

PPO (PPN) vs. BlueChoice Triple Option *Open Access*

	PPO	BlueChoice Triple Option
Networks	PPO	BlueChoice for Level 1 PPO for Level 2 All others for Level 3
PCP Required	No	Yes for Level 1
Referrals Required	No	No
Medical Copays	\$15 PCP/\$15 Specialist	\$10 PCP/Specialist – Level 1 \$15 PCP/Specialist – Level 2 N/A – Level 3
Deductibles	\$0 – In-Network \$200 Individual/\$400 Family – Out-of-Network	N/A – Level 1 \$200 Individual/\$400 Family – Level 2 \$300 Individual/\$600 Family – Level 3
Medical Out of Pocket Maximum	\$1,200 Individual / \$2,400 Family	\$2,000 Individual / \$6,000 Family – Level 1 \$500 Individual / \$1,000 Family – Level 2 \$1,000 Individual / \$2,000 Family – Level 3
Combined Medical and Prescription Out of Pocket Maximum	\$6,350 Individual \$12,700 Family	\$6,350 Individual \$12,700 Family
Coinsurance	100% In-Network 80% Out of Network	100% Level 1 90% for Level 2 80% for Level 3
Independent Labs	PPO Providers – In-Network Other providers – Out of Network	LabCorp – Level 1 All other Labs – Level 2 & 3
Emergency Room	\$25 copay; waived if admitted	\$50 copay; waived if admitted, Levels 1, 2 & 3
Inpatient Hospital	100% AB* In-Network 80% AB* after deductible Out of Network	100% AB* - Level 1 90% AB* after ded. – Level 2 80% AB* after ded. – Level 3
Occupational, Physical, Speech Therapy	Limited to 100 visits for each therapy	Limited to a combined 30 visits per condition per year – Level 1 Limited to 100 visits for each therapy – Levels 2 & 3
Chiropractic Care	Unlimited Visits	Limited to 20 visits per year – Level 1 Unlimited Visits – Levels 2 & 3
Acupuncture	100% AB – In-Network 80% AB Out of Network after deductible	Limited to 24 visits per year – Level 1 Unlimited Visits – Levels 2 & 3
Prescription Drug Copays (Units 1–4)		Retail: \$5 Generic; \$15 Preferred Brand; \$25 Non-preferred Brand. Mail Order or CVS Retail Maintenance Choice: \$10 Generic; \$30 Preferred Brand; \$50 Non-preferred Brand
Prescription Drug Copays (Units 5 and 6)		Retail: \$5 Generic; \$20 Preferred Brand; \$35 Non-preferred Brand; \$75 Injectables. Mail Order or CVS Retail Maintenance Choice: \$10 Generic; \$40 Preferred Brand; \$70 Non-preferred Brand; \$150 Injectables

The main differences between the PPO plan and the BlueChoice Triple Option *Open Access* plan are:

1. The BlueChoice Triple Option plan gives you the freedom to move between the BlueChoice network (Level 1), the PPO network (Level 2) and the Par/Non-par providers (Level 3).
2. There is less out of pocket with the BlueChoice Triple Option plan.
3. Premiums for 2017 are significantly less for the BlueChoice Triple Option vs. the PPO plan (only available to existing members). Refer to your rate information contained in your 2017 Benefits Guide.

* AB =Allowed Benefit



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