

Hawaii Mainland Administrators**BCBS OF IL**

Explanation of benefits for processing HRA benefits

Lifestyles was sending to RKH/SAS

Employees will provide to RKH/SAS

Convenience of BCBS & Dearborn

One application for medical and life Ins.
 Beth would send to RKH. RKH has online access to
 enrolling, terming & servicing matters such as ID
 cards, address changes etc.

MONTHLY PREMIUM

	Hawaii Mainland Administrator proposal	BCBS of IL
Employee (99)	\$1,097.41	\$742.13
Employee/Spouse (5)	\$2,059.30	\$1,644.82
Employee/Child (3)	\$1,837.26	\$1,455.38
Family (0)	\$3,028.95	\$2,358.07

Doesn't include discount for life enrollment

For Comparison Purposes:

2021 Lifestyles Premium County Responsibility

\$713 PEPM
 \$76,291 Monthly
 \$915,492 Annual

County had \$9,200 PEPM exposure with HRA

2022 HMA Premium County Responsibility

\$1,097.41 PEPM
 \$117,422.87 Monthly
 \$1,409,074.44 Annual

County has \$6,750 exposure with HRA

2022 BCBS Premium County Responsibility

\$742.13 PEPM
 \$79,407.91 Monthly
 \$952,894.92 Annual

County has \$2,700 exposure with HRA

County will save \$456,179.52 in premium with BCBS

County will spend @ \$100,000 LESS in HRA benefits
 by going to the BCBS Plan.

	Hawaii Mainland Administrators	BCBS OF IL
Network	PHCS	BCBS
Deductible - Individual/Family	\$6,850 / \$13,700	\$2,500 / \$7,500
Out of pocket maximum	\$7,550 / \$15,100	\$3,500 / \$10,500
Primary care physician co-payment	\$5	\$20
Specialist co-payment	\$50	\$40
Urgent Care	\$50 co-pay	Ded. & Co-Ins
Prescription (Maximum co-payment)	Participating Pharmacy	Preferred Pharmacy/Non-preferred*
Generic	\$0	\$0/\$10
Non preferred Generic	\$15	\$10/\$20
Brand Name	\$50	\$50/\$70
Non preferred Brand Name	\$100	\$100/\$120
Specialty drug	50%	\$150
Non preferred Specialty drug	50%	\$250
Hospital inpatient services	\$1,500 co-pay + deductible	Deductible & co-insurance
Outpatient services, Ambulatory surgery & birthing center	\$1,000 co-pay + deductible	Deductible & co-insurance
Emergency room	\$1,000 co-pay + deductible	\$150 co-pay (deductible does not apply)
Chiropractic care	\$50 co-payment	Deductible & co-insurance
Ambulance (Ground)	\$500 co-pay + deductible	Deductible & Co-insurance
Ambulance (Air)	\$2,500 co-pay + deductible	Deductible & Co-insurance
Diabetic supplies	Deductible	Deductible & Co-insurance
Lab work	Deductible	Deductible & Co-insurance
Chemotherapy & radiation oncology	\$100 co-pay + deductible	Deductible & co-insurance
CT/MRI/MRA/PET Scan	\$100 co-pay + deductible	Deductible & Co-insurance
Infertility	Not covered	Covered subject to special approval. 4 In vitro attempts up to 6 per benefit period
Bariatric Services	Not covered	Deductible & Co-insurance. Requires prior approval
HRA and County's potential exposure administering EE \$500 ded./ \$300 co-ins.	\$6,750 + co-payments outside of office visit and prescription co-payments	\$2,700 per person

*CVS pharmacy is NOT a preferred pharmacy
Springfield Clinic & affiliates are NOT in-network

Above illustration reflects in-network benefits.