



## BlueChoice PPO

**Health Savings Account (HSA) - Compatible  
High-Deductible Health Plans (HDHP)  
for Individuals and Families**



# BlueChoice PPO

## Health Savings Account (HSA) - Compatible High-Deductible Health Plans (HDHP) for Individuals and Families

If you and your family are looking for experience, easy access and an extensive network, then our BlueChoice PPO Health Savings Account (HSA)-compatible high-deductible health plan (HDHP) is probably what you need! That's because you get:

- Easy access to your funds, experts, tools and support
- Extensive local and national provider network
- Access to more than 34,600 PPO health care providers and 169 hospitals in Georgia
- Access to the largest PPO network in the country with more than 900,000 BlueCard® providers

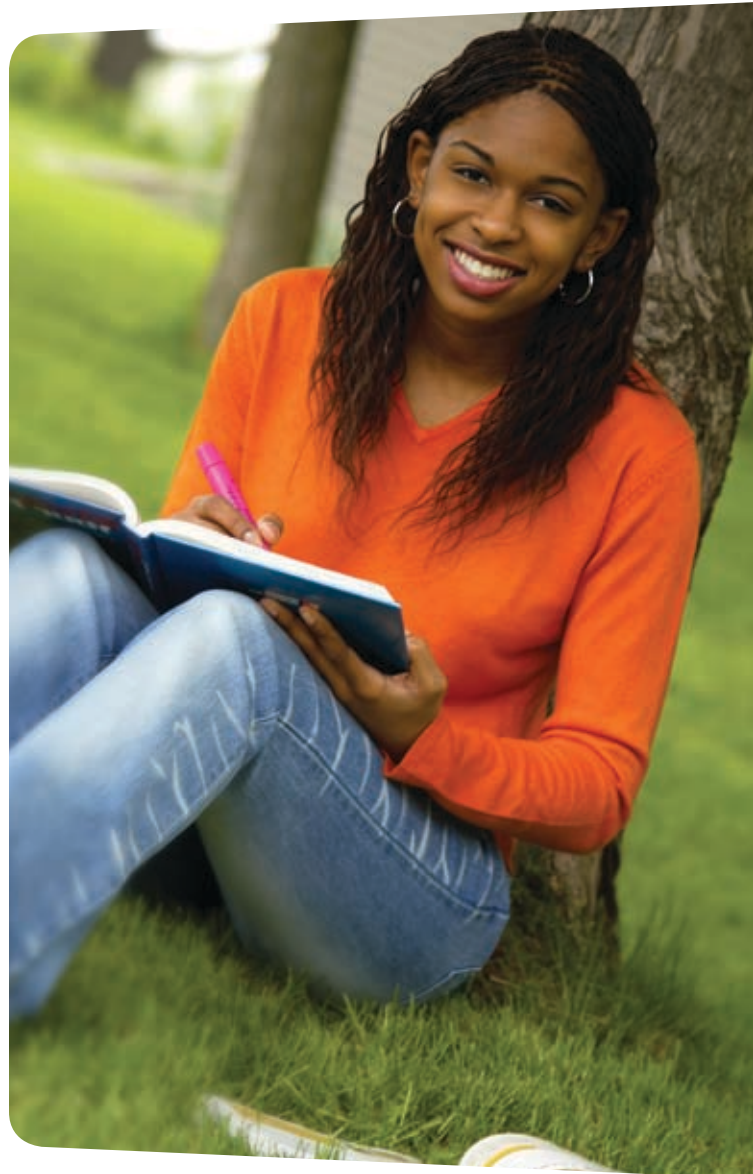
So, you can stop searching because when you have our BlueChoice PPO HSA-compatible HDHP, you gain access to some of the best coverage available anywhere!

# A Brief Overview

## What Is A Health Savings Account (HSA)-Compatible High-Deductible Health Plan (HDHP)?

An HSA-compatible HDHP is similar to the type of health plan you're probably familiar with. We say this because an HSA-compatible HDHP offers the coverage you want and gives you the benefits you need. However, before these benefits kick in, you're responsible for a specific out-of-pocket amount called the deductible. And, the money in your HSA can go toward your deductible.

The **deductible** is the amount the insured person (you) must pay before your health plan (which is us) pays for covered services. The deductible is usually a set amount. For example, a health plan might require a member to pay the first \$800 during a calendar year before the health plan begins paying for covered services.



