



**BLUE CROSS/BLUE SHIELD OF VERMONT January 1, 2012 through December 31, 2012**

**Vermont Freedom Plans:**

- \$750 Ded,\$30 OV,\$3750/7500 OOP Max,Rx \$100 Ded \$5/40%/60%
- \$1,500 Ded,\$30 OV,\$7500/15,000 OOP Max,Rx \$100 Ded \$5/40%/60%
- \$2,500 Ded,\$30 OV,\$7500/15,000 OOP Max,Rx \$100 Ded \$5/40%/60%
- \$5,000 Ded,\$30 OV,\$7500/15,000 OOP Max,Rx \$100 Ded \$5/40%/60%
- \$10,000 Ded,\$30 OV,\$10,000/20,000 OOP Max,Rx \$100 Ded \$5/40%/60%

**HSA Plans:**

- HSA \$2,250/4,500 Ded, 80/20% to \$3250/6500 OOP w/ Prev Rx \$5/40%/60%
- HSA \$4,000/8,000 Ded, 80/20% to \$5,000/10,000 OOP w/ Prev Rx \$5/40%/60%

- HSABlueCare \$5,000/10,000 (**stacked**) 100% after Deductible w/Prev Rx \$5/40%/60%
- HSABlueCare \$3,000/6,000 (**stacked**) 100% after Deductible w/Prev Rx \$5/40%/60%
- HSABlueCare \$2,500/5,000 100% after Deductible w/Prev Rx \$5/40%/60%
- HSABlueCare \$2,500/5,000 80/20% w/Prev Rx at 50% before Ded to \$5950/\$11,900 OOP All other Rx 50% after Ded
- HSABlueCare \$2,000/4,000 100% after Deductible w/Prev Rx \$5/40%/60%
- HSABlueCare **Access** \$3,000/6,000(**stacked**) 80/20% to \$4000/8000 w/Prev Rx \$5/40%/60%
- HSABlueCare **Access** \$2,000/4,000 Ded, 80/20% to \$3000/6000 w/Prev Rx \$5/40%/60%

**BlueCare Plans:**

- BlueCare D \$20/30 OV, \$500/200 IP/OP Copay,Rx \$100 Ded,\$5/40%/60%
- BlueCare I \$20/30 OV,\$1000 IP/OP Comb Ded, Rx \$100 Ded,\$5/40%/60%
- BlueCare K \$20/30 OV, \$2000/1000 IP/OP Ded, Rx \$100 Ded,\$5/40%/60%
- BlueCare **Access** \$20/30 OV,\$1500/750 IP/OP Ded, Rx \$100 Ded,\$5/40%/60%

**Available to Existing BRS groups only:**

- VFP \$750 Ded,\$30 OV,\$3750/7500 OOP Max,Rx \$100 Ded \$5/\$25/\$50
- VFP \$1500 Ded,\$30 OV,\$7500/15,000 OOP Max,Rx \$100 Ded \$5/\$25/\$50
- BlueCare D \$20/30 OV, \$500/200 IP/OP Co-pay,Rx \$100 Ded,\$5/\$25/\$50
- BlueCare I \$20/30 OV,\$1000 IP/OP Comb Ded, Rx \$100 Ded,\$5/\$25/\$50
- BlueCare K \$20/30 OV, \$2000/1000 IP/OP Ded, Rx \$100 Ded,\$5/\$25/\$50
- BlueCare J \$20/30 OV, \$1500/750 IP/OP Ded, Rx \$100 Ded,\$5/\$25/\$50

	Single	2 Person	Family	Medicare Carve-out
	\$656.55	\$1,313.11	\$1,935.63	\$431.69
	\$609.06	\$1,218.12	\$1,805.48	\$386.78
	\$573.58	\$1,147.14	\$1,706.40	\$352.04
	\$537.33	\$1,074.67	\$1,606.95	\$317.65
	\$491.35	\$982.72	\$1,478.60	\$295.87
	\$614.67	\$1,104.51	\$1,725.47	\$481.77
	\$525.31	\$858.83	\$1,355.78	\$484.86
	\$325.72	\$651.45	\$909.60	
	\$426.72	\$853.43	\$1,191.63	
	\$450.51	\$747.84	\$1,097.48	
	\$390.23	\$647.77	\$950.63	
	\$483.08	\$821.23	\$1,206.25	
	\$416.95	\$833.90	\$1,164.35	
	\$465.83	\$791.90	\$1,163.16	
	\$624.08	\$1,248.15	\$1,742.76	
	\$589.04	\$1,178.08	\$1,644.91	
	\$555.14	\$1,110.28	\$1,550.25	
	\$583.69	\$1,167.38	\$1,629.97	
	\$672.90	\$1,345.78	\$1,981.27	\$485.70
	\$625.40	\$1,250.81	\$1,851.10	\$440.79
	\$645.91	\$1,291.81	\$1,803.74	
	\$610.87	\$1,221.74	\$1,705.89	
	\$576.97	\$1,153.94	\$1,611.23	
	\$596.93	\$1,193.85	\$1,666.95	

<b>Vision Materials Rider for BlueCare Plans</b>	<b>\$ 8.56</b>	<b>\$ 17.11</b>	<b>\$ 23.90</b>
<b>Vision Materials Rider for non-BlueCare Plans</b>	<b>\$ 6.36</b>	<b>\$ 12.72</b>	<b>\$ 25.48</b>

**\*\* Guaranteed Issue Group Life Insurance and Low Cost Dental Plans Available\*\***

BRS has primary COBRA and HIPAA monthly monitoring services available to members at no cost for up to 50 employees. See our website [www.brsvt.com](http://www.brsvt.com) for details.

Visit us [www.brsvt.com](http://www.brsvt.com)

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