

Summary of health benefits tentative settlement March 26, 2007

What stays the same:

No change in current IBC Keystone (HMO) plan, and no co-payment of premiums.

No co-payment of premiums on Personal Choice Plan.

Maintenance of existing customized mental health benefits in both plans.

What changes:

Changes in plan design to Personal Choice:

- Higher deductible for out-of-network services, to \$500 single and \$1500 family, from \$300 / \$600. (There is no deductible for in-network services).
- Higher out of pocket maximum for co-insurance, to \$1500 single and \$4500 family, from \$1000 / \$2000. (There is no out of pocket expense for in-network services).
- Higher out of network co-insurance to 70% of plan allowance after deductible, from 80% after deductible.
- Lower co-pay for primary care office visit to \$10 from \$15
- Same co-pay for specialist office visit (\$20)
- New co-pays:
 - routine gynecological exam, \$10 co-pay from 100% paid
 - emergency room co-pay, \$100, co-pay not waived if admitted (from \$40, co-pay waived if admitted)
 - outpatient radiology
 - routine/diagnostic -- \$20 co-pay (from 100%)
 - MRI/MRA, CT, PET scans \$40 co-pay (from 100%)
 - (NO copayment applicable when service performed in an Emergency Room or office setting)
- Changes in therapy benefits:
 - Physical/occupational therapy visits 30 days (previously no limit)
 - Pulmonary therapy increases from 12 days to 36 days
 - Speech therapy 20 days (previously no limit)
 - Restorative/spinal 20 days (previously no limit)
 - Outpatient private duty nurse (80%, 360 hours/cal. yr)
 - Skilled nursing facility (100%, 120 days/cal yr.)