# A Brief Overview

## What Is An HSA?

You can think of an HSA as a savings account for your health. That's because you can use the money in this account to pay for eligible health care expenses. In addition, HSAs are individually owned accounts. They're designed to give you more control over how you manage your health care expenses. And, they're designed to help you save for upcoming qualified medical and retiree health expenses on a tax-free basis.

HSAs are similar to individual retirement accounts (IRAs) because funds may grow through interest and investments, and because unused funds roll over from year to year. Just remember, you must first have an HSA-compatible HDHP before you can establish an HSA.





# A Brief Overview

## Your Deductible Options

Within these plans, you may choose from the following deductible options:

### 100 Percent Coinsurance Plan Options:

	INDIVIDUAL		FAMILY	
	DEDUCTIBLE	OUT-OF-POCKET	DEDUCTIBLE	OUT-OF-POCKET
Minimum	\$1,150	\$1,150	\$2,300	\$2,300
Mid-Point	\$1,800	\$1,800	\$3,500	\$3,500
Maximum	\$2,600	\$2,600	\$5,150	\$5,150

### 80 Percent Coinsurance Plan Options:

	INDIVIDUAL		FAMILY	
	DEDUCTIBLE	OUT-OF-POCKET	DEDUCTIBLE	OUT-OF-POCKET
Minimum	\$1,150	\$3,000	\$2,300	\$6,000
Mid-Point	\$1,800	\$4,000	\$3,500	\$8,000
Maximum	\$2,600	\$5,000	\$5,150	\$10,000

Keep in mind, you must meet your annual deductible before your HDHP pays benefits, except for certain preventive care services. And remember, every dollar you spend for covered services goes toward meeting your annual deductible.

As you probably imagined, there are many unique features in the HSA-compatible HDHPs including:

- One deductible for prescription drugs and medical services
- A combined family deductible (for you, your spouse and your dependents)
- Immediate payments for preventive care benefits (other benefits are paid once your deductible is met)

# BlueChoice PPO HSA-Compatible

		1150 - DED 100%	1800 - DED 100%	2600 - DED 100%
<b>Lifetime Maximum</b> <i>In and Out-of-Network combined</i>		\$5,000,000	\$5,000,000	\$5,000,000
<b>Calendar Year Deductible</b>	Individual:	\$1,150	\$1,800	\$2,600
	Family:	\$2,300	\$3,500	\$5,150
<b>Coinsurance</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Calendar Year Out-of-Pocket Maximum</b> <b>- Includes Deductible</b> <i>In and Out-of-Network combined</i>				
	Individual:	\$1,150	\$1,800	\$2,600
	Family:	\$2,300	\$3,500	\$5,150
<b>Physician Office Visit</b> - Includes x-ray and lab work <i>when performed in the physician's office</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Preventive Care Adults</b> \$250 benefit maximum <i>per year; not subject to calendar year deductible</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Preventive Care Children</b> <i>Not subject to calendar year deductible through age 5</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Lab/X-ray, Surgery, Radiation, Anesthesia</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Outpatient Care</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Maternity</b> <i>Family Contracts Only</i> <i>Subject to 12 month waiting period</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Hospital Services - Inpatient</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Ambulatory Surgery Center</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Ambulance Service</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Physical Therapy, Occupational Therapy, Chiropractic Care</b>  <i>Visits per year, combined specialties:</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
		30 Visits	30 Visits	30 Visits
<b>Speech Therapy, Respiratory Therapy, Skilled Nursing Care</b>  <i>Number of visits per specialty per year:</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
		30 Visits	30 Visits	30 Visits
<b>Radiation Therapy/Chemotherapy</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Mental Health/Substance Abuse</b> <i>Hospital Inpatient Only; \$10,000 lifetime maximum</i>		\$100 per day; 30 day maximum; \$3,000 year maximum		
<b>Emergency Room</b>  <i>Medical Emergency or Accident</i>  <i>Non-Medical Emergency or Non-Serious Accidental Injury</i>		Plan pays 100% after deductible		
		Plan pays 100% in-network and 70% out-of-network after deductible		
<b>Home Health Care</b>  <i>Number of visits per year (in and out-of-network combined)</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
		100 Visits	100 Visits	100 Visits
<b>Hospice Care</b> <i>Subject to deductible; \$10,000 Lifetime Maximum</i>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Durable Medical Equipment and Prosthetics</b>	In-network:	Plan pays 100%	Plan pays 100%	Plan pays 100%
	Out-of-network:	Plan pays 70%	Plan pays 70%	Plan pays 70%
<b>Prescription Drugs</b>	In-network:	100%	100%	100%
	Out-of-network:	100%	100%	100%
<b>Waiting Period for Pre-existing Conditions</b>		12 months from Contract Effective Date <sup>1</sup>		

<sup>1</sup>Coverage will not be provided for the 12 months following the effective date of this policy for any illness, injury or other condition for which medical advice, diagnosis, care or treatment was recommended or received in the 12 months prior to the effective date.

