BlueCross BlueShield of Oklahoma

Subject: Important Plan Changes Oklahoma Small Group 2027

Dear Group Administrator:

On your plan renewal date, there will be some changes to the benefits offered in your current plans.

Included with this letter is a list of all Blue Cross and Blue Shield of Oklahoma small group plans and their benefit level changes. Note: This is only a list of plans with benefit changes – not a list of all BCBSOK plans.

Your next steps:

- Find the seven-digit plan ID for your current plan(s), in the "Current Health Plans" section of your renewal exhibit
- Use that seven-digit plan ID to find your group's benefit changes in the "Plan Changes" document

If you would like to keep your current plan(s) at renewal, nothing else is needed. Your plan(s) will continue with no interruption. If you would like to make a change, contact your broker or call us with questions. A Benefit Program Application Amendment must be completed and returned to us for any changes to your group's coverage.

Our goal is to serve your health care coverage needs through all of life's changes. If you have any questions, our team stands ready to help.

Sincerely,

Blue Cross and Blue Shield of Oklahoma

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans *Small Group (2-50)*

HOW TO FIND PLAN

1. Locate 7-character Plan ID in renewal materials
2. Press CTRL + F
3. Enter the Plan ID or plan name

The following benefit changes will apply to all Small Group ACA plans in our product portfolio, not just ones listed on the following pages:

- Changes to the 2027 Health Insurance Drug List.
- Updates to the 2027 Preferred Pharmacy Network.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans *Small Group (2-50)*

The following updates apply at renewal:

Blue Advantage Bronze PPO 106; B730ADT

- In-network individual Deductible will change from $7,350 to $7,850.
- In-network family Deductible will change from $14,700 to $15,700.
- In-network individual Out-of-Pocket Maximum will change from $7,350 to $7,850.
- In-network family Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network individual Deductible will change from $14,700 to $15,700.
- Out-of-network family Deductible will change from $29,400 to $31,400.
- Out-of-network individual Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network family Out-of-Pocket Maximum will change from $29,400 to $31,400.

Blue Advantage Gold PPO 110; G745ADT

- In-network individual Out-of-Pocket Maximum will change from $4,750 to $5,150.
- In-network family Out-of-Pocket Maximum will change from $14,250 to $15,450.

Blue Advantage Gold PPO 136; G8M2ADT

- In-network individual Deductible will change from $3,450 to $3,750.
- In-network family Deductible will change from $10,350 to $11,250.
- In-network individual Out-of-Pocket Maximum will change from $3,450 to $3,750.
- In-network family Out-of-Pocket Maximum will change from $10,350 to $11,250.
- Out-of-network individual Deductible will change from $6,900 to $7,500.
- Out-of-network family Deductible will change from $20,700 to $22,500.
- Out-of-network individual Out-of-Pocket Maximum will change from $6,900 to $7,500.
- Out-of-network family Out-of-Pocket Maximum will change from $20,700 to $22,500.

Blue Advantage Bronze PPO 130; B8K0ADT

- In-network individual Deductible will change from $8,800 to $9,400.
- In-network family Deductible will change from $17,600 to $18,800.
- In-network individual Out-of-Pocket Maximum will change from $8,800 to $9,400.
- In-network family Out-of-Pocket Maximum will change from $17,600 to $18,800.
- Out-of-network individual Deductible will change from $17,600 to $18,800.
- Out-of-network family Deductible will change from $35,200 to $37,600.
- Out-of-network individual Out-of-Pocket Maximum will change from $17,600 to $18,800.
- Out-of-network family Out-of-Pocket Maximum will change from $35,200 to $37,600.

Blue Advantage Gold PPO 119; G8J3ADT

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $3,700 to $3,800.
- In-network family Out-of-Pocket Maximum will change from $11,100 to $11,400.
- Out-of-network individual Deductible will change from $10,200 to $10,500.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Advantage Platinum PPO 101; P710ADT

- In-network individual Out-of-Pocket Maximum will change from $1,500 to $2,500.
- In-network family Out-of-Pocket Maximum will change from $4,500 to $7,500.

Blue Advantage Platinum PPO 116; P8E1ADT

- In-network individual Out-of-Pocket Maximum will change from $2,250 to $2,900.
- In-network family Out-of-Pocket Maximum will change from $6,750 to $8,700.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans

Small Group (2-50)

The following updates apply at renewal:

Blue Advantage Platinum PPO 122; P8K1ADT

- In-network individual Out-of-Pocket Maximum will change from $2,250 to $2,750.
- In-network family Out-of-Pocket Maximum will change from $6,750 to $8,250.

