

Bryn Mawr College Medical Plan Comparison

November 1, 2008

Personal Choice – High Option

Preferred Provider Organization (PPO). Coverage is 100% after a \$20 co-payment for primary doctors and \$30 for specialists in the Personal Choice network. Co-payment prescription plan (\$10 generic, \$20 brand name formulary, \$35 brand name non-formulary) includes a mail-order option. Emergencies and approved in-network hospitalizations are covered at 100%; the \$40 emergency room co-payment is waived if admitted. Out-of-network benefits are covered at 70% of allowed charges after a \$500 deductible. Routine vision exam and glasses/contact lens reimbursement every two years.

Advantages

- Option of staying within or leaving the network
- No assignment to a primary care physician
- No need to obtain specialist referrals
- While both networks are large, more providers participate with Personal Choice than with Keystone
- In-network benefits available through other Blue Cross PPO plans across the U.S. through the Blue Card program
- Provides in-network benefits outside of the U.S. through the BlueCard Worldwide program
- Better in-network chiropractic and physical therapy coverage than all other plans

Disadvantages

- Most expensive premium cost
- Higher office visit and prescription co-payments than the Keystone plans
- Higher deductible and lower coinsurance than Keystone POS for out-of-network care
- Routine radiology and x-ray services are subject to \$30 co-payment, versus none on the Keystone plans.
- Durable medical equipment is subject to a \$30 co-payment per rental period, versus none on the Keystone plans

Personal Choice – Low Option

Preferred Provider Organization (PPO). Coverage is 100% after a \$15 co-payment for primary doctors and \$30 for specialists in the Personal Choice network. Co-payment prescription plan (\$15 generic, \$35 brand name formulary, \$50 brand name non-formulary) includes a mail-order option. In-network hospitalizations are covered at 100% after \$100 per day co-payment (maximum of 5 days). Emergency room coverage is 100% after a \$100 deductible that is not waived if admitted. Routine vision exam and glasses/contact lens reimbursement every two years. Out-of-network benefits are covered at 50% of allowed charges are a \$1,500 deductible.

Advantages

- Lower premium costs than the High Option plan
- Option of staying within or leaving the network
- No assignment to a primary care physician
- No need to obtain specialist referrals
- While both networks are large, more providers participate with Personal Choice than with Keystone
- In-network benefits available through other Blue Cross PPO plans across the U.S. through the BlueCard program
- Provides in-network benefits outside of the U.S. through Blue Card Worldwide program
- Primary doctor co-payment is \$5 less than the High Option

Disadvantages

- More expensive than the Keystone plans
- Has many co-payments that are higher than any other plan, including
 - Emergency room (\$100, not waived if admitted)
 - MRI (\$60)
 - Prescription drugs (\$15/\$35/\$50)
- Only plan with the following co-payments
 - Hospital (\$100 per day, maximum of 5 days)
 - Outpatient surgery (\$50)
 - Skilled Nursing Care (\$50 per day, maximum of 5 days)
 - Specialty Injectable (\$75)
- Only plan with less than 100% coverage on certain in-network expenses including:
 - Durable Medical Equipment (70%)

- Outpatient Private Duty Nursing (90%)
- Very high deductible (\$1,500) and very low coinsurance (50%) for out-of-network care will
 - Drastically limit the potential for reimbursement when using an out-of-network provider
 - Create significant coverage limitations if living outside of the area and BlueCard is not available. This is more of a concern when living outside of the United States.
- Routine radiology and x-ray services are subject to \$30 co-payment, versus none on the Keystone plans.

Keystone POS

Plan is positioned between an HMO and a PPO. Like an HMO, participants enroll with a primary care physician. When care is required, the “point-of-service”, the choice is made to seek that care through a primary care physician (referred care) or from any other provider (self-referred care).

Coverage is 100% after a \$10 co-payment for visits to the primary care physician (PCP) and \$15 to referred specialists. Co-payment prescription plan (\$5 generic, \$10 brand name formulary, \$25 brand name non-formulary) includes a mail-order option. Emergencies and approved in-network hospitalizations are paid at 100%. The \$35 emergency room co-payment is waived if admitted. Routine vision exam and glasses/contact lens reimbursement every two years. Self-referred care is paid at 80% of allowed charges after a \$200 deductible.

Advantages

- Provides the same referred benefits as the Keystone HMO plus the option of self-referral
- Lower office visit and prescription co-payments than Personal Choice
- Lower deductible and higher coinsurance than Personal Choice for self-referred care
- No co-payment for pre-certified radiology and x-ray services
- No co-payment for approved durable medical equipment rentals
- Unlike Personal Choice, Keystone provides coverage for artificial insemination

Disadvantages

- The PCP must refer in-network care or payment reverts to self-referred level
- In-network coverage is limited to the Philadelphia area, and except for limited guest HMO access, members cannot be enrolled with an out-of-area address

- Limited referred rehabilitative benefits (physical therapy/occupational therapy/chiropractic care) although better than Keystone HMO since self-referred benefits are available
- Referred radiology, laboratory, podiatry and physical/occupational therapy services must be received at a contracted site
- While both networks are large, Keystone is not quite as large as Personal Choice and participating doctors do sometimes stop accepting new Keystone patients

Keystone HMO

Health Maintenance Organization (HMO). Coverage is 100% after a \$10 co-payment for visits to the primary care physician (PCP) and \$15 to referred specialists. Co-payment prescription plan (\$5 generic, \$10 brand name and \$25 brand name non-formulary) includes a mail-order option. Emergencies and approved in-network hospitalizations are paid at 100%. Routine vision exam and glasses/contact lens reimbursement every two years. The \$35 emergency room co-payment is waived if admitted.

Advantages

- Least expensive premium cost
- Lower office visit and prescription co-payments than Personal Choice
- No co-payment for pre-certified radiology and x-ray services
- No co-payment for approved durable medical equipment rentals
- Unlike Personal Choice, Keystone provides coverage for artificial insemination

Disadvantages

- All primary care must be obtained through the PCP or it will not be covered
- The PCP must refer all specialist care or it will not be covered
- Except for emergencies, urgent care and limited guest HMO access, coverage is limited to the Philadelphia area and members cannot be enrolled with an out-of-area address
- Limited rehabilitative benefits (physical therapy/occupational therapy/chiropractic care)
- Radiology, laboratory, podiatry and physical/occupational therapy services must be received at a contracted site
- While both networks are large, Keystone is not quite as large as Personal Choice and participating doctors do sometimes stop accepting new Keystone patients