



**January 1, 2021 Medical & Prescription  
Drug Plan Option Summary**

# January 1, 2021 – What is Changing & What is Remaining the Same

## Medical Carrier

- Staying with Capital Blue Cross
- Same Network and Covered Services
- Same pharmacy network and prescription drug coverage

## Plan Design

- Changing Total-Max-Out-Of-Pocket to match 2021 federal limit
- No change to deductible or copays

## Employee Contributions

- Employee portion of the premium cost will remain unchanged
- College absorbing premium increases

## ConnectCare3

- College pays for the cost of this service
- Available to each enrolled family member on the medical plan
- Confidential

# Copayment vs. Deductible

**Copayment applies to Office Visits (PCP, Specialist, Virtual Care, Urgent Care, and Retail Clinics), Emergency Room Visits (where you are not admitted) and Mail Order Prescriptions**

**Deductible applies to any testing or procedures:**

- Diagnostic Lab & Imaging
- Outpatient Procedures (such as injections, lesion removal and surgery)
- Inpatient Stays

**You can go for an office visit and pay BOTH a Copayment & Deductible**

- **Example:** You go for a dermatologist screening. The doctor sees changes to a mole and removes it for testing.
  - You will pay a \$30 Specialist Copayment for the visit\*
  - You will pay toward your deductible for the PROCEDURE for removing the mole as well as for any diagnostic testing on the mole to see if it is benign or malignant.
- **\*If you are enrolled in the QHDHP, both services apply to your annual deductible first.**

# Understanding Your Medical Plan Option

## Copayments (Within Each Plan Option)

- \$10 Virtual Care
- \$20 PCP
- \$30 Specialist
- \$50 Urgent Care
- \$100 Emergency Room (waived if admitted)
- PPO Plan vs. HSA Qualified Plan

## Deductibles

- Plan Options of:
  - No Deductible
  - \$250/person up to \$500/family
  - \$500/person up to \$1,000/family
  - HSA Qualified Plan: \$1,400/person up to \$2,800/family

## Out-of-Pocket Maximum

**(Provides Overall Member Protection  
On All Plan Options)**

# Understanding Your Medical & Prescription Drug Plan Options

| BENEFITS                                  | PPO \$500<br>(BASE CORE PLAN)                                                             |                                  | PPO \$250<br>(BUY UP OPTION A)                                                            |                                  | PPO \$0<br>(BUY UP OPTION B)                                                              |                                  | HIGH DEDUCTIBLE PLAN                                                   |                        |
|-------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------|------------------------|
|                                           | NETWORK                                                                                   | NON-NETWORK                      | NETWORK                                                                                   | NON-NETWORK                      | NETWORK                                                                                   | NON-NETWORK                      | NETWORK                                                                | NON-NETWORK            |
| Deductible                                | \$500 single<br>\$1,000 family                                                            | \$1,000 single<br>\$2,000 family | \$250 single<br>\$500 family                                                              | \$1,000 single<br>\$2,000 family | \$0 single<br>\$0 family                                                                  | \$1,000 single<br>\$2,000 family | \$1,400 single<br>\$2,800 family                                       |                        |
| Out-of-Pocket Maximum                     | \$8,550 single<br>\$17,100 family                                                         |                                  | \$8,550 single<br>\$17,100 family                                                         |                                  | \$8,550 single<br>\$17,100 family                                                         |                                  | \$7,000 single<br>\$14,000 family                                      |                        |
| Telehealth                                | \$10                                                                                      | N/A                              | \$10                                                                                      | N/A                              | \$10                                                                                      | N/A                              | \$10                                                                   | N/A                    |
| Primary Office Visit                      | \$20                                                                                      | 20%                              | \$20                                                                                      | 20%                              | \$20                                                                                      | 20%                              | \$20                                                                   | 20%                    |
| Specialist/Urgent Care                    | \$30/\$50                                                                                 | 20%                              | \$30/\$50                                                                                 | 20%                              | \$30/\$50                                                                                 | 20%                              | \$30/\$50                                                              | 20%                    |
| Pediatric Preventive and Adult Preventive | \$0                                                                                       | 20%                              | \$0                                                                                       | 20%                              | \$0                                                                                       | 20%                              | \$0                                                                    | 20%                    |
| Inpatient and Outpatient Hospital         | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                  | 20% Dr<br>50% facility |
| Major Diagnostic Services                 | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                                     | 20% Dr<br>50% facility           | 100% after deductible                                                  | 20% Dr<br>50% facility |
| Emergency Room Care                       | \$100 (waived if admitted)                                                                |                                  | \$100 (waived if admitted)                                                                |                                  | \$100 (waived if admitted)                                                                |                                  | \$100 (waived if admitted)                                             |                        |
| Retail Pharmacy                           | \$25 deductible<br>25% (generic & preferred)<br>45% (non-preferred)<br>\$150 specialty Rx |                                  | \$25 deductible<br>25% (generic & preferred)<br>45% (non-preferred)<br>\$150 specialty Rx |                                  | \$25 deductible<br>25% (generic & preferred)<br>45% (non-preferred)<br>\$150 specialty Rx |                                  | 25% (generic & preferred)<br>45% (non-preferred)<br>\$150 specialty Rx |                        |
| Mail Order Rx                             | \$25 generic<br>\$75 brand preferred<br>\$125 brand non-preferred                         |                                  | \$25 generic<br>\$75 brand preferred<br>\$125 brand non-preferred                         |                                  | \$25 generic<br>\$75 brand preferred<br>\$125 brand non-preferred                         |                                  | \$25 generic<br>\$75 brand preferred<br>\$125 brand non-preferred      |                        |

