

# Individual Products High-Level Comparison



	Individual Personal Choice PPO	Individual HMO
Type of plan	Preferred Provider Organization (PPO)	Health Maintenance Organization (HMO)
Do I need to select a primary care physician (PCP)?	No (you don't have to pick a primary care physician)	Yes (you choose an in-network primary care physician to coordinate your health care needs)
May you visit a specialist directly?	Yes (you may choose any doctor you want without needing a referral)	No (you need a referral from your primary care physician to see in-network specialists)
Am I covered while traveling?	Yes (you have in-network coverage across the country with BlueCard® PPO and anywhere in the world with BlueCard Worldwide®)	Yes (you have coverage for urgent and emergency care)
Do I have prescription drug coverage?	Yes	Yes
Do I have maternity coverage?	No	Yes (you are covered for the hospital and doctor expenses for childbirth labor and delivery)
Do I have mental health, serious mental illness, and substance abuse coverage?	No	No
Is routine vision care covered?	No	Yes
Is an HSA account available?	Yes	No

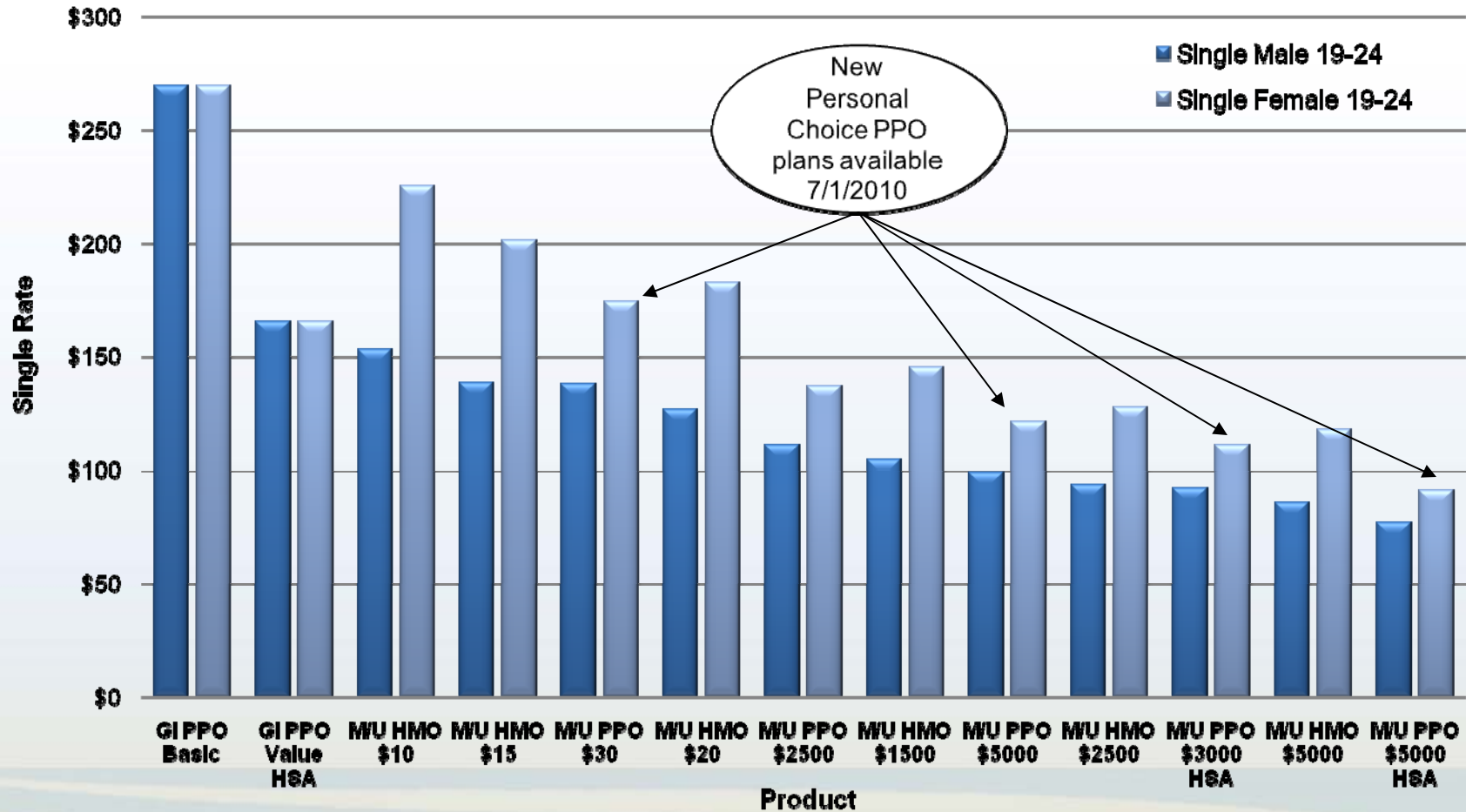
# New Individual Personal Choice Products, effective July 1, 2010