Blue Advantage Silver PPO 105; S731ADT

- In-network individual Out-of-Pocket Maximum will change from $10,000 to $11,750.
- In-network family Out-of-Pocket Maximum will change from $20,000 to $23,500.

Blue Advantage Silver PPO 115; S702ADT

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $7,100 to $8,250.
- In-network family Out-of-Pocket Maximum will change from $14,200 to $16,500.
- Out-of-network individual Deductible will change from $6,800 to $7,000.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Advantage Silver PPO 121; S8J4ADT

- In-network individual Out-of-Pocket Maximum will change from $7,000 to $7,600.
- In-network family Out-of-Pocket Maximum will change from $14,000 to $15,200.

Blue Advantage Platinum PPO 118; P8J6ADT

- In-network individual Out-of-Pocket Maximum will change from $1,750 to $2,500.
- In-network family Out-of-Pocket Maximum will change from $5,250 to $7,500.

Blue Advantage Silver PPO 104; S730ADT

- In-network individual Out-of-Pocket Maximum will change from $9,200 to $10,750.
- In-network family Out-of-Pocket Maximum will change from $18,400 to $21,500.

Blue Advantage Silver PPO 114; S8K1ADT

- In-network individual Out-of-Pocket Maximum will change from $8,600 to $9,750.
- In-network family Out-of-Pocket Maximum will change from $17,200 to $19,500.

Blue Advantage Silver PPO 117; S8E1ADT

- In-network individual Out-of-Pocket Maximum will change from $9,200 to $9,750.
- In-network family Out-of-Pocket Maximum will change from $18,400 to $19,500.

Blue Advantage Silver PPO 129; S8K9ADT

- Urgent Care Office Visit copayment will change from Deductible Coinsurance to $50.

Blue Advantage Silver PPO 131; S8K5ADT

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $7,100 to $8,500.
- In-network family Out-of-Pocket Maximum will change from $14,200 to $17,000.
- Out-of-network individual Deductible will change from $6,800 to $7,000.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Choice Gold PPO 202; G731CHC

- In-network individual Out-of-Pocket Maximum will change from $4,750 to $5,000.
- In-network family Out-of-Pocket Maximum will change from $14,250 to $15,000.

Blue Choice Platinum PPO 208; P8J1CHC

- In-network individual Out-of-Pocket Maximum will change from $1,750 to $2,500.
- In-network family Out-of-Pocket Maximum will change from $5,250 to $7,500.

Blue Choice Silver PPO 209; S8J9CHC

- In-network individual Out-of-Pocket Maximum will change from $6,100 to $7,250.
- In-network family Out-of-Pocket Maximum will change from $12,200 to $14,500.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans

Small Group (2-50)

The following updates apply at renewal:

Blue Choice Bronze PPO 207; B730CHC

- In-network individual Deductible will change from $7,350 to $7,850.
- In-network family Deductible will change from $14,700 to $15,700.
- In-network individual Out-of-Pocket Maximum will change from $7,350 to $7,850.
- In-network family Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network individual Deductible will change from $14,700 to $15,700.
- Out-of-network family Deductible will change from $29,400 to $31,400.
- Out-of-network individual Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network family Out-of-Pocket Maximum will change from $29,400 to $31,400.

Blue Choice Gold PPO 203; G732CHC

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- Out-of-network individual Deductible will change from $6,800 to $7,000.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Choice Silver PPO 204; S730CHC

- In-network individual Out-of-Pocket Maximum will change from $9,200 to $10,750.
- In-network family Out-of-Pocket Maximum will change from $18,400 to $21,500.

Blue Options Bronze PPO 306; B710OPT

- In-network individual Out-of-Pocket Maximum will change from $7,350 BP / $7,600 BC to $8,250 BP / $8,500 BC.
- In-network family Out-of-Pocket Maximum will change from $14,700 BP / $15,200 BC to $16,500 BP / $17,000 BC.

Blue Options Gold PPO 302; G721OPT

- In-network individual Out-of-Pocket Maximum will change from $5,250 BP / $6,750 BC to $5,500 BP / $6,750 BC.

Blue Options Silver PPO 304; S710OPT

- In-network individual Out-of-Pocket Maximum will change from $8,750 BP / $8,950 BC to $10,200 BP / $10,400 BC.
- In-network family Out-of-Pocket Maximum will change from $17,500 BP / $17,900 BC to $20,400 BP / $20,800 BC.