# Understanding Your Medical & Prescription Drug Plan Options

| EMPLOYEE COSTS      | PPO \$500 payroll deduction |          |            |                        | PPO \$250 payroll deduction |          |            |                        | PPO \$0 payroll deduction |          |             |                        | HIGH DEDUCTIBLE PLAN payroll deduction |          |            |                        |
|---------------------|-----------------------------|----------|------------|------------------------|-----------------------------|----------|------------|------------------------|---------------------------|----------|-------------|------------------------|----------------------------------------|----------|------------|------------------------|
|                     | 26-PAY                      | 24-PAY   | Annual     | Annual with deductible | 26-PAY                      | 24-PAY   | Annual     | Annual with deductible | 26-PAY                    | 24-PAY   | Annual      | Annual with deductible | 26-PAY                                 | 24-PAY   | Annual     | Annual with deductible |
| Employee Only       | \$63.50                     | \$68.79  | \$1,650.96 | \$2,150.96             | \$91.81                     | \$99.46  | \$2,387.04 | \$2,637.04             | \$118.67                  | \$128.56 | \$3,085.44  | \$3,085.44             | \$23.28                                | \$25.22  | \$605.28   | \$2,005.28             |
| Employee/Spouse     | \$176.99                    | \$191.74 | \$4,601.76 | \$5,601.76             | \$258.96                    | \$280.54 | \$6,732.96 | \$7,232.96             | \$347.60                  | \$376.57 | \$9,037.68  | \$9,037.68             | \$111.70                               | \$121.01 | \$2,904.24 | \$5,704.24             |
| Family              | \$201.16                    | \$217.93 | \$5,230.32 | \$6,230.32             | \$319.30                    | \$345.91 | \$8,301.84 | \$8,801.84             | \$390.96                  | \$423.54 | \$10,164.96 | \$10,164.96            | \$134.53                               | \$145.74 | \$3,497.76 | \$6,297.76             |
| Employee + Child    | \$148.62                    | \$161.00 | \$3,864.00 | \$4,864.00             | \$230.59                    | \$249.81 | \$5,995.44 | \$6,495.44             | \$319.23                  | \$345.83 | \$8,299.92  | \$8,299.92             | \$94.01                                | \$101.85 | \$2,444.40 | \$5,244.40             |
| Employee + Children | \$172.79                    | \$187.19 | \$4,492.56 | \$5,492.56             | \$290.93                    | \$315.17 | \$7,564.08 | \$8,064.08             | \$362.59                  | \$392.81 | \$9,427.44  | \$9,427.44             | \$116.84                               | \$126.58 | \$3,037.92 | \$5,837.92             |