Plans	PPO 30 Copay	PPO 2500 Deductible	PPO 5000 Deductible	PPO 3000 HSA	PPO 5000 HSA
Plan Type	PPO	PPO	PPO	PPO	PPO
Applications Type	Med UW	Med UW	Med UW	Med UW	Med UW
Deductible	\$0/0	\$2,500/5,000	\$5,000/10,000	\$3,000/6,000	\$5,000/10,000
Coinsurance	20%	20%	20%	20%	0%
Primary Care Copay	\$30	\$30	\$30	20%	0%
Specialist Copay	\$50	\$50	\$50	20%	0%
Hospitalization	20%	20%	20%	20%	0%
RX Deductible	None	None	None	Integrated	Integrated
RX Copays	10/30/50	10/30/50	10/30/50	10/30/50	0%
RX Maximum	\$2,500 per person	\$2,500 per person	\$2,500 per person	None	None
Excluded Services	Maternity Outpt PDN MH/SA/SMI	Maternity Outpt PDN MH/SA/SMI	Maternity Outpt PDN MH/SA/SMI	Maternity Outpt PDN MH/SA/SMI	Maternity Outpt PDN MH/SA/SMI
Demographics	<ul style="list-style-type: none"> <li>•Students</li> <li>•Recent grads</li> <li>•Family</li> <li>•Between jobs</li> <li>•Self-employed</li> <li>•Early retiree</li> </ul>	<ul style="list-style-type: none"> <li>•Students</li> <li>•Recent grads</li> <li>•Family</li> <li>•Between jobs</li> <li>•Self-employed</li> <li>•Early retiree</li> </ul>	<ul style="list-style-type: none"> <li>•Students</li> <li>•Recent grads</li> <li>•Family</li> <li>•Between jobs</li> <li>•Self-employed</li> <li>•Early retiree</li> </ul>	<ul style="list-style-type: none"> <li>•Family</li> <li>•Self-employed</li> <li>•Early retiree</li> </ul>	<ul style="list-style-type: none"> <li>•Self-employed</li> <li>•Early retiree</li> </ul>

# Individual Product Portfolio

## Rate Relativities, effective July 1, 2010



# Quoting and Materials



- Online quoting and application live June 14
- Paper application kits can be ordered through BAGs beginning June 14
- Broker tool kit live with new products and rates

[www.ibx.com/broker\\_individual](http://www.ibx.com/broker_individual)

# Preexisting Condition Exclusion



- Look-back period
  - HMO look-back period is 90 days
  - PPO look-back period is 12 months
- Waiving or reducing exclusion period
  - Blue-to-Blue Transfer. Active coverage with a Blue Cross<sup>®</sup> and/or Blue Shield<sup>®</sup> plan for up to 12 months without a break in coverage
  - Creditable Coverage. Active coverage with another carrier for up to 18 months without a break in coverage of more than 63 days

# Commission Schedule



Online Applications	Years 1 and 2	Year 3+
<b>Copay (HMO &amp; PPO)</b>		
Individual	\$33	\$17
Individual & child(ren)	\$57	\$29
Individual & spouse	\$86	\$43
Individual & family	\$93	\$47
<b>Deductible (HMO &amp; PPO)</b>		
Individual	\$23	\$12
Individual & child(ren)	\$42	\$21
Individual & spouse	\$55	\$28
Individual & family	\$65	\$33
<b>PPO HSA</b>		
Individual	\$19	\$10
Individual & child(ren)	\$35	\$18
Individual & spouse	\$46	\$23
Individual & family	\$54	\$28

Paper Applications	Years 1 and 2	Year 3+
<b>Copay (HMO &amp; PPO)</b>		
Individual	\$24	\$12
Individual & child(ren)	\$42	\$21
Individual & spouse	\$64	\$32
Individual & family	\$69	\$34
<b>Deductible (HMO &amp; PPO)</b>		
Individual	\$17	\$9
Individual & child(ren)	\$31	\$15
Individual & spouse	\$41	\$20
Individual & family	\$48	\$24
<b>PPO HSA</b>		
Individual	\$14	\$7
Individual & child(ren)	\$26	\$13
Individual & spouse	\$34	\$17
Individual & family	\$40	\$20

\*IBC reserves the right to change the commission schedule at any time.