

The North Carolina State Health Plan Medical Benefits for Plan Year 2018

Plan Benefits	70/30 PPO *	UHC Group Medicare Advantage BASE Plan	UHC Group Medicare Advantage Enhanced Plan
Use of Network Providers	You pay less when using BCBSNC network providers	You can see any provider (in-network or out-of-network) that participates in Medicare and accepts Medicare assignment. Your copays or coinsurance stay the same.	You can see any provider (in-network or out-of-network) that participates in Medicare and accepts Medicare assignment. Your copays or coinsurance stay the same.
Annual Deductible	Individual: \$1,080 in-network \$2,160 out-of-network	\$0 deductible	\$0 deductible
Annual Out-of-Pocket Maximum or Coinsurance Maximum	A coinsurance maximum applies for this plan; it does not include your payments toward your deductible or your copayments. Individual: \$4,388 in-network \$8,776 out-of-network	An out-of-pocket maximum applies for these plans; your copays and share of coinsurance will count toward the out-of-pocket maximum \$4,000	An out-of-pocket maximum applies for these plans; your copays and share of coinsurance will count toward the out-of-pocket maximum \$3,300
Physician Services	In-network Primary Care: \$40 copay In-network Specialist: \$94 copay In-network Preventive Care: \$40 copay	Primary Care: \$20 copay Specialist: \$40 copay Preventive Care: \$0 copay	Primary Care: \$15 copay Specialist: \$35 copay Preventive Care: \$0 copay
Emergency Room (copay waived if admitted)	\$337 copay plus 30% coinsurance after deductible	\$65 copay	\$65 copay
Inpatient Hospital	\$337 copay plus 30% coinsurance after deductible	Days 1 – 10: \$160 copay per day Days 11+: \$0 copay	Days 1 – 10: \$150 copay per day Days 11+: \$0 copay
Outpatient Hospital	In-network: 30% coinsurance after deductible	\$125 copay	\$100 copay
Diagnostic Procedures (e.g. , CT, MRI)	In-network: 30% coinsurance after deductible	\$100 copay	\$100 copay
Skilled Nursing Facility	In-network: 30% coinsurance after deductible	Days 1 – 20: \$0 copay Days 21 – 100: \$50 copay per day	Days 1 – 20: \$0 copay Days 21 – 100: \$50 copay per day
SilverSneakers Fitness Program	Not covered	Included	Included

*Cost-sharing amounts between you and the State Health Plan will vary if you enroll in the Traditional 70/30 plan. Medicare pays benefits first. Then, the 70/30 plan may help pay some of the costs that Medicare does not cover.

The North Carolina State Health Plan Prescription Benefits for Plan Year 2018

Plan Benefits	70/30 PPO	UHC Group Medicare Advantage BASE Plan	UHC Group Medicare Advantage Enhanced Plan
Individual Prescription Drug Out-of-Pocket Maximum	\$3,360	\$2,500	\$2,500
Retail Purchase From An In-Network Provider			
Tier 1 Drugs	\$16 copay per 30 day supply	\$10 copay per 31 day supply	\$10 copay per 31 day supply
Tier 2 Drugs	\$47 copay per 30 day supply	\$40 copay per 31 day supply	\$35 copay per 31 day supply
Tier 3 Drugs	\$74 copay per 30 day supply	\$64 copay per 31 day supply	\$50 copay per 31 day supply
Tier 4 Drugs	10% coinsurance, up to \$100 per 30 day supply	25% coinsurance, up to \$100 per 31 day supply	25% coinsurance, up to \$100 per 31 day supply
Tier 5 Drugs	25% coinsurance, up to \$103 per 30 day supply	Not Applicable	Not Applicable
Tier 6 Drugs	25% coinsurance, up to \$133 per 30 day supply		
Preferred Diabetic Testing Supplies	\$10 copay per 30 day supply**	\$0*	\$0*
Maintenance Drugs from In-Network Provider – Up To A 90 day Supply			
Tier 1 Drugs	\$48 copay	\$24 copay	\$20 copay
Tier 2 Drugs	\$141 copay	\$80 copay	\$70 copay
Tier 3 Drugs	\$222 copay	\$128 copay	\$100 copay
Tier 4 Drugs ***	10% coinsurance, up to \$300	25% coinsurance, up to \$300	25% coinsurance, up to \$200
Tier 5 Drugs	25% coinsurance, up to \$309	Not Applicable	Not Applicable
Tier 6 Drugs	25% coinsurance, up to \$399	Not Applicable	Not Applicable

* Non-preferred diabetic testing supplies are not covered.

** Non-preferred diabetic testing supplies are paid as Tier 3.

*** Some specialty drugs are limited to a 30 or 31 day supply (depending on the plan).