| Cost Comparison between PPO \$500 and High Deductible Plan |                                     |                                                |                                          |
|------------------------------------------------------------|-------------------------------------|------------------------------------------------|------------------------------------------|
| EMPLOYEE COSTS                                             | PPO \$500 Annual Cost w/ Deductible | High Deductible Plan Annual Cost w/ Deductible | Savings by choosing High deductible Plan |
| Employee Only                                              | \$2,150.96                          | \$2,005.28                                     | \$145.68                                 |
| Employee/Spouse                                            | \$5,601.76                          | \$5,704.24                                     | -\$102.48                                |
| Family                                                     | \$6,230.32                          | \$6,297.76                                     | -\$67.44                                 |
| Employee + Child                                           | \$4,864.00                          | \$5,244.40                                     | -\$380.40                                |
| Employee + Children                                        | \$5,492.56                          | \$5,837.92                                     | -\$345.36                                |

# Primary Care Physician (PCP) vs. Specialist

## Primary Care Physician (PCP):

- Your PCP should be your first point of access of the healthcare system
- Your PCP is responsible for coordinating your care

## Specialist:

- Doctors that specialize in a particular field of care
- Your PCP would recommend a specialist if necessary

# Virtual Care, Retail Clinics, Urgent Care Centers, Emergency Room

## Virtual Care:

- Two-way video visit with physicians, therapists, dieticians
- Available 24/7 (average 2-minute wait time)
- Common Uses include: Sinusitis, Respiratory Infection, Urinary Tract Infection, Cough, Conjunctivitis, Influenza

## Retail Clinic:

- Located in stores such as CVS and Walmart
- Staffed by Nurse Practitioners and RNs with advanced training
- Good choice for non-urgent conditions, such as cold, flu shots, physicals, sore throats.



# Virtual Care, Retail Clinics, Urgent Care Centers, Emergency Rooms

## Urgent Care Center:

- Staffed by physicians
- Good choice for sprains, strains, minor broken bones, mild asthma attacks, minor infections, cuts, minor burns, and more

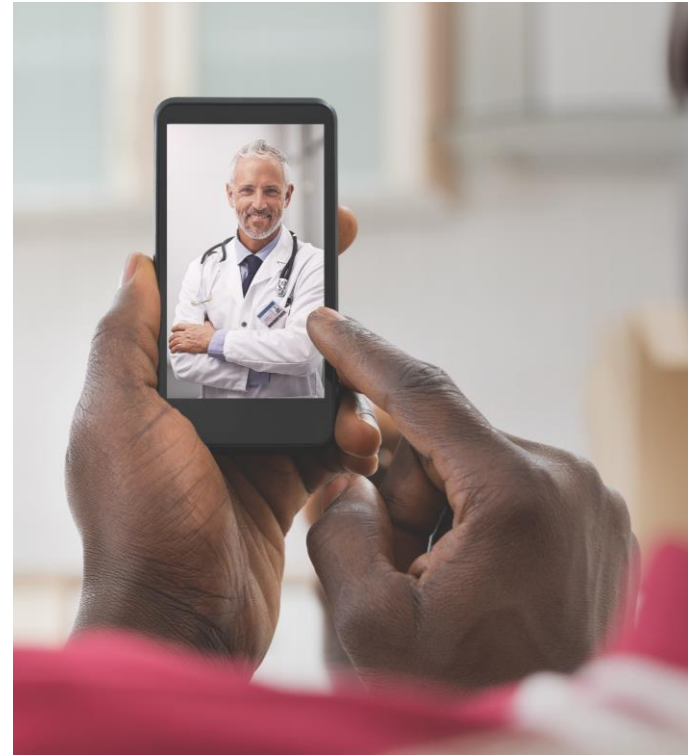
## Emergency Room:

- Good choice for heart attack, stroke, head trauma, loss of consciousness, severe burns, difficulty breathing, and more.

# Virtual Care

## What is a virtual care visit?

- See a doctor or healthcare provider anytime, anywhere in the U.S.
- Video visits to treat acute conditions that do not require a hands-on examination
  - Counseling and psychiatry services are available
- No car, no waiting room, no wasted time – the doctor is ready!



