

Affordable and Flexible Blue Cross Blue Shield of Vermont Health Plans

- Employers can offer their employees a choice of two different plan options.
- Rates are guaranteed for one year: January 1, 2012 - December 31, 2012
- Recipients choose the physician they want to see - no referral needed
- In-network coverage is available throughout the United States. Coverage (out-of-network) is in effect world-wide. Check with BCBS of Vermont for your specific needs, no rider needed.
- Providers bill BCBS directly - no paperwork is involved for businesses
- Unlimited preventative care - no charge for mammograms or colonoscopies on all plans
- Generic drugs: \$3 for 30 days on the first three plans listed below. Lower cost maintenance prescriptions available by mail.
- HSA plans offer 100% coverage on preventative medicines for the PPACA list (office visits, tests)
- Dependent children covered to age 26

Vermont Freedom Plans (PPO)	Single	2-Person	Family	Carve-out
\$1,500/\$3,000 deductible PPO - \$30/\$50 PCP/SPC office visit - 80% coinsurance \$6,000/\$12,000 out-of-pocket limit - 100% Preventive Coverage	\$550	\$1,073	\$1,433	\$496
\$2,500/\$5,000 deductible PPO - \$30/\$50 PCP/SPC office visit - 80% coinsurance \$6,000/\$12,000 out-of-pocket limit - 100% Preventive Coverage	\$404	\$793	\$1,124	\$322
\$3,000/\$6,000 deductible PPO - \$30/\$50 PCP/SPC office visit - 100% coinsurance \$3,000/\$6,000 out-of-pocket limit - 100% Preventive Coverage	\$410	\$800	\$1,135	\$325
\$4,000/\$8,000 deductible PPO - \$30/\$50 PCP/SPC office visit - 80% coinsurance \$8,000/\$16,000 out-of-pocket limit - 100% Preventive Coverage	\$348	\$681	\$967	\$279
Prescription Coverage for all PPO plans: \$3 generic, 50% brand, to an out-of-pocket maximum of \$2,500/\$5,000	Included in price above			
Comprehensive Consumer Directed Health Plan (HSA Compatible)	Single	2-Person	Family	Carve-out
\$2,000/\$4,000 deductible CDHP (aggregate*) - 50% coinsurance - \$5,950/\$11,900 out-of-pocket limit - 100% Preventive Coverage - Wellness Prescriptions no cost for generic, 50% for brand name drugs before deductible – all other Prescription Coverage 50% after deductible	\$299	\$587	\$827	\$241
\$2,450/\$4,900 deductible CDHP (stacked^) - 90% coinsurance – \$5,950/\$11,900 out-of-pocket limit - 100% Preventive Coverage - Wellness Prescriptions no cost for generic, 50% for brand name drugs before deductible – all other Prescription Coverage 50% after deductible	\$389	\$760	\$1,079	\$308
\$5,950/\$11,900 deductible CDHP (stacked^) - 100% coverage after deductible – 100% Preventive Coverage – Wellness Prescriptions no cost for generic or brand name drugs before deductible	\$285	\$556	\$785	\$230

* **Aggregate Deductible:** Full individual or entire family deductible must be satisfied before benefits are paid.

^ **Stacked Deductible:** Plans pay benefits for an individual after they've met the individual deductible.

Health Insurance Designed for Your Needs

The VACE/Blue Cross Blue Shield of Vermont Plan is a health insurance plan designed with your total needs in mind. All benefits are included in our plans and are not riders that are added on and increase your overall cost. Here are just a few of the ways we try to look after you:

Health Savings Accounts (HSAs)

An HSA is a tax-sheltered savings account similar to an IRA but earmarked for medical expenses. Deposits are 100% tax-deductible for the self-employed and can be easily withdrawn by check or debit card to pay routine medical bills with tax-free dollars. Larger medical expenses are covered by a low-cost, high-deductible health insurance policy.

Your Deductible is Waived for In-Network Preventative Care

We realize the benefits of a healthy lifestyle and the importance of preventative care as a way to keep the rising costs of health care in check. We believe this so strongly that we waive your calendar-year deductible for in-network Preventative Care, Well Woman Care and Healthy Baby Care. There is also no charge for routine mammograms and colonoscopies.

Low Co-Pay for Doctor Visits.

When you need to see your regular doctor, you'll pay only a \$30 co-pay for each visit to our in-network providers. For a specialist, you pay a \$50 co-pay. Please call the Chamber for full details on VACE/BCBS of Vermont coverage.

PLEASE NOTE: The specific terms of coverage, exclusions and limitations are contained in the BCBS of Vermont Plan Description. The Chamber has done its best to present all material accurately and honestly, but cannot be held responsible for errors or changes in the BCBS Plan.

Contact Phil Schuman at the Chamber or one of your local Chamber-affiliated insurance agents for more information or to enroll in VACE.

Phone: (802) 863-3489 ext. 211
Fax: (802) 863-1538
E-mail: phil@vermont.org
www.vermont.org

You Choose the Care You Need

At BCBS of Vermont we believe you should always have the care you need, when you need it. You choose your own doctors, and you can see a specialist without a referral. Our network is nationwide.

No Lifetime Maximum on Benefits Provided by BCBS

With the high cost of medical care, BCBS of Vermont's no lifetime maximum on coverage with in-network providers ensures you'll always be covered. With out-of-network providers, you'll have a maximum of \$1,000,000 in benefits.

A Plan for Both Your Physical Health and Emotional Health

The VACE/BCBS of Vermont Plan includes a special program to support your emotional health and well-being. Through BCBS, you'll have coverage for a wide range of mental-health and substance-abuse problems that can affect your job, family or personal life.

Individual Deductible on All Plans:

With the VACE/BCBS plan, an individual family member needs only to meet the individual deductible, unlike other plans that require the family deductible to be met by an individual if other family members have incurred no expenses. The 2000 plan is no longer a stacked deductible and is now aggregate (family deductible must be met by the individual.)

Enrollment Guidelines

- You must be a member in good standing of your local Chamber.
- Your business must be located physically in the State of Vermont.
- Your business must supply one of the following as proof of business:
- Most recent Quarterly Wage Report.
 - Schedule C or other Tax Return
 - If the above are not available, please contact the Chamber.
- 75% of eligible employees must participate in the program. Businesses with less than 3 employees must have 100% participation.
- An eligible employee works full-time and is not covered under any other insurance plan.

If you have any questions about coverage, please contact Phil Schuman at the number below.



**Lake Champlain Regional
Chamber of Commerce**