



**Subject: Important Plan Changes Oklahoma Small Group 2023**

Dear Group Administrator:

On your plan renewal date, there will be some changes to the benefits offered in your current plans, such as prescription drug formulary changes.

Included with this letter is a list of all Blue Cross and Blue Shield of Oklahoma small group plans and their benefit level changes.

**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

## 2023 Affordable Care Act (ACA)/Metallic Plans

*Small Group (2-50)*

To find your renewal group's 2023 benefit changes, search for the plan by pressing CTRL, then the F key; enter the plan name or 7-character plan ID in the search field and press enter.

### **For the following plans, there are only updates to the 2023 Preferred Pharmacy Network and changes to the 2023 Health Insurance Drug List:**

Blue Advantage Bronze PPO 106; B730ADT  
Blue Advantage Bronze PPO 130; B8K0ADT  
Blue Advantage Gold PPO 112; G746ADT  
Blue Advantage Platinum PPO 101; P710ADT  
Blue Advantage Platinum PPO 116; P8E1ADT  
Blue Advantage Platinum PPO 118; P8J6ADT  
Blue Advantage Silver PPO 114; S8K1ADT  
Blue Advantage Silver PPO 120; S8J8ADT  
Blue Advantage Silver PPO 121; S8J4ADT  
Blue Advantage Silver PPO 128; S8K2ADT  
Blue Advantage Silver PPO 129; S8K9ADT  
Blue Choice Bronze PPO 207; B730CHC  
Blue Choice Platinum PPO 208; P8J1CHC  
Blue Choice Silver PPO 209; S8J9CHC

Blue Options Bronze PPO 306; B710OPT  
Blue Options Platinum PPO 311; P8J7OPT  
Blue Options Silver PPO 312; S8J0OPT  
Blue Preferred Bronze PPO 407; B730PFR  
Blue Preferred Bronze PPO 428; B8K0PFR  
Blue Preferred Gold PPO 412; G735PFR  
Blue Preferred Platinum PPO 401; P710PFR  
Blue Preferred Platinum PPO 416; P8E1PFR  
Blue Preferred Platinum PPO 420; P8K4PFR  
Blue Preferred Silver PPO 413; S8K1PFR  
Blue Preferred Silver PPO 415; S701PFR  
Blue Preferred Silver PPO 419; S8J5PFR  
Blue Preferred Silver PPO 427; S8K9PFR  
Blue Preferred Silver PPO 432; S8L1PFR

#### **Blue Choice Gold PPO 201; G730CHC**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,000 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$15,000 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Choice Gold PPO 202; G731CHC**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$4,500 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$13,500 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Choice Gold PPO 203; G732CHC**

In 2023, your in-network individual Deductible will change to \$3,000 from \$2,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,000 from \$8,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network individual Deductible will change to \$6,000 from \$5,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$18,000 from \$15,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Choice Silver PPO 204; S730CHC**

In 2023, your in-network individual Deductible will change to \$4,250 from \$3,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$12,750 from \$11,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$8,550. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$17,100. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$8,500 from \$7,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$25,500 from \$23,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Primary Care Provider office visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$65 from \$55. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 410; G733PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your Primary Care Provider office visit copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$55 from \$50. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Preferred Drug Cost Shares will change to \$10/\$20/\$50/\$100/\$150/\$250 from \$0/\$10/\$50/\$100/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Non-Preferred Drug Cost Shares will change to \$20/\$30/\$70/\$120/\$150/\$250 from \$10/\$20/\$70/\$120/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 402; G730PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,000 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$15,000 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 403; G731PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$4,500 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$13,500 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Silver PPO 405; S731PFR**

In 2023, your in-network individual Deductible will change to \$4,250 from \$3,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$12,750 from \$11,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$8,550. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$17,100. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$8,500 from \$7,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$25,500 from \$23,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Primary Care Provider office visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$65 from \$55. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Silver PPO 417; S8E1PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$7,900. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$15,800. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Silver PPO 406; S732PFR**

In 2023, your in-network individual Deductible will change to \$6,750 from \$6,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$13,500 from \$13,200. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$8,550. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$17,100. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$13,500 from \$13,200. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$27,000 from \$26,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Primary Care Provider office visit copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$50 from \$40. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 418; G8J2PFR**

In 2023, your in-network individual Deductible will change to \$3,000 from \$2,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,000 from \$8,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 119; G8J3ADT**

In 2023, your in-network individual Deductible will change to \$3,000 from \$2,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,000 from \$8,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 108; G743ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$6,000 from \$5,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$12,000 from \$11,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 109; G744ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your Primary Care Provider office visit copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$55 from \$50. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$35 from \$30. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Preferred Drug Cost Shares will change to \$10/\$20/\$50/\$100/\$150/\$250 from \$0/\$10/\$50/\$100/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Non-Preferred Drug Cost Shares will change to \$20/\$30/\$70/\$120/\$150/\$250 from \$10/\$20/\$70/\$120/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 102; G740ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,000 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$15,000 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 110; G745ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$4,500 from \$4,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$13,500 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.



### **Blue Advantage Silver PPO 115; S702ADT**

In 2023, your in-network individual Deductible will change to \$3,250 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,750 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$6,500 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$19,500 from \$18,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Silver PPO 104; S730ADT**

In 2023, your in-network individual Deductible will change to \$4,250 from \$3,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$12,750 from \$11,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$8,550. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$17,100. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$8,500 from \$7,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$25,500 from \$23,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Primary Care Provider office visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$65 from \$55. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$45 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.