# Virtual Care

## Greater access to behavioral health services

Conveniently schedule virtual care visits with a counselor or psychiatrist

- **Counseling services**

- Anxiety
- Bereavement
- Depression
- Grief
- Insomnia
- LGBTQ counseling
- Life transitions
- OCD
- Panic attacks
- PTSD
- Trauma

- **Psychiatry services**

- Anorexia
- Anxiety disorders
- Bipolar disorder
- Bulimia
- Cognitive disorder
- Depression
- Insomnia
- OCD
- Panic attacks
- PTSD

# Virtual Care

## Nutrition counseling services include:

- Appointments seven days a week, including evenings
- Counseling provided by registered dietitians
- Structured, personalized meal plans delivered to your inbox after each visit

Counselors can address:

- Diabetic diet
- Digestive disorders
- Food allergies
- Gluten free and vegetarian diets
- High cholesterol or blood pressure
- Meal planning
- Pediatric nutrition
- Pregnancy diet
- Sports nutrition
- Vitamins and supplements
- Weight loss

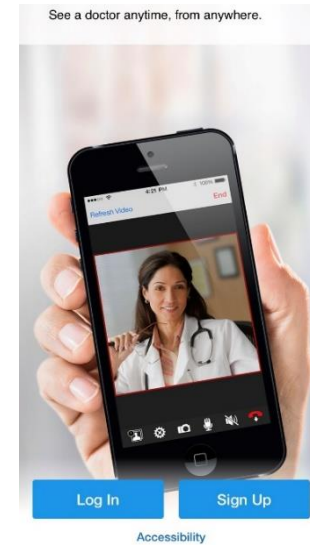
# How To Register For Virtual Care

## Two ways to sign up:

1. Download the free Capital BlueCross Virtual Care app



2. Visit [virtualcarecbc.com](https://virtualcarecbc.com)



**About You**

First Name (Legal)\*  
Last Name (Legal)\*  
Date of Birth \*  
Gender \*

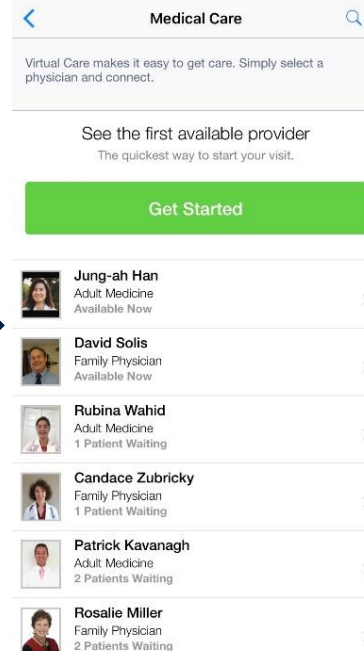
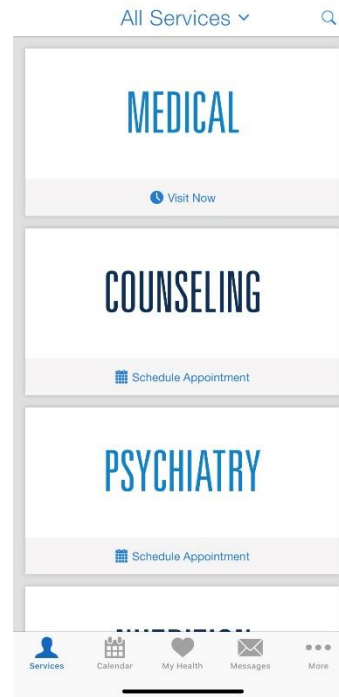
What is your current location?  
**Pennsylvania**

Email Address \*  
Confirm Email \*  
Password \*

I agree to these Terms of Use  ⓘ

Optional Information ⓘ  
Service Key ⓘ  
Health Plan

**Continue**



# Prescription Drugs

## Generic vs. Brand:

- Same chemical make-up, different fillers and dyes
- Generic substitution when available
- Generics have cheaper costs compared to brand
- Same route of administration

## When a generic is not available:

- Ask about alternative, lower cost medication in the same therapeutic class.

## Brand Preferred vs. Brand Non-Preferred

- Check your plan formulary (on Capital BlueCross website) to see if your medication is brand preferred or brand non-preferred
- Formulary includes effective, cost efficient options in each therapeutic class
- Brand Preferred is a lower cost

## Specialty Drugs

- Do not typically have an alternative

# Understanding Your Prescription Drug Plan

## Retail Pharmacy (up to a 30-day supply)\*

- \$25 deductible/member
- Generic: You pay 25% of the discounted cost.
- Brand Preferred: You pay 25% of the discounted cost.
- Brand Non-Preferred: You pay 45% of the discounted cost.

