



Blue Cross  
Blue Shield  
of Rhode Island

HEALTH PLANS  
THAT WORK

FOR YOU

Providing high-quality, affordable health benefits to employees may be one of the biggest challenges employers face today. Whether you're running a small family business or a high-tech start-up, we offer the options that fit your business—and your bottom line.



# VantageBlue<sup>SM</sup>

Ideal if you're looking for: **Extensive preventive benefits and incentives to reward employees for taking steps to be healthier**



**VantageBlue** provides traditional benefits with added features and incentives for healthy living. This plan empowers your employees with many preventive benefits that make it easier to be healthier and take an active role in their healthcare.

## Plan Features

- A \$50 incentive for completing an online personal health assessment and wellness pledge
- \$2 copayments for certain maintenance drugs used to treat diabetes, asthma, and COPD
- \$0 copayments for foot and eye exams for members with diabetes
- Full coverage for education programs on smoking cessation, weight loss, and managing conditions such as asthma and diabetes

## VantageBlue Offers:

Lower premiums	✓*
Wellness incentives	✓
National network	✓
Tax savings opportunities	
Predictable copayments	✓
Flexible plan/network options	✓

\*With the SelectRI network option.

## SelectRI – A New Network Option to Lower Your Healthcare Costs



**SelectRI** is an innovative network option, available with VantageBlue, that lowers your premiums and lets your employees get quality care for less money out of their pockets. This is possible through our network of efficient, high-quality providers that make great care available at the lowest cost.

Employees can still choose any provider in our national network, but when they use **SelectRI** providers, they'll get the best value and comprehensive care, with these features:

- Primary care offices offer support from a full care team that includes nurses, social workers, nutritