Blue Value℠

Marketplace Plan Options

Blue Value gives you access to a limited statewide network within North Carolina. It is a good fit if you are flexible about which providers you see.

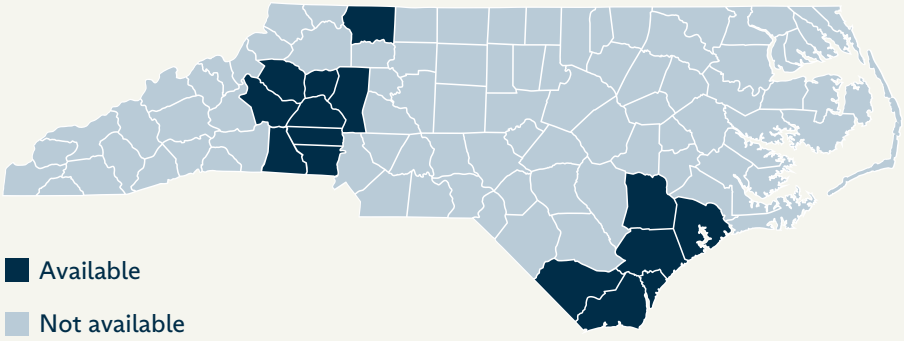
Blue Value offers:

- A limited statewide network that offers premium savings.
- A network that includes, but is not limited to the following providers: Atrium Health Wake Forest Baptist, CaroMont Health, Duke Health Lake Norman Regional Medical Center, Duke LifePoint Healthcare, Novant Health, and UNC Health Alliance.
- A network that does not include the following providers (these providers are out-of-network): Atrium Health (except Atrium Health Wake Forest Baptist), Duke Health (except Duke Health Lake Norman Regional Medical Center or Duke LifePoint Healthcare), and WakeMed.
- A plan that offers in- and out-of-network coverage.

Product availability

Blue Value is only available in certain North Carolina counties, including:

- Alexander
- Brunswick
- Burke
- Caldwell
- Catawba
- Cleveland
- Columbus
- Duplin
- Gaston
- Iredell
- Lincoln
- New Hanover
- Onslow
- Pender
- Surry





Blue Value

In-network benefits[1]							
Plans	**Individual deductible[2,3]** (Family=2x)	**Individual out-of-pocket limit[2]** (Family=2x)	**Coinsurance[4]**	**Primary care provider[5] (PCP)**	**Specialist[5]/ Urgent care[6]**	**Prescription drug deductible[7]**	**Prescription drug benefit[8]**
Bronze Basic | 3 Free PCP | $25 Tier 1 Rx | HSA Eligible | Integrated | Limited Statewide Doctors	$7,000	$12,000	50%	3 x $0 / $95[9]	$175	Integrated[10]	$25[11] / 50% / 50% / 50% / 50%
Bronze Standard | $50 PCP | $25 Tier 1 Rx | HSA Eligible | Integrated | Limited Statewide Doctors	$7,500	$12,000	50%	$50	$100 / $75	Integrated[10]	$25[11] / $50 / $100 / $500 / N/A
Bronze Complete | $60 PCP | $20 Tier 1 Rx | HSA Eligible | Limited Statewide Doctors	$4,000	$12,000	50%	$60	$120	$1,000	$20[11] / $25 / $75 / $150 / 50%
Bronze HSA Eligible Plus | Integrated | Limited Statewide Doctors	$8,700	$8,700	0%	Ded / 0%	Ded / 0%	Integrated[10]	0% / 0% / 0% / 0% / 0%
Silver Preferred | 3 Free PCP | $15 Tier 1 Rx | Integrated | Limited Statewide Doctors	$2,700	$12,000	50%	3 x $0 / $35[9]	$75	Integrated[10]	$15[11] / 50% / 50% / 50% / 50%
Silver Standard | $40 PCP | $20 Tier 1 Rx | Integrated | Limited Statewide Doctors	$6,400	$10,300	40%	$40	$80 / $60	Integrated[10]	$20[11] / $40[11] / $80 / $350 / N/A
Silver Choice A | 3 Free PCP | $15 Tier 1 Rx | Limited Statewide Doctors	$3,500	$12,000	50%	3 x $0 / $45[9]	$95	$200	$15[11] / $25 / $35 / $70 / 50%
Gold Premier A | 3 Free PCP | $10 Tier 1 Rx | Limited Statewide Doctors	$1,800	$12,000	30%	3 x $0 / $15[9]	$45	$400	$10[11] / $20 / $35 / $60 / 50%
Gold Standard A | $30 PCP | $15 Tier 1 Rx | Limited Statewide Doctors	$2,500	$8,600	25%	$30	$60 / $45	$0	$15[11] / $30[11] / $60[11] / $250[11] / N/A
Gold All Copay A | $30 PCP | $10 Tier 1 Rx | Limited Statewide Doctors	$0	$12,000	N/A	$30	$60	$0	$10[11] / $30[11] / $60[11] / $120[11] / $220[11]

1 All providers outside of the Blue Value network and out-of-state are covered at the out-of-network benefit level, except for emergency services which will be covered at the in-network benefit level. All other non-emergency covered services will be covered at the out-of-network benefit level.

