

Blue Advantage Plans at a Glance

Choose a plan that's right for your business and your employees. Here's a look at the plan options available.

Plan options	Deductible Single/family	Coinsurance	Out-of-pocket maximum Single/family	Office copay	Emergency care copay	Drug plan	Retail copay 4-Tier	Self-administered specialty drug copay	Deductible Single/family
2-50									
51-100									
W9F	\$500	30%	\$1,500	\$15	\$200	3F4	\$8 / \$35 / \$50 / \$100	\$100	\$100 / \$200 waived for Tier 1
W9G	\$750		\$2,250						
W9H	\$1,000		\$3,000	\$20					
W9J	\$1,500		\$4,500						
W9K	\$2,000		\$6,000						
W9L	\$2,500		\$7,500	\$25					
W9M	\$3,000		\$9,000						

- Includes preventive benefits for immunizations, routine physicals (includes separate female gynecological exam), cancer screenings, and well-child care to age seven. Benefits for preventive services are only available when employees see their designated PCP or OB/GYN.
- Routine vision exam must be performed by an in-network optometrist or ophthalmologist. Limited to one per calendar year.
- Referrals are required for out-of-network services beyond the scope of network providers.
- Nursing facility care limited to 90 days per calendar year.
- Infertility covered through diagnosis only.
- Deductible waived for in-network prosthetic limbs.
- For groups with 2-50 employees, behavioral health care services for mental health and chemical dependency limited to 52 office/outpatient visits and 30 inpatient hospital days per calendar year. Limits do not apply to groups with 51-100 employees.
- Lifetime maximum for all medical services is \$5 million.
- Benefits and general provisions described are subject to terms of the actual Coverage Manual.

