



## 2022 Changes to Your Plan

Effective January 1, 2022

**These changes apply to the following plan:**

### **Silver 70 PPO**

The following cost sharing changes apply to in-network benefits:

- Medical deductible revised from \$4,000 individual/\$8,000 family to \$3,700 individual/\$7,400 family.
- Pharmacy deductible revised from \$300 individual/\$600 family to \$10 individual/\$20 family.
- Primary Care visit revised from a \$40 copayment to a \$35 copayment per visit.
- Vision examinations (for refractive eye examinations by an optometrist) (age 19 and over) revised from a \$40 copayment to a \$35 copayment per visit.
- Various cost share revisions to pediatric dental services.
- Hearing examination (for diagnosis or treatment) revised from a \$40 copayment to a \$35 copayment per visit.
- Allergy injections revised from a \$40 copayment to a \$35 copayment.
- Medical social services revised from a \$40 copayment to a \$35 copayment per visit.
- Other Practitioner visit, including acupuncture, revised from a \$40 copayment to a \$35 copayment per visit.
- Outpatient rehabilitation and habilitation visits revised from a \$40 copayment to a \$35 copayment per visit.
- Urgent care visit revised from a \$40 copayment to a \$35 copayment per visit.
- Mental/behavioral health and substance use disorder outpatient office visit revised from a \$40 copayment to a \$35 copayment per visit.
- Mental/behavioral health and substance use disorder outpatient services other than an office visit revised from 20% coinsurance up to \$40 to 20% coinsurance up to \$35.
- Added a calendar year maximum for skilled nursing facility services of 100 days for each member.
- Specialist care visit revised from \$80 copayment to \$70 copayment per visit.
- Tier 1 Prescription Drug copayment revised from \$16 (after Rx Deductible) to \$15 (after Rx Deductible) per prescription.
- Tier 2 Prescription Drug copayment revised from \$60 (after Rx Deductible) to \$55 (after Rx Deductible) per prescription.
- Tier 3 Prescription Drug copayment revised from \$90 (after Rx Deductible) to \$85 (after Rx Deductible) per prescription.
- Tier 1 Maintenance Drugs through the Mail Order Program revised from \$32 (after Rx Deductible) to \$30 (after Rx Deductible) per 90 day supply.
- Tier 2 Maintenance Drugs through the Mail Order Program revised from \$120 (after Rx Deductible) to \$110 (after Rx Deductible) per 90 day supply.
- Tier 3 Maintenance Drugs through the Mail Order Program revised from \$180 (after Rx Deductible) to \$170 (after Rx Deductible) per 90 day supply.

The following cost sharing changes apply to out-of-network benefits:

- Medical deductible revised from \$8,000 individual/\$16,000 family to \$7,400 individual/\$14,800 family.

PPO.01\_Silver 70 PPO

2022\_PPO\_BENEFIT\_CHANGES