2 The family in-network (INN) deductible and the family INN out-of-pocket maximum (OOPM) are 2x the individual INN deductible and individual INN OOPM. The individual and family out-of-network (OON) deductible is 5x the respective in-network deductible. OON out-of-pocket limit has no maximum.

3 Members on a family plan will have a family member deductible and a family deductible. Any member of the family will only have to pay the family member amount to meet their own deductible. Once the family deductible is met, all members of the family are in benefit.

4 Member pays 30% more coinsurance when seeking services OON.

5 OON PCP and specialist visit is subject to the plan's OON deductible and coinsurance.

6 OON urgent care copay is 2x the amount of the in-network urgent care copay.

7 Prescription drug deductible must be met before your plan begins to pay for prescriptions except when indicated otherwise.

8 If choosing an OON Pharmacy, you may have to pay the out-of-network provider in full. Please refer to your Member Guide to find out if benefits are available for out-of-network pharmacies.

9 PCP step down benefits: 3 x $0 copay for PCP office visits, followed by standard PCP copay (at the member level).

10 Prescription drug costs are subject to the medical deductible, coinsurance, and out-of-pocket limit.

11 Prescription drug costs are not subject to the deductible.

Atrium Health, Atrium Health Wake Forest Baptist, CaroMont Health, Duke Health, Duke Health Lake Norman Regional Medical Center, Duke LifePoint Healthcare, Novant Health, UNC Health Alliance, and WakeMed are independent companies that are solely responsible for the services they provide. These companies do not offer Blue Cross or Blue Shield products or services.

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Blue Value℠

Opciones de planes del Mercado de Seguros Médicos

Blue Value le da acceso a una red estatal limitada dentro de Carolina del Norte. Es una buena opción si tiene flexibilidad en cuanto a qué proveedores consulta.

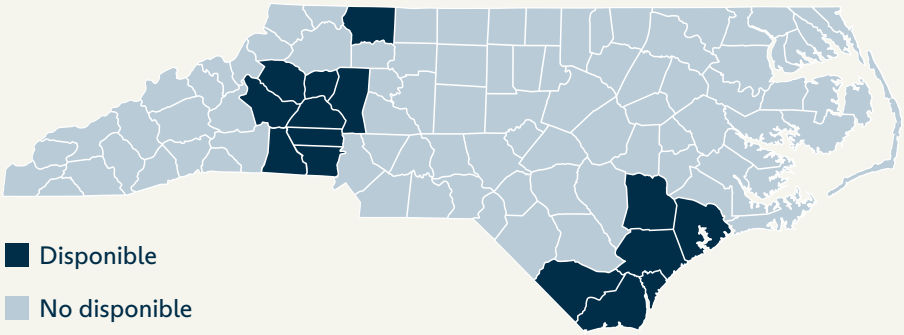
Blue Value ofrece:

- Una red estatal limitada que brinda ahorros en la prima.
- Una red que incluye, pero no se limita a los siguientes proveedores:
  Atrium Health Wake Forest Baptist, CaroMont Health, Duke Health Lake Norman Regional Medical Center, Duke LifePoint Healthcare, Novant Health y UNC Health Alliance.
- Una red que no incluye a los siguientes proveedores (estos proveedores están fuera de la red):
  Atrium Health (excepto Atrium Health Wake Forest Baptist), Duke Health (excepto Duke Health Lake Norman Regional Medical Center y Duke LifePoint Healthcare) y WakeMed.
- Un plan que ofrece cobertura tanto dentro como fuera de la red.