### **Blue Advantage Silver PPO 117; S8E1ADT.**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$7,900. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$15,800. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Silver PPO 105; S731ADT**

In 2023, your in-network individual Deductible will change to \$6,750 from \$6,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$13,500 from \$13,200. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$9,100 from \$8,550. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$18,200 from \$17,100. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$13,500 from \$13,200. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$27,000 from \$26,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Primary Care Provider office visit copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$50 from \$40. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$30 from \$20. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Options Gold PPO 301; G720OPT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,000 BP / \$6,000 BC from \$4,500 BP / \$5,500 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Options Gold PPO 302; G721OPT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,000 BP / \$6,500 BC from \$4,500 BP / \$6,000 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Options Silver PPO 304; S710OPT**

In 2023, your in-network individual Deductible will change to \$5,000 from \$4,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$15,000 from \$13,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$8,500 BP / \$8,700 BC from \$8,000 BP / \$8,550 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$17,000 BP / \$17,400 BC from \$16,000 BP / \$17,100 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$10,000 from \$9,200. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$30,000 from \$27,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Imaging Services coinsurance will change to 70% BP / 60% BC from 80% BP / 70% BC. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

In 2023, your Specialist Office Visit copayment will change to \$80 from \$75. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Plan coinsurance will change to 70% BP / 60% BC from 80% BP / 70% BC. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

In 2023, your emergency room coinsurance will change to 70% from 80%. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

In 2023, your in-network Facility Surgery coinsurance will change to 70% BP / 60% BC from 80% BP / 70% BC. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

In 2023, your Facility lab services coinsurance will change to 70% BP / 60% BC from 80% BP / 70% BC. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

In 2023, your Facility X-ray services coinsurance will change to 70% BP / 60% BC from 80% BP / 70% BC. The coinsurance is the percentage of the cost that you must pay for a covered service. It applies after you meet your deductible.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Options Silver PPO 310; S8E1OPT**

In 2023, your in-network individual Deductible will change to \$4,900 from \$4,500. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,800 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$4,900 BP / \$6,000 BC from \$4,500 BP / \$6,000 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$9,800 BP / \$12,000 BC from \$9,000 BP / \$12,000 BC. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$9,800 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$19,600 from \$18,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Platinum PPO 122; P8K1ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$2,000 from \$3,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$6,000 from \$9,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 123; G8K2ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,500 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,500 from \$15,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 124; G8K3ADT**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,500 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,500 from \$15,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your Primary Care Provider office visit copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$60 from \$55. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Gold PPO 126; G8K6ADT**

In 2023, your in-network individual Deductible will change to \$2,500 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$7,500 from \$8,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$8,000 from \$8,700. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,000 from \$17,400. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$5,000 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$15,000 from \$17,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Emergency Room Services per occurrence fee will change to \$500 from \$400. This is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Silver PPO 131; S8K5ADT**

In 2023, your in-network individual Deductible will change to \$3,250 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,750 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$6,500 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$19,500 from \$18,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Advantage Silver PPO 134; S8K8ADT**

In 2023, your in-network individual Deductible will change to \$5,800 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$11,600 from \$12,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,800 from \$6,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$11,600 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Out-of-Pocket Maximum will change to \$11,600 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network family Out-of-Pocket Maximum will change to \$23,200 from \$24,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$11,600 from \$12,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$23,200 from \$24,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Platinum PPO 421; P8K1PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$2,000 from \$3,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$6,000 from \$9,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 422; G8K2PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,500 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,500 from \$15,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 423; G8K5PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$6,000 from \$5,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$12,000 from \$16,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 424; G8K3PFR**

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,500 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,500 from \$15,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your Primary Care Provider office visit copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Specialist Office Visit copayment will change to \$60 from \$55. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Virtual Visit copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2023, your Mental Health / Substance Usage copayment will change to \$40 from \$35. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Gold PPO 426; G8K6PFR**

In 2023, your in-network individual Deductible will change to \$2,500 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$7,500 from \$8,700. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$8,000 from \$8,700. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$16,000 from \$17,400. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$5,000 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$15,000 from \$17,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your Emergency Room Services per occurrence fee will change to \$500 from \$400. This is a fixed dollar amount you are required to pay for covered services at the time you receive care.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.



### **Blue Preferred Silver PPO 429; S8K0PFR**

In 2023, your in-network individual Deductible will change to \$3,250 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,750 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$6,500 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$19,500 from \$18,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Silver PPO 430; S8K5PFR**

In 2023, your in-network individual Deductible will change to \$3,250 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$9,750 from \$9,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$7,000 from \$6,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$6,500 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$19,500 from \$18,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.

### **Blue Preferred Silver PPO 433; S8K8PFR**

In 2023, your in-network individual Deductible will change to \$5,800 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023 your in-network family Deductible will change to \$11,600 from \$12,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$5,800 from \$6,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$11,600 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Out-of-Pocket Maximum will change to \$11,600 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network family Out-of-Pocket Maximum will change to \$23,200 from \$24,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Deductible will change to \$11,600 from \$12,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$23,200 from \$24,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

Updates to the 2023 Preferred Pharmacy Network.

Changes to the 2023 Health Insurance Drug List.