Educators Health Alliance 2021-22 Benefit Summary for PPO Health Coverage - Alternate Networks Option 2

Benefit Plan	Preferred	Non-Preferred
Each Subscriber may choose 1 of 3 Network Options:		
Individual Deductible		
Blueprint Health Deductible (Paired with \$2,500 HSA-Eligible Plan)	\$400	\$800
Premier Select BlueChoice Deductible (Paired with \$2,500 HSA-Eligible Plan)	\$400	\$800
NEtwork Blue Deductible (Paired with \$3,600 HSA-Eligible Plan)	\$1,900	\$3,800
Family Deductible Maximum	Twice Deductible	Twice Deductible
Blueprint Health Coinsurance	20%	40%
Premier Select BlueChoice Coinsurance	20%	40%
NEtwork Blue Coinsurance	20%	40%
Individual Out-of-Pocket Maximum by Deductible Option		
Blueprint Health Out-of-Pocket Maximum	\$5,000	\$10,000
Premier Select BlueChoice Out-of-Pocket Maximum	\$5,000	\$10,000
NEtwork Blue Out-of-Pocket Maximum	\$5,500	\$11,000
Family Out-of-Pocket Maximum	2x Individual	2x Individual
Combined Maximum includes Deductible, Coinsurance, and Copays for all service	es including Prescription Dru	ıgs
Lifetime Maximum	Unlimited	
Office Visit Copay		
Primary Copay	\$35	Ded & Coins
Specialist Copay	\$55	Ded & Coins
Inpatient Hospital	Ded & Coins	
Outpatient Hospital	Ded & Coins	
Emergency Services		
Urgent Care	\$55 Copay, Ded & Coins	
Emergency Room	\$85 Copay,	Ded & Coins
Prescription Drugs		
Generic Copay	25% Coins (\$10 minimum, \$40 maximum)	
Formulary Brand Copay	25% Coins (\$50 minimum, \$100 maximum)	
Non-Formulary Brand Copay	50% Coins (\$75 minimum, \$150 maximum)	
In Network Specialty Copay (30 Day Supply)	25% Coins (\$125 minimum, \$250 maximum) 50% Coins (\$250 minimum, \$500 maximum)	
Out of Network Specialty Copay (30 Day Supply)	• • • • • • • • • • • • • • • • • • • •	,
Formulary Diabetic Supplies		0% ov
Non-Formulary Diabetic Supplies 30%		
Ostomy Supplies	Order Maximum 180 Days Supply	
Mail Order Maximum	·	O Days Supply
	1 Copay per 3	30 Days Supply ay Maximum
Mail Order Maximum	1 Copay per 3 with 5 Copa	

Mental Health and Substance Abuse		
	Inpatient	Ded & Coins
	Outpatient	Ded & Coins
	Office Visit	Covered at 100%