$1,250	Deductible + $2,500	NA	$15 generic	30%	
Hospital BeneFits Plus	$6 million	$1,000	Deductible + $2,500	50% to $1,000	$15 generic	30%	
Hospital BeneFits Preferred	$6 million	$750	Deductible + $2,500	50% to $1,500	$15 generic	30%	
PPO $35 Copay GenRx	$6 million	$500	Deductible + $3,500	$35	$15 generic	30%	
PPO $25 Copay $2000 Deductible	$6 million	$2,000	Deductible + $3,000	$25	$15/30/50/30%	20%	
Lumenos® HSA 3000	$6 million	$3,000	$3,000	0% after deductible	0% after deductible	0% after deductible	
Classic HMOSelect	Unlimited*	none	$3,000	$20 (PCP)	$15/40/60/30%	$500 copay	

*For most covered services

Important: This chart is designed to help employers begin the selection process. It does not contain adequate information to make a final decision. Do not submit an application until you review each plan's Health Benefits Plan Description Form and certificate.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. In Connecticut: Anthem Health Plans, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. In Ohio: Community Insurance Company. In Virginia (serving Virginia excluding the city of Fairfax, the town of Vienna and the area east of State Route 123): Anthem Health Plans of Virginia, Inc. In Wisconsin: Blue Cross Blue Shield of Wisconsin ("BCBSWi") underwrites or administers the PPO and indemnity policies; Compcare Health Services Insurance Corporation ("Compcare") underwrites or administers the HMO policies; and Compcare and BCBSWi collectively underwrite or administer the POS policies. Independent licensees of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

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EmployeeElect Quick Reference Guide

EmployeeElect Portfolio for Small Businesses

Per-member in-network costs are shown here. See the EmployeeElect Comparison Guide brochure for more details.

What Are Your Priorities?	Plans	Lifetime Maximum (for most covered services)	Annual Deductible	Annual Out-of-pocket Maximum (includes deductible unless noted and excludes most copayments)	Office Visits (not subject to deductible unless noted)	Prescription Drugs	Inpatient Hospital Coinsurance	Relative Price Low ◄——► High
Affordable Protection Our most affordable PPO plans provide solid protection at budget-friendly prices.	PPO $45 Copay GenRx	$6 million	$750	Deductible + $4,000	$45	$15 generic	40%	
	PPO $35 Copay GenRx	$6 million	$500	Deductible + $3,500	$35	$15 generic	30%	
Leading Choices Mid-range PPO plans offer an ideal balance between cost and comprehensive benefits.	PPO $40 Copay $5000 Deductible	$6 million	$5,000	Deductible + $8,000	$40	$20/40/50/30%	30%	
	PPO $40 Copay $500 Deductible	$6 million	$500	Deductible + $4,000	$40	$20/40/50/30%	30%	
	PPO $30 Copay $3000 Deductible	$6 million	$3,000	Deductible + $5,000	$30	$15/30/50/30%	20%	
	PPO $30 Copay $500 Deductible	$6 million	$500	Deductible + $3,500	$30	$15/30/50/30%	20%	
	PPO $25 Copay $2000 Deductible	$6 million	$2,000	Deductible + $3,000	$25	$15/30/50/30%	20%	
Top-of-the-Line Our high-end Premier PPO plans have rich benefits and the most comprehensive coverage.	Premier PPO $25 Copay	$6 million	None	$3,000	$25	$15/30/50/30%	20%	
	Premier PPO $15 Copay	$6 million	None	$2,500	$15	$10/30/50/30%	10%	
Consumer-Driven **These comprehensive PPO plans expand member control and financial opportunities.**	Lumenos HSA 5000	$6 million	$5,000	$5,000	0% after deductible	0% after deductible	0% after deductible	
	Lumenos HSA 3000	$6 million	$3,000	$3,000	0% after deductible	0% after deductible	0% after deductible	
	Lumenos HSA 2000	$6 million	$2,000	$2,000	0% after deductible	0% after deductible	0% after deductible	
	Lumenos HIA Plus 3000	$6 million	$3,000	$3,000	0% after deductible	0% after deductible	0% after deductible	
	Lumenos HIA Plus 2000	$6 million	$2,000	$2,000	0% after deductible	0% after deductible	0% after deductible	
Predictable HMOs HMO plans are ideal for those who want to simplify decision-making and pay predictable costs.	Classic HMO*Select*	Unlimited*	None	$3,000	$20 (primary care physician)	$15/40/60/30%	$500 copay	
	Classic HMO	Unlimited*	None	$3,000	$20 (primary care physician)	$15/40/60/30%	$500 copay	

*For most covered services

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