Blue Options Silver PPO 312; S8J0OPT

- In-network individual Out-of-Pocket Maximum will change from $5,600 BP / $6,100 BC to $5,900 BP / $6,400 BC.
- In-network family Out-of-Pocket Maximum will change from $11,200 BP / $12,200 BC to $11,800 BP / $12,800 BC.

Blue Options Platinum PPO 311; P8J7OPT

- In-network individual Out-of-Pocket Maximum will change from $1,750 BP / $3,000 BC to $2,350 BP / $3,000 BC.
- In-network family Out-of-Pocket Maximum will change from $5,250 BP / $9,000 BC to $7,050 BP / $9,000 BC.

Blue Options Silver PPO 310; S8E1OPT

- In-network individual Deductible will change from $5,250 to $5,900.
- In-network family Deductible will change from $10,500 to $11,800.
- In-network individual Out-of-Pocket Maximum will change from $5,250 BP / $6,600 BC to $5,900 BP / $8,500 BC.
- In-network family Out-of-Pocket Maximum will change from $10,500 BP / $13,200 BC to $11,800 BP / $17,000 BC.
- Out-of-network individual Deductible will change from $10,500 to $11,800.
- Out-of-network family Deductible will change from $21,000 to $23,600.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans

Small Group (2-50)

The following updates apply at renewal:

Blue Preferred Bronze PPO 407; B730PFR

- In-network individual Deductible will change from $7,350 to $7,850.
- In-network family Deductible will change from $14,700 to $15,700.
- In-network individual Out-of-Pocket Maximum will change from $7,350 to $7,850.
- In-network family Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network individual Deductible will change from $14,700 to $15,700.
- Out-of-network family Deductible will change from $29,400 to $31,400.
- Out-of-network individual Out-of-Pocket Maximum will change from $14,700 to $15,700.
- Out-of-network family Out-of-Pocket Maximum will change from $29,400 to $31,400.

Blue Preferred Bronze PPO 428; B8K0PFR

- In-network individual Deductible will change from $8,800 to $9,400.
- In-network family Deductible will change from $17,600 to $18,800.
- In-network individual Out-of-Pocket Maximum will change from $8,800 to $9,400.
- In-network family Out-of-Pocket Maximum will change from $17,600 to $18,800.
- Out-of-network individual Deductible will change from $17,600 to $18,800.
- Out-of-network family Deductible will change from $35,200 to $37,600.
- Out-of-network individual Out-of-Pocket Maximum will change from $17,600 to $18,800.
- Out-of-network family Out-of-Pocket Maximum will change from $35,200 to $37,600.

Blue Preferred Gold PPO 418; G8J2PFR

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $3,700 to $3,800.
- In-network family Out-of-Pocket Maximum will change from $11,100 to $11,400.
- Out-of-network individual Deductible will change from $10,200 to $10,500.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Preferred Platinum PPO 401; P710PFR

- In-network individual Out-of-Pocket Maximum will change from $1,500 to $2,500.
- In-network family Out-of-Pocket Maximum will change from $4,500 to $7,500.

Blue Preferred Platinum PPO 420; P8K4PFR

- In-network individual Out-of-Pocket Maximum will change from $1,750 to $2,500.
- In-network family Out-of-Pocket Maximum will change from $5,250 to $7,500.

Blue Preferred Gold PPO 403; G731PFR

- In-network individual Out-of-Pocket Maximum will change from $4,750 to $5,150.
- In-network family Out-of-Pocket Maximum will change from $14,250 to $15,450.

Blue Preferred Gold PPO 435; G8M2PFR

- In-network individual Deductible will change from $3,450 to $3,750.
- In-network family Deductible will change from $10,350 to $11,250.
- In-network individual Out-of-Pocket Maximum will change from $3,450 to $3,750.
- In-network family Out-of-Pocket Maximum will change from $10,350 to $11,250.
- Out-of-network individual Deductible will change from $6,900 to $7,500.
- Out-of-network family Deductible will change from $20,700 to $22,500.
- Out-of-network individual Out-of-Pocket Maximum will change from $6,900 to $7,500.
- Out-of-network family Out-of-Pocket Maximum will change from $20,700 to $22,500.

Blue Preferred Platinum PPO 416; P8E1PFR

- In-network individual Out-of-Pocket Maximum will change from $2,250 to $2,900.
- In-network family Out-of-Pocket Maximum will change from $6,750 to $8,700.

