

	Wellmark Blue Cross and Blue Shield			Wellmark Health Plan of Iowa			
Plan Name	Classic Blue [®]	Alliance Select SM	Blue Priority SM	Blue Choice [®]	Blue Access [®]	Blue Advantage [®]	
Plan Type	Traditional Indemnity	Preferred Provider Organization (PPO)	Consumer-Driven	Point-of-Service (POS)	Open Access	Primary Care	
How Plan Works	Comprehensive plan provides more freedom to choose the providers your employees know and trust.	Offers employees access to an extensive provider network and the freedom to see any provider and still receive benefits.	Combines a qualified high-deductible health plan with a health care account (HSA or HRA) to encourage employees to make cost-conscious decisions.	Combines the freedom of choice offered by traditional coverage with the affordability and preventive health features of managed care plans.	Offers referral-free access to a managed-care provider network, with no Primary Care Physician (PCP) requirement.	Comprehensive coverage with an emphasis on preventive care. Employees choose a Primary Care Physician (PCP) to coordinate all care and refer them to specialists.	
Network	Access to any hospital or provider	100% of hospitals and 99% of physicians in Iowa. BlueCard[®] Network: More than 90% of hospitals and 80% of doctors nationwide.		Wellmark Health Plan of Iowa: 100% of hospitals and 97% of physicians in Iowa. BlueCard Network: More than 90% of hospitals and 80% of doctors nationwide.	Wellmark Health Plan of Iowa: 100% of hospitals and 97% of physicians in Iowa. BlueCard Network: For emergency care only. No out-of-network coverage except for emergency care.		
Provider Choice	Direct access to any hospital or provider with no referral requirements. Participating providers offer lower out-of-pocket costs, file claims, and fulfill notification requirements.			PCP coordinates care. Females may also choose a network OB/GYN. Employees must see PCP for preventive services: can self-refer to in-network or out-of-network providers for specialist care.	No PCP requirement. Can visit Wellmark Health Plan of Iowa provider for care without a referral. Referrals required for chiropractic care and out-of-network services.	PCP coordinates care. Females may also choose a network OB/GYN. Referrals required for specialist care, chiropractic care, and out-of-network services.	
Benefit Levels	Benefits for covered services from any provider.	In- and out-of-network coverage. Tiered benefit design with levels for care from Alliance Select providers and non-PPO providers.	Employer and/or employee funds an account to pay for medical expenses. Deductible applies to	In- and out-of-network coverage. Tiered benefit design with levels for primary care, in-	Network-only coverage		Network-only coverage

			all services except preventive care. When account is gone, employee is responsible for remaining deductible and out-of-pocket maximum.	network, and out-of-network services.		
Coverage	Recommended plan designs include coverage for preventive care, office visits, lab work and X-rays, surgery, hospital stays, and prescription drugs. Customize plan with deductible, coinsurance, and copay choices.					
Lifetime Maximum	Unlimited					
Prescription Drug Coverage	Blue Rx PreferredSM : Prescription drugs are covered with a range of cost share options. Mail Service Program available.	Blue Rx Preferred for HRA. Drugs covered under health for HSA.	Blue Rx Preferred : Prescription drugs are covered with a range of cost share options. Mail Service Program available.			
Health & Wellness	All plans include Health & Wellness Programs					