Disponibilidad del producto

Blue Value únicamente está disponible en ciertos condados de Carolina del Norte, incluyendo:

- Alexander
- Brunswick
- Burke
- Caldwell
- Catawba
- Cleveland
- Columbus
- Duplin
- Gaston
- Iredell
- Lincoln
- New Hanover
- Onslow
- Pender
- Surry





Blue Value

Beneficios dentro de la red[1]							
Planes	**Deducible individual**[2,3] (Familiar es dos veces el individual)	**Límite de gastos médicos personales individual**[2] (Familiar es dos veces el individual)	**Coseguro**[4]	**Proveedor de atención primaria**[5] **(PCP)**	**Especialista**[5] **o centro de atención de urgencias**[6]	**Deducible de medicamentos con receta**[7]	**Beneficio de medicamentos con receta**[8]
Bronze Basic | 3 Free PCP | $25 Tier 1 Rx | HSA Eligible | Integrated | Limited Statewide Doctors	$7,000	$12,000	50%	3 x $0 / $95[9]	$175	Integrado[10]	$25[11] / 50% / 50% / 50% / 50%
Bronze Standard | $50 PCP | $25 Tier 1 Rx | HSA Eligible | Integrated | Limited Statewide Doctors	$7,500	$12,000	50%	$50	$100 / $75	Integrado[10]	$25[11]/ $50 / $100 / $500 / N/A
Bronze Complete | $60 PCP | $20 Tier 1 Rx | HSA Eligible | Limited Statewide Doctors	$4,000	$12,000	50%	$60	$120	$1,000	$20[11] / $25 / $75 / $150 / 50%
Bronze HSA Eligible Plus | Integrated | Limited Statewide Doctors	$8,700	$8,700	0%	Ded / 0%	Ded / 0%	Integrado[10]	0% / 0% / 0% / 0% / 0%
Silver Preferred | 3 Free PCP | $15 Tier 1 Rx | Integrated | Limited Statewide Doctors	$2,700	$12,000	50%	3 x $0 / $35[9]	$75	Integrado[10]	$15[11] / 50% / 50% / 50% / 50%
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Gold Standard A | $30 PCP | $15 Tier 1 Rx | Limited Statewide Doctors	$2,500	$8,600	25%	$30	$60 / $45	$0	$15[11] / $30[11] / $60[11] / $250[11] / N/A
Gold All Copay A | $30 PCP | $10 Tier 1 Rx | Limited Statewide Doctors	$0	$12,000	N/A	$30	$60	$0	$10[11] / $30[11] / $60[11] / $120[11] / $220[11]

1 Todos los proveedores fuera de la red Blue Value y fuera del estado están cubiertos al nivel de beneficios fuera de la red, salvo los servicios de emergencias que se cubrirán al nivel de beneficios dentro de la red. Todos los demás servicios cubiertos que no son de emergencia estarán cubiertos al nivel de beneficios fuera de la red.

2 El deducible familiar dentro de la red y el límite de gastos médicos personales familiar dentro de la red son dos veces el deducible individual dentro de la red y el límite de gastos médicos personales individual dentro de la red. El deducible individual y familiar fuera de la red es cinco veces el respectivo deducible dentro de la red. El límite de gastos médicos personales fuera de la red no tiene máximo.

3 Los afiliados en un plan familiar tendrán un deducible por miembro de la familia y un deducible familiar. Cualquier miembro de la familia solo tendrá que pagar el monto del miembro de la familia para cumplir con su propio deducible. Una vez que se cumpla con el deducible familiar, todos los miembros de la familia reciben beneficios.

4 El afiliado paga un 30% más de coseguro cuando busca servicios fuera de la red.

5 Una consulta con un proveedor de atención primaria o especialista fuera de la red está sujeta al deducible y coseguro fuera de la red del plan.

6 La atención de urgencias y los servicios de emergencia fuera de la red están cubiertos al mismo nivel de costo compartido que la atención de urgencias y los servicios de emergencia dentro de la red.

7 El deducible de medicamentos con receta debe cumplirse antes de que su plan comience a pagar por medicamentos con receta, excepto cuando se indique lo contrario.

8 Si elige una farmacia fuera de la red, es posible que deba pagar el monto total al proveedor fuera de la red. Consulte su manual de beneficios para averiguar si hay beneficios disponibles para farmacias fuera de la red.

9 Beneficios escalonados para el proveedor de atención primaria: 3 x $0 por citas en el consultorio del proveedor de atención primaria, seguido del copago estándar del proveedor de atención primaria (a nivel de afiliado).

10 Los costos de medicamentos con receta están sujetos al deducible, coseguro y límite de gastos personales médicos.

11 Los costos de medicamentos con receta no están sujetos al deducible.

Atrium Health, Atrium Health Wake Forest Baptist, CaroMont Health, Duke Health, Duke Health Lake Norman Regional Medical Center, Duke LifePoint Healthcare, Novant Health, UNC Health Alliance y WakeMed son empresas independientes que son las únicas responsables de los servicios que brindan. Estos proveedores no ofrecen productos ni servicios de Blue Cross ni Blue Shield.

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