Large Employer

HIGH DEDUCTIBLE PLANS 80/20 COINSURANCE



An independent licensee of the Blue Cross and Blue Shield Association

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| I NETWORK | | | | |
| I NETWORK | | | | |
| Member Deductible | \$3,000 | \$3,500 | \$4,000 | |
| Family Deductible | \$6,000 | \$7,000 | \$8,000 | |
| Coinsurance | | | | |
| Blue Cross Blue Shield Pays | 80% | 80% | 80% | |
| Member Pays | 20% | 20% | 20% | |
| Member Out-of-Pocket Maximum Deductible, Coinsurance & Copays including Prescriptions) | \$6,000 | \$7,000 | \$8,000 | |
| Family Out-of-Pocket Maximum Deductible, Coinsurance & Copays Including Prescriptions) | \$12,000 | \$14,000 | \$16,000 | |
| Primary Care Visit Copay | \$45 | \$45 | \$45 | |
| pecialist/Urgent Care Office Visit Copay | \$70 | \$70 | \$70 | |
| reventive Care | Paid at 100% of maximum allowable am | ount at appropriate intervals when servi | ices are rendered by a network provi | |
| Emergency Room Visit | After \$250 copay, subject to the deductible & coinsurance Copay does not apply if admitted to the hospital | | | |
| | | | | |
| RESCRIPTION DRUGS (retail & mail order) | | | | |
| Fier 1: Generic drugs Copay | \$10 | \$10 | \$10 | |
| Fier 2: Preferred Brand drugs Copay | \$50 | \$50 | \$50 | |
| ier 3: Non-Preferred Brand drugs Copay | \$100 | \$100 | \$100 | |
| ier 4: Specialty drugs Copay | \$200 | \$200 | \$200 | |
| Fier 5: Oral Oncology drugs | Subject to the deductible & coinsurance | | | |
| | Each copay applies to 30-day supply | | | |
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| UT OF NETWORK | | | | |
| Member Deductible | \$8,000 | \$8,000 | \$8,000 | |
| Family Deductible | \$16,000 | \$16,000 | \$16,000 | |
| Coinsurance | | | | |
| Blue Cross Blue Shield Pays | 50% | 50% | 50% | |
| Member Pays | 50% | 50% | 50% | |
| Member Out-of-Pocket Maximum Deductible & Coinsurance) | \$20,000 | \$20,000 | \$20,000 | |
| Family Out-of-Pocket Maximum Deductible & Coinsurance) | \$40,000 | \$40,000 | \$40,000 | |
| | All services are subject to the out-of-network deductible & coinsurance | | | |
| | | Copays do not apply to the out-of-network services | | |

Wyoming Access utilizes a select network of providers and reduced benefits will occur if using a provider other than a participating provider.

Large Employer

HIGH DEDUCTIBLE PLANS 70/30 COINSURANCE



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| I NETWORK | | | | |
| Wember Deductible | \$3,000 | \$3,500 | \$4,000 | |
| Family Deductible | \$6,000 | \$7,000 | \$8,000 | |
| Coinsurance | Ψ0,000 | Ψ1,000 | Ψ0,000 | |
| Blue Cross Blue Shield Pays | 70% | 70% | 70% | |
| • | 30% | 30% | 30% | |
| Member Pays | | | | |
| Member Out-of-Pocket Maximum (Deductible, Coinsurance & Copays including Prescriptions) | \$7,500 | \$8,750 | \$9,450 | |
| Family Out-of-Pocket Maximum (Deductible, Coinsurance & Copays including Prescriptions) | \$15,000 | \$17,500 | \$18,900 | |
| Primary Care Visit Copay | \$55 | \$55 | \$55 | |
| Specialist/Urgent Care Office Visit Copay | \$80 | \$80 | \$80 | |
| Preventive Care | Paid at 100% of maximum allowable amount at appropriate intervals when services are rendered by a network provide | | | |
| Emergency Room Visit | After \$250 copay, subject to the deductible & coinsurance Copay does not apply if admitted to the hospital | | | |
| | 1.00 | | | |
| PRESCRIPTION DRUGS (retail & mail order) | | | | |
| Tier 1: Generic drugs Copay | \$15 | \$15 | \$15 | |
| Tier 2: Preferred Brand drugs Copay | \$60 | \$60 | \$60 | |
| Tier 3: Non-Preferred Brand drugs Copay | \$120 | \$120 | \$120 | |
| Tier 4: Specialty drugs Copay | \$250 | \$250 | \$250 | |
| Tier 5: Oral Oncology drugs | Subject to the deductible & coinsurance | | | |
| | Each copay applies to 30-day supply | | | |
| | | | | |
| OUT OF NETWORK | | | | |
| Member Deductible | \$8,000 | \$8,000 | \$8,000 | |
| Family Deductible | \$16,000 | \$16,000 | \$16,000 | |
| Coinsurance | | | | |
| Blue Cross Blue Shield Pays | 50% | 50% | 50% | |
| Member Pays | 50% | 50% | 50% | |
| Member Out-of-Pocket Maximum (Deductible & Coinsurance) | \$20,000 | \$20,000 | \$20,000 | |
| Family Out-of-Pocket Maximum (Deductible & Coinsurance) | \$40,000 | \$40,000 | \$40,000 | |
| | All services are subject to the out-of-network deductible & coinsurance | | | |
| | Copays do not apply to the out-of-network services | | | |

Wyoming Access utilizes a select network of providers and reduced benefits will occur if using a provider other than a participating provider.

