

Synergy Consulting Group

Important Health Insurance Information

Renewal Date – December 1, 2014

Effective with our renewal, we are offering the following medical plans:

Anthem Blue Cross Blue Shield				
	Option 1 – Traditional Plan Blue Access Option D56 w/RX 8		Option 2 – HSA compatible plan Lumenos HSA Option E55 w/RX 9	
	In Network	Out of Network	In Network	Out of Network
Preventive Services	Covered at 100% No copay or coinsurance	Subject to deductible and coinsurance	Covered at 100% No copay or coinsurance	Subject to deductible and coinsurance
Deductible	\$3,000 single \$6,000 family	\$6,000 single \$12,000 family	\$5,000 single \$10,000 family	\$10,000 single \$20,000 family
Out of Pocket Maximum	\$3,000 single \$6,000 family	\$12,000 single \$24,000 family	\$6,050 single \$12,100 family	\$12,100 \$24,200 family
Coinsurance	100% after deductible	70% after deductible	100% after deductible	70% after deductible
Office Visit Copay	\$30 primary physician \$60 specialist	Subject to deductible and coinsurance	100% after deductible	70% after deductible
Emergency Room Services Copay	\$300 copay		100% after deductible	70% after deductible
Prescription Drugs Retail Program In network	Tier 1 - \$10 copay Tier 2 - \$35 copay Tier 3 - 70 copay Tier 4 - 25%, max \$200, up to \$2,500 out of pocket maximum		100% after deductible	50% after deductible, minimum \$70

Dental and Vision coverage is now available through Anthem.

Anthem Dental	Coverage Level / In or Out of Network
Diagnostic and Preventive Services	100%
Basic Services	80%
Major Services	50%
Orthodontics (dependent children only)	50% with a \$1,000 separate lifetime maximum
Calendar Year Plan Maximum Per Person	\$1,000
Deductible (calendar year)	\$50 per individual / \$150 family maximum Does not apply to diagnostic and preventive or orthodontic services

Anthem Vision	
Exam copayment	\$10
Lens copayment	\$20
Frame allowance	\$130 retail value
Contact allowance	\$130
Frequency Limits	Exam – 12 months Lenses – 12 months Frames – 24 months Contacts – 12 months

Please refer to the Summary of Benefits for plan details and the Election Form for premium information.