## Mail Order Pharmacy (up to a 90-day supply)\*

- Generic: \$25 copayment
- Brand Preferred: \$75 copayment
- Brand Non-Preferred: \$125 copayment

## Specialty Pharmacy (up to a 30-day supply)\*

- You pay 25% up to \$150.

\*Prescription drugs covered under the QHDHP are subject to the annual medical deductible before coinsurance and copays apply

# Prescription Drug Home Delivery (Up to a 90-Day Supply)

## Convenience and savings

- 90-day supply of prescriptions delivered straight to your home
- Home delivery cost-share applies (cheaper than retail)
- Set up an account (including payment information) with AllianceRx Walgreens Prime
- Ask your doctor to send your 90-day prescription to AllianceRx Walgreens Prime
- Continue managing your home delivery service (auto-refills, change in contact information, updated payment information, etc.) through your online account with AllianceRx Walgreens Prime



# Prescription Drug 90 Day My Way Option

- You can fill your 90-day prescriptions for maintenance drugs through home delivery or by picking them up at pharmacies that are part of the Extended Supply Network
  - This network includes pharmacies that are allowed to dispense higher amounts of medications to their customers
  - Most popular retail chain and grocery pharmacies are part of this network
- Find which pharmacies are part of the Extended Supply network by:
  - Logging in to your secure account at [CapitalBlueCross.com](https://www.CapitalBlueCross.com)
  - Or calling the Member Services number on your member ID card

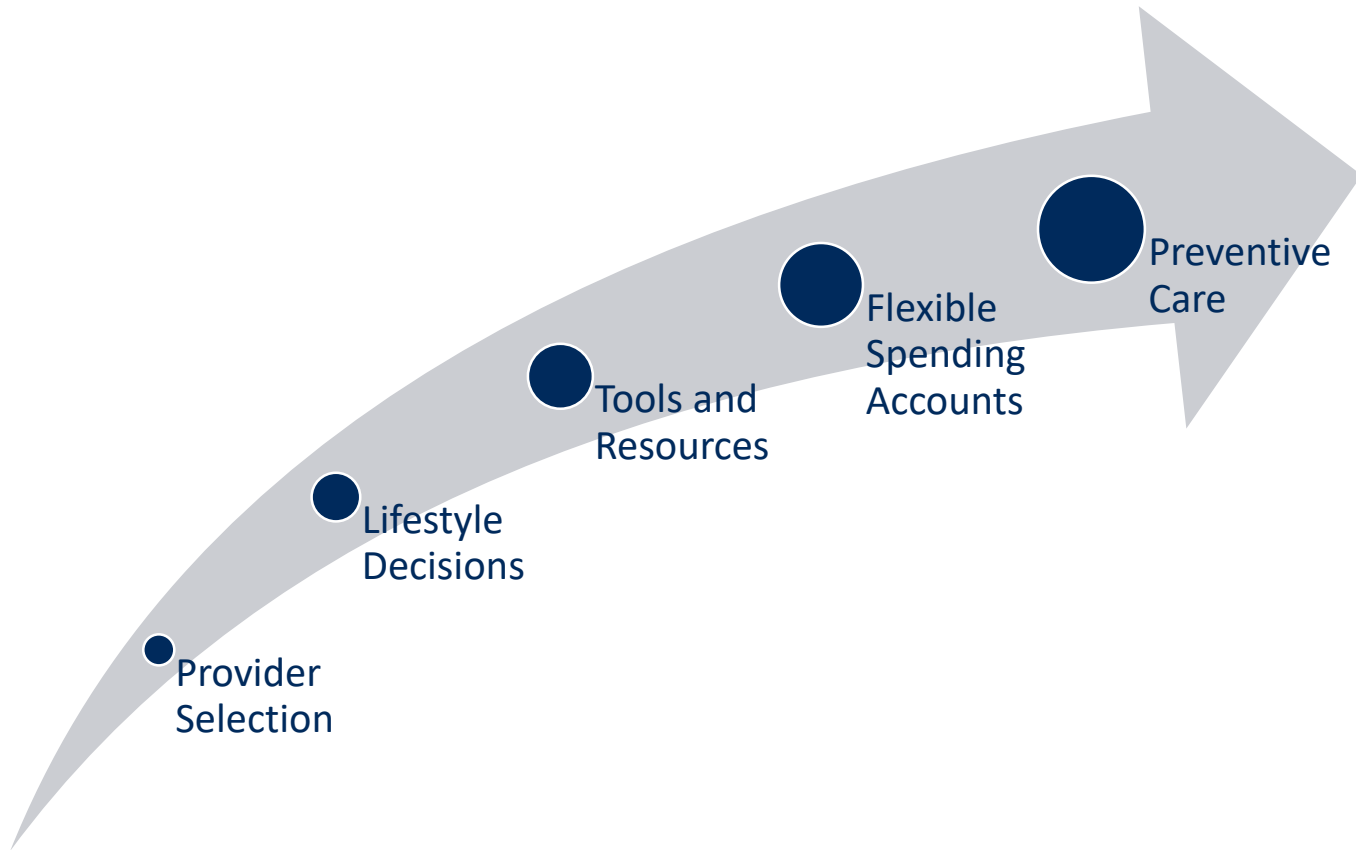
# Which Medical Plan Option Is Best For You?

