

January 2009 Benefit Modifications (4/1/09 for 126+ renewals)

Following is a Summary of Benefits for groups of 51-250 and 126+. Benefits are effective January 1, 2009 for all new business and renewing 51-250 groups. Effective date for renewing 126+ business is April 1, 2009.

Annual Benefit Changes	Products	Description
Preventive Services -	PPO, EPO, Power Care Advocate, Select PPO, BlueCard PPO and all BlueCard equivalent plans	1. Physical exam - remove \$250 calendar year limit 2. Add colon cancer screenings to the list of Adult Preventive Screenings
Preventive Services -	All PPO excluding Lumenos PPO Plans	Implement list of preventive services dx and HCPC codes as per the enterprise recommendation
BlueCard PPO Plans - "Other Providers"	BlueCard PPO	Skilled Nursing, ASC, Home Health, Home Infusion, Diagnostic, X-ray, lab, DME - change single tier of benefits to two tier to match other Par/Non Par coinsurance
BlueCard PPO Plans - Ambulatory Surgical Center Out-of-Network	BlueCard PPO	Ambulatory Surgical Center - Add \$350 benefit maximum to Ambulatory Surgical Center out of network to mirror CA equivalent plan
Complex Radiology	HMO 51-250 and 126+ (excludes Premier, Select HMO or Advantage HMO plans)	Add new language to Diagnostic X-ray & Lab: CT or CAT scan, MRI or nuclear cardiac scan - \$100 copay PET scan - \$100 copay
Mental/Nervous Disorders - Facility Based Care	All plans	Replace \$ limits with 30 days per calendar year
Mental/Nervous Disorders - Outpatient visits for psych testing or rehab care	All Plans	Replace \$ limits with 20 visits per calendar year
Rx 17	126+	Non-Formulary Tier - Add \$100 copay maximum per script retail
OnePlans - Rx benefits	51-250 and 126+	Non-Formulary Tier - Add \$100 copay maximum per script retail