

Bryn Mawr College Medical Plan Comparison

November 1, 2009

Personal Choice PPO

Preferred Provider Organization (PPO). Coverage is 100% after a \$20 copay for primary doctors and \$30 for specialists in the Personal Choice network. Copay prescription plan (\$20 generic, \$40 brand name formulary, \$60 brand name non-formulary) includes a mail-order option. Emergencies are covered at 100%; the \$40 emergency room copay is waived if admitted. Approved In-network hospitalization is covered at 100% after a \$150 per day copay (capped at 5 days per admission). Approved out-patient surgery is covered at 100% after a \$150 copay. 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
- Only plan available when the employee is residing outside of the Philadelphia area
- 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 Keystone

Disadvantages

- Most expensive premium cost
- Higher office visit and prescription copays than the Keystone plans
- \$150 per day inpatient hospital copay (capped at 5 days per admission) versus none on the Keystone plans
- \$150 outpatient surgery copay versus none on the Keystone plans

- Higher deductible and lower coinsurance than Keystone POS for out-of-network care
- Outpatient radiology and x-ray services are subject to \$30 copay, versus none on the Keystone plans.
- Durable medical equipment is subject to a \$30 copay per rental period, 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 (PCP). When care is required, the “point-of-service”, the choice is made to seek that care through the PCP (referred care) or from any other provider (self-referred care).

Coverage is 100% after a \$15 copay for visits to the PCP and \$25 to referred specialists. Copay prescription plan (\$0 generic, \$20 brand name formulary, \$35 brand name non-formulary) includes a mail-order option. Emergencies and approved in-network hospitalizations are paid at 100%. The \$35 emergency room copay 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 copays than Personal Choice, including no copay for generic prescriptions
- Lower deductible and higher coinsurance than Personal Choice for self-referred care
- Unlike Personal Choice, there is no hospital or outpatient surgery copay
- No copay for pre-certified radiology and x-ray services
- No copay 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 \$15 copay for visits to the primary care physician (PCP) and \$25 to referred specialists. Copay prescription plan (\$0 generic, \$20 brand name and \$35 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 copay is waived if admitted.

Advantages

- Least expensive premium cost
- Lower office visit and prescription copays than Personal Choice, including no copay for generic prescriptions
- Unlike Personal Choice, there is no hospital or outpatient surgery copay
- No copay for pre-certified radiology and x-ray services
- No copay 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