Consider all of the following costs when comparing plans:

- Annual Payroll Deduction
- Expected Cost of Care in Copayments & Rx
- Expected Cost of Care in Deductible

Concerned about cash flow?  
Consider using a Flexible Spending Account.

# How do I save money?



# How do I save money on prescription drug costs?



# Cost savings based on provider selection

- **You can save hundreds of dollars a year simply by choosing where you get care:**
  - **Lab Services** – Save money when your lab services are performed by an in-network independent clinical laboratory as opposed to a hospital-based lab
  - **Ambulatory Surgical Centers** – Locations where doctors can perform same-day, or outpatient, surgeries at a lower rate than hospitals
  - **Primary Care Physicians** – Visit your PCP before seeing a specialist for your condition. Your PCP may be able to treat without referring you to a higher cost specialist. If you do need to see a specialist, your PCP can recommend an appropriate specialist type for your condition.

# Be Prepared

---

Do you have a PCP today?

---

Do you know where your closest in-network Retail Clinic, Urgent Care Center and Emergency Room are?

---

Traveling? Research in-network providers based on where you will be staying.



 ConnectCare3

## ConnectCare3 Services

---

**Our team is available at all  
points of your wellness journey.**



**Patient  
Advocates**



**Nurse Navigation**



**Chronic Disease  
Management**



**Nutrition  
Education**



**Tobacco Cessation**





# Chronic Disease Prevention Program

Expanded offering coming in 2021!

**This program is geared towards helping employees develop a healthy lifestyle and dietary habits *before* their condition progresses to a chronic disease.**

**Eligible conditions include:**

- **Elevated Cholesterol**
- **Prediabetes**
- **Pre-hypertension**
- **Overweight**
- **Family history of chronic diseases**



### Supporting You on Your Health and Wellness Journey

ConnectCare3 provides health and wellness services for employees and dependents covered on the health insurance program. ConnectCare3's services are provided free of charge to employees and their dependents.

#### Services We Offer

We focus on the details, so that you can focus on your care



##### Nurse Navigation

Sometimes the medical system can be challenging to handle alone. Let our registered nurses help you navigate the system after a diagnosis.



##### Chronic Disease Management

A team approach to managing chronic conditions, with nurses, health coaches, and a registered dietitian.



##### Nutrition Education

Learn the connection between food and health, so you can make smart decisions about your eating habits.



##### Tobacco Cessation

Designed to assist you in achieving and maintaining a tobacco-free life.



[View All Services](#)

# ConnectCare3 Resources

Visit [connectcare3.info](https://connectcare3.info) for more information on ConnectCare3's services and to get in enrolled in any of our services!

## Sign Up for Our Mailing List

When you visit [connectcare3.info](https://connectcare3.info) you have the opportunity to sign up for our mailing list to get resources sent directly to your inbox!

## What will hit your inbox?

- Newsletters
- Infographics
- Quizzes
- Informational Handouts
- Resources
- Testimonials
- Educational Videos
- Webinar Invites



**Call**

877.223.2350

**Email**

[info@connectcare3.com](mailto:info@connectcare3.com)

**Web**

[connectcare3.com](http://connectcare3.com)