Blue Preferred Platinum PPO 421; P8K1PFR

- In-network individual Out-of-Pocket Maximum will change from $2,250 to $2,750.
- In-network family Out-of-Pocket Maximum will change from $6,750 to $8,250.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans *Small Group (2-50)*

The following updates apply at renewal:

Blue Preferred Silver PPO 405; S731PFR

- In-network individual Out-of-Pocket Maximum will change from $9,200 to $10,750.
- In-network family Out-of-Pocket Maximum will change from $18,400 to $21,500.

Blue Preferred Silver PPO 413; S8K1PFR

- In-network individual Out-of-Pocket Maximum will change from $8,600 to $9,750.
- In-network family Out-of-Pocket Maximum will change from $17,200 to $19,500.

Blue Preferred Silver PPO 419; S8J5PFR

- In-network individual Out-of-Pocket Maximum will change from $7,000 to $7,600.
- In-network family Out-of-Pocket Maximum will change from $14,000 to $15,200.

Blue Preferred Silver PPO 429; S8K0PFR

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $7,100 to $8,250.
- In-network family Out-of-Pocket Maximum will change from $14,200 to $16,500.
- Out-of-network individual Deductible will change from $6,800 to $7,000.
- Out-of-network family Deductible will change from $20,400 to $21,000.

Blue Preferred Silver PPO 406; S732PFR

- In-network individual Out-of-Pocket Maximum will change from $10,000 to $11,750.
- In-network family Out-of-Pocket Maximum will change from $20,000 to $23,500.

Blue Preferred Silver PPO 417; S8E1PFR

- In-network individual Out-of-Pocket Maximum will change from $9,200 to $9,750.
- In-network family Out-of-Pocket Maximum will change from $18,400 to $19,500.

Blue Preferred Silver PPO 427; S8K9PFR

- Urgent Care Office Visit copayment will change from Deductible Coinsurance to $50.

Blue Preferred Silver PPO 430; S8K5PFR

- In-network individual Deductible will change from $3,400 to $3,500.
- In-network family Deductible will change from $10,200 to $10,500.
- In-network individual Out-of-Pocket Maximum will change from $7,100 to $8,500.
- In-network family Out-of-Pocket Maximum will change from $14,200 to $17,000.
- Out-of-network individual Deductible will change from $6,800 to $7,000.
- Out-of-network family Deductible will change from $20,400 to $21,000.

BlueSolutions Bronze PPO 505; B710BSL

- In-network individual Out-of-Pocket Maximum will change from $7,350 BA / $7,600 BP to $8,250 BA / $8,500 BP.
- In-network family Out-of-Pocket Maximum will change from $14,700 BA / $15,200 BP to $16,500 BA / $17,000 BP.

BlueSolutions Platinum PPO 501; P8J7BSL

- In-network individual Out-of-Pocket Maximum will change from $1,750 BA / $3,000 BP to $2,350 BA / $3,000 BP.
- In-network family Out-of-Pocket Maximum will change from $5,250 BA / $9,000 BP to $7,050 BA / $9,000 BP.

BlueSolutions Silver PPO 504; S8E1BSL

- In-network individual Deductible will change from $5,250 to $5,900.
- In-network family Deductible will change from $10,500 to $11,800.
- In-network individual Out-of-Pocket Maximum will change from $5,250 BA / $6,600 BP to $5,900 BA / $8,500 BP.
- In-network family Out-of-Pocket Maximum will change from $10,500 BA / $13,200 BP to $11,800 BA / $17,000 BP.
- Out-of-network individual Deductible will change from $10,500 to $11,800.
- Out-of-network family Deductible will change from $21,000 to $23,600.

Blue Cross and Blue Shield of Oklahoma

2027 Affordable Care Act (ACA)/Metallic Plans

Small Group (2-50)

The following updates apply at renewal:

BlueSolutions Gold PPO 502; G721BSL

- In-network individual Out-of-Pocket Maximum will change from $5,250 BA / $6,750 BP to $5,500 BA / $6,750 BP.

BlueSolutions Silver PPO 503; S710BSL

- In-network individual Out-of-Pocket Maximum will change from $8,750 BA / $8,950 BP to $10,200 BA / $10,400 BP.
- In-network family Out-of-Pocket Maximum will change from $17,500 BA / $17,900 BP to $20,400 BA / $20,800 BP.