Large Employer

LOW DEDUCTIBLE PLANS 80/20 COINSURANCE



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I NETWORK		
NETWORK	1000	
Member Deductible	\$500	\$1,000
Family Deductible	\$1,000	\$2,000
Coinsurance		
Blue Cross Blue Shield Pays	80%	80%
Member Pays	20%	20%
lember Out-of-Pocket Maximum	\$2,000	\$2,500
Deductible, Coinsurance & Copays including Prescriptions)	· ·	\$5,000
family Out-of-Pocket Maximum Deductible, Coinsurance & Copays including Prescriptions)	\$4,000	
rimary Care Visit Copay	\$25	\$25
Specialist/Urgent Care Office Visit Copay	\$50	\$50
Preventive Care	Paid at 100% of maximum allowable amount at appropriate	e intervals when services are rendered by a network provi
	After \$250 copay, subject to the deductible & coinsurance	
Emergency Room Visit	Copay does not apply if admitted to the hospital	
RESCRIPTION DRUGS (retail & mail order)		
Fier 1: Generic drugs Copay	\$5	\$5
Tier 2: Preferred Brand drugs Copay	\$30	\$30
Tier 3: Non-Preferred Brand drugs Copay	\$60	\$60
Tier 4: Specialty drugs Copay	\$100	\$100
Tier 5: Oral Oncology drugs	Subject to the deductible & coinsurance	
	Each copay applies to 30-day supply	
UT OF NETWORK		
Member Deductible	\$2,000	\$2,000
Family Deductible	\$4,000	\$4,000
Coinsurance		
Blue Cross Blue Shield Pays	50%	50%
Member Pays	50%	50%
Member Out-of-Pocket Maximum		
Deductible & Coinsurance)	\$10,000	\$10,000
Family Out-of-Pocket Maximum Deductible & Coinsurance)	\$20,000	\$20,000
(Soundarie & Computation)		
Deductible & Comsurance)	All services are subject to the out-	of-network deductible & coinsurance

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

Large Employer

LOW DEDUCTIBLE PLANS 70/30 COINSURANCE



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I NETWORK		
	\$500	\$1,000
Member Deductible	· ·	
Family Deductible	\$1,000	\$2,000
Coinsurance		
Blue Cross Blue Shield Pays	70%	70%
Member Pays	30%	30%
Member Out-of-Pocket Maximum	\$2,750	\$3,250
(Deductible, Coinsurance & Copays including Prescriptions)	\$5,500	\$6,500
Family Out-of-Pocket Maximum (Deductible, Coinsurance & Copays including Prescriptions)	,	
Primary Care Visit Copay	\$35	\$35
Specialist/Urgent Care Office Visit Copay	\$60	\$60
Preventive Care	Paid at 100% of maximum allowable amount at appropriate	e intervals when services are rendered by a network provi
	After \$250 copay, subject to the deductible & coinsurance	
Emergency Room Visit	Copay does not apply if admitted to the hospital	
PRESCRIPTION DRUGS (retail & mail order)		
Tier 1: Generic drugs Copay	\$10	\$10
Tier 2: Preferred Brand drugs Copay	\$40	\$40
Tier 3: Non-Preferred Brand drugs Copay	\$80	\$80
Tier 4: Specialty drugs Copay	\$150	\$150
Tier 5: Oral Oncology drugs	Subject to the deductible & coinsurance	
 	Each copay applies to 30-day supply	
OUT OF NETWORK		
Member Deductible	\$2,000	\$2,000
Family Deductible	\$4,000	\$4,000
Coinsurance		
Blue Cross Blue Shield Pays	50%	50%
Member Pays	50%	50%
Member Out-of-Pocket Maximum		
(Deductible & Coinsurance)	\$10,000	\$10,000
Family Out-of-Pocket Maximum (Deductible & Coinsurance)	\$20,000	\$20,000
	All services are subject to the out-of-network deductible & coinsurance	
	All services are subject to the out-	of-network deductible & coinsurance

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

Large Employer

LOW DEDUCTIBLE PLANS 60/40 COINSURANCE



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I NETWORK	1000	
Member Deductible	\$500	\$1,000
Family Deductible	\$1,000	\$2,000
Coinsurance		
Blue Cross Blue Shield Pays	60%	60%
Member Pays	40%	40%
Member Out-of-Pocket Maximum Deductible, Coinsurance & Copays including Prescriptions)	\$3,500	\$4,000
Family Out-of-Pocket Maximum Deductible, Coinsurance & Copays including Prescriptions)	\$7,000	\$8,000
Primary Care Visit Copay	\$45	\$45
Specialist/Urgent Care Office Visit Copay	\$70	\$70
Preventive Care	Paid at 100% of maximum allowable amount at appropriate	e intervals when services 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	
		. dallintod to the neepita.
RESCRIPTION DRUGS (retail & mail order)		
Tier 1: Generic drugs Copay	\$15	\$15
Fier 2: Preferred Brand drugs Copay	\$50	\$50
Fier 3: Non-Preferred Brand drugs Copay	\$100	\$100
Fier 4: Specialty drugs Copay	\$200	\$200
	Subject to the deductible & coinsurance	
Tier 5: Oral Oncology drugs	Each copay applies to 30-day supply	
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UT OF NETWORK		
Member Deductible	\$2,000	\$2,000
Family Deductible	\$4,000	\$4,000
Coinsurance	\$ 1,000	ψ - ,,σσσ
Blue Cross Blue Shield Pays	50%	50%
-		
Member Pays	50%	50%
Member Out-of-Pocket Maximum Deductible & Coinsurance)	\$10,000	\$10,000
Family Out-of-Pocket Maximum (Deductible & Coinsurance)	\$20,000	\$20,000
	All services are subject to the out-of-network deductible & coinsurance	
	•	he 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.



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 Wyoming hospitals.
- Access to more than 5,800 hospitals and facilities (96%) and more than 670,000 (95%) 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 nine 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.



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