Large Employer

HIGH DEDUCTIBLE PLANS 60/40 COINSURANCE



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| I NETWORK | | | | |
| Wember Deductible | \$3,000 | ¢2.500 | Φ4.000 | |
| | | \$3,500 | \$4,000 | |
| Family Deductible | \$6,000 | \$7,000 | \$8,000 | |
| Coinsurance | | | | |
| Blue Cross Blue Shield Pays | 60% | 60% | 60% | |
| Member Pays | 40% | 40% | 40% | |
| Member Out-of-Pocket Maximum (Deductible, Coinsurance & Copays including Prescriptions) | \$9,000 | \$9,450 | \$9,450 | |
| Family Out-of-Pocket Maximum (Deductible, Coinsurance & Copays including Prescriptions) | \$18,000 | \$18,900 | \$18,900 | |
| Primary Care Visit Copay | \$65 | \$65 | \$65 | |
| Specialist/Urgent Care Office Visit Copay | \$90 | \$90 | \$90 | |
| Preventive Care | Paid at 100% of maximum allowable amount at appropriate intervals when services are rendered by a network provide | | | |
| Emergency Room Visit | After \$250 copay, subject to the deductible & coinsurance Copay does not apply if admitted to the hospital | | | |
| | | | | |
| PRESCRIPTION DRUGS (retail & mail order) | | | | |
| Tier 1: Generic drugs Copay | \$20 | \$20 | \$20 | |
| Tier 2: Preferred Brand drugs Copay | \$70 | \$70 | \$70 | |
| Tier 3: Non-Preferred Brand drugs Copay | \$140 | \$140 | \$140 | |
| Tier 4: Specialty drugs Copay | \$300 | \$300 | \$300 | |
| Tier 5: Oral Oncology drugs | Subject to the deductible & coinsurance | | | |
| <i>a, c</i> | Each copay applies to 30-day supply | | | |
| | • | | | |
| OUT OF NETWORK | | | | |
| Member Deductible | \$8,000 | \$8,000 | \$8,000 | |
| Family Deductible | \$16,000 | \$16,000 | \$16,000 | |
| Coinsurance | | . , | , | |
| Blue Cross Blue Shield Pays | 50% | 50% | 50% | |
| Member Pays | 50% | 50% | 50% | |
| • | 3370 | | 30% | |
| Member Out-of-Pocket Maximum (Deductible & Coinsurance) | \$20,000 | \$20,000 | \$20,000 | |
| Family Out-of-Pocket Maximum (Deductible & Coinsurance) | \$40,000 | \$40,000 | \$40,000 | |
| | All services are subject to the out-of-network deductible & coinsurance | | | |
| | | s do not apply to the out-of-network ser | | |

Wyoming Access utilizes a select network of providers and reduced benefits will occur if using a provider other than a participating provider.



WYOMING ACCESS

Here for You and Your Employees

Our mission is to help your employees and their families receive and pay for the health care they need to live healthy and productive lives.

Online Resources

At YourWyoBlue.com, members can sign up for online accounts to view benefits, see claims, find and compare providers and costs for care, get an ID card, search a library of wellness topics and more. Members can also complete a health assessment offered by WebMD and get recommendations to improve their health and wellbeing with personalized wellness programs, recipes, health tips, goal setting and tracking, and lifestyle changes.

About Our Networks

BCBSWY networks provide unmatched worldwide health care without sacrificing top quality local services. Members have access to the widest selection of local, national, and international provider networks available in the industry including:

- Access to more than 98% of Wyoming providers, including 100% of Wyoming hospitals.
- Access to more than 5,800 hospitals and facilities (97%) and more than 670,000 (83%) participating physicians nationwide.
- Access to doctors and hospitals in more than 170 countries and territories worldwide.
- Access to Blue Distinction® Specialty Centers.
- Access to over 55,000 retail pharmacies in Wyoming and nationwide.

Blue Distinction® Specialty Care

Blue Distinction® Centers are in 1,900 locations nationwide that specialize in the areas of bariatric surgery, cardiac care, knee and hip replacement, spine surgery, transplants, and substance use treatment, along with others. Earning national designation by Blue Cross and Blue Shield companies, these medical facilities have demonstrated better quality and improved outcomes for patients, giving your employees another tool to make better informed health care decisions.

Your Service Team

We are a not-for-profit local company dedicated to serving more than 100,000 members from right here in Wyoming. We will support you and your employees from our headquarters in Cheyenne and eight convenient Member Centers in Casper, Cheyenne, Cody, Gillette, Jackson, Laramie, Riverton, and Rock Springs.

This outline is designed to present Wyoming Access benefits in an easy-to-read format and does not cover all information contained in the Benefit Booklet. Limitations and exclusions in addition to those presented in the outline do exist. This outline is not a contract. For exact benefits and limitations, please request a copy of the Benefit Booklet.

This program contains expanded wellness benefits that meet the requirements of the Patient Protection and Affordable Care Act. The expanded benefits require the use of an in-network provider. The comprehensive adult wellness benefits provided do not meet the minimum standards as required by the Wyoming Insurance Code.



An independent licensee of the Blue Cross and Blue Shield Association

WebMD Health Services is an independent company providing wellbeing solutions for Blue Cross Blue Shield of Wyoming clients and members.