# HDHP Individual and Family Plans

		1150 - DED 80%	1800 - DED 80%	2600 - DED 80%
<b>Lifetime Maximum</b> <i>In and Out-of-Network combined</i>		\$5,000,000	\$5,000,000	\$5,000,000
<b>Calendar Year Deductible</b>	Individual:	\$1,150	\$1,800	\$2,600
	Family:	\$2,300	\$3,500	\$5,150
<b>Coinsurance</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Calendar Year Out-of-Pocket Maximum</b> <b>- Includes Deductible</b> <i>In and Out-of-Network combined</i>	Individual:	\$3,000	\$4,000	\$5,000
	Family:	\$6,000	\$8,000	\$10,000
<b>Physician Office Visit</b> - <i>Includes x-ray and lab work when performed in the physician's office</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Preventive Care Adults</b> <i>\$250 benefit maximum per year; not subject to calendar year deductible</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Preventive Care Children</b> <i>Not subject to calendar year deductible through age 5</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Lab/X-ray, Surgery, Radiation, Anesthesia</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Outpatient Care</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Maternity</b> <i>Family Contracts Only</i> <i>Subject to 12 month waiting period</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Hospital Services - Inpatient</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Ambulatory Surgery Center</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Ambulance Service</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Physical Therapy, Occupational Therapy, Chiropractic Care</b> <i>Visits per year, combined specialties:</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
		30 Visits	30 Visits	30 Visits
<b>Speech Therapy, Respiratory Therapy, Skilled Nursing Care</b> <i>Number of visits per specialty per year:</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
		30 Visits	30 Visits	30 Visits
<b>Radiation Therapy/Chemotherapy</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Mental Health/Substance Abuse</b> <i>Hospital Inpatient Only; \$10,000 lifetime maximum</i>		\$100 per day; 30 day maximum; \$3,000 year maximum		
<b>Emergency Room</b>	<i>Medical Emergency or Accident</i>	Plan pays 80% after deductible		
	<i>Non-Medical Emergency or Non-Serious Accidental Injury</i>	Plan pays 80% in-network and 60% out-of-network after deductible		
<b>Home Health Care</b> <i>Number of visits per year (in and out-of-network combined)</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
		100 Visits	100 Visits	100 Visits
<b>Hospice Care</b> <i>Subject to deductible; \$10,000 Lifetime Maximum</i>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Durable Medical Equipment and Prosthetics</b>	In-network:	Plan pays 80%	Plan pays 80%	Plan pays 80%
	Out-of-network:	Plan pays 60%	Plan pays 60%	Plan pays 60%
<b>Prescription Drugs</b>	In-network:	80%	80%	80%
	Out-of-network:	80%	80%	80%
<b>Waiting Period for Pre-existing Conditions</b>		12 months from Contract Effective Date <sup>1</sup>		

Unless otherwise noted, all benefits are subject to the Calendar Year Deductible.

A disclosure of all benefits, exclusions and limitations is included in the Contract for this coverage.

# Understanding HSAs

## Tax Advantages Of The HSA

Did you know, HSAs were established for tax-free contributions by or on behalf of eligible individuals? In addition, the amount of money in an HSA may grow through the years or be distributed on a tax-free basis to pay for various qualified medical expenses.

A **qualified medical expense** is a medical care expense that's primarily for the prevention or alleviation of a physical or mental defect or illness. In general, this includes the same services covered by your health plan. It also includes money that goes toward:

- Car controls for the physically challenged
- Certain services not covered by your health plan
- Christian Science practitioner services
- COBRA premiums and health insurance for those on unemployment compensation
- Coinsurance costs for health care, prescription drug and dental plans
- Dental X-rays, fillings, extractions and dentures
- Doctor visits, lab, X-ray and other diagnostic and treatment services
- Eyeglasses, contact lenses and solution
- Guide dog or other animal, including its maintenance
- Health coverage during times of unemployment
- Hearing aids and batteries
- In vitro fertilization
- Laser eye surgery
- Medicare expenses (not including Medigap coverage)
- Medicare Part A and B premiums, Medicare HMO or Medicare Advantage premiums
- Non-prescription drugs
- Orthodontia (such as braces)
- Prescription drugs, including birth control pills
- Remedial reading lessons for a child with a severe learning disability
- Retiree health expenses for those 65 and older
- Routine physical exams
- Qualified long-term care premiums
- Qualified long-term care services and long-term care insurance
- Special school costs, including tutoring fees and tuition, for physically challenged or mentally impaired
- Specially installed equipment if primary purpose is health care
- Stop smoking programs
- Transportation to and from health care providers
- Vitamin and mineral supplements that can be obtained only by prescription
- Your deductible and coinsurance
- Your share of the state-sponsored retiree health insurance charges

