

My Benefits

Blue Shield EPO Plan	Home Delivery (90 days)	Retail (In-Network) 30 days
Generics	\$20	\$10
Preferred Brands	\$70	\$35
Non-Preferred Brands	\$100	\$50
Specialty	20% with \$100 Copay Max	
Deductible (Individual/Family)	\$25 / \$75; applies to brand name drugs only	
Out of Pocket Max (Individual/ Family)	\$5,100 / \$10,200	

Blue Shield EPO Low Medicare Plan	Home Delivery (90 days)	Retail (In-Network) 30 days
Generics	\$20	\$10
Preferred Brands	\$70	\$35
Non-Preferred Brands	\$100	\$50
Specialty	20% with \$100 Copay Max	
Deductible (Individual/Family)	\$25 / \$75; applies to brand name drugs only	
Out of Pocket Max (Individual/ Family)	\$1,500	

Blue Shield HDHP Plan	Home Delivery (90 days)	Retail (In-Network) 30 days
Generics	20% coinsurance	
Preferred Brands	20% coinsurance	
Non-Preferred Brands	20% coinsurance	
Specialty	20% up to \$300	20% up to \$100
Deductible (Individual/Family)	\$1,700 / \$3,400	
Out of Pocket Max (Individual/ Family)	\$4,500 / \$9,000	

If you are enrolled in the High-Deductible Health Plan (HDHP), this plan includes a combined Medical/Pharmacy deductible and out of pocket maximum. All plans are subject to IRS-mandated changes, including minimum deductible and out-of-pocket maximum requirements