If you or someone on your plan withdraws money for non-qualified expenses, this money is considered income and it can be taxed as regular income. And remember, an additional 10 percent penalty is applied to non-qualified withdrawals until the owner of the HSA is 65 years old.



## Additional Advantages Of Having An HSA

- 1) **Contributions** - Contributions to your HSA are not taxed.
- 2) **Tax-Free** - Withdrawals to pay for qualified medical expenses are never taxed.
- 3) **Tax-Deferred** - Interest earnings accumulate tax-deferred and if the interest is used to pay for qualified medical expenses, it's never taxed.

## Administering The HSA

We want you to know we don't offer tax advice about establishing or managing an HSA. So, if you plan to purchase a BCBSGa HSA-compatible HDHP to use with an HSA, we encourage you to talk with your tax or legal advisor to determine if:

- You're eligible
- Your HSA and HSA-compatible HDHP meets all requirements
- This is the best plan for you

In addition, any financial institution already approved as an IRA or Medical Savings Account (MSA) trustee/custodian can be an HSA trustee/custodian.

## “Catch-up” Contributions

Although some people might not see it this way, there are so many perks available to you as you get older. For example, if you turn 55 years old or older during 2007, you may make an additional \$800 “catch-up” contribution to your HSA account. And there's more good news because this amount increases \$100 annually until 2009. And in 2009, you can add an additional \$1,000 to your catch-up contribution!

## What Do I Do If I Have An MSA?

If you have an MSA, we want you to know federal legislation gives you the option to take the funds you contribute to your MSA and roll them into an HSA.

If you have any questions about the rollover of MSA funds into an HSA, then please call your current trustee/custodian.



EXTRA, EXTRA! READ ALL ABOUT IT!



## What's the 360° Health® Program?

It's one of the industry's most comprehensive health services programs. In fact, this brand new integrated group of health services is designed to help you:

1. Manage and maintain your health
2. Make more informed health care decisions
3. Maximize the value of your health care benefits

And we do this by giving you the information you need to take control. Here are a few examples:

**Nobody wants to get sick, but if you do, isn't it good to know that people are ready to help you?** Our case managers will work with you and your doctors to help ensure you get the right care at the right place. Hey, it's our job and we take it and you - seriously.

**Lets face it we all struggle with diet and exercise. And, you've decided to get serious.**

But where do you start? First, always talk with your doctor before beginning any exercise or diet program. After you've done that, you should check out the interactive online programs offered by WebMD®. You'll see everything you need to track your progress and WebMD® will send you helpful tips and hints along the way.

Check out everything 360° has to offer. Simply go to [bcbsga.com](http://bcbsga.com) and select 360° Health in the middle of the page.

# The Final Details

## Waiting Periods

When you're a BCBSGa member, you must be covered for 12 consecutive months under a family contract before you're eligible for any maternity benefits, regardless of when the pregnancy occurs.

## Please Read Your Contract

We want you to know, this booklet was created to give you a brief overview of the features in your plan. So, please don't confuse this with your insurance policy contract because only the actual policy controls. Your contract lets you know the nitty gritty details about your rights and obligations to us as well as our obligations to you. So, please read your contract.

If you'd like more information about our HSA-compatible HDHPs, then all you need to do is contact your agent.

*This brochure provides general information only. It's not intended to be a substitute for the advice of a qualified tax professional. If you're considering an HSA, you should talk with a qualified tax advisor so they can evaluate your specific needs and circumstances. An HDHP isn't an MSA or HSA. An MSA or HSA, which must be established for tax advantages, is a separate arrangement between the individual and a bank or other qualified institution. We recommend you talk with a tax advisor.*

*You should talk with your tax advisor for guidance and to receive comprehensive information about HSAs and other tax-related issues as well as eligibility requirements, definitions of qualified medical expenses and midyear contribution amounts. BCBSGa does not provide tax advice, and does not administer employee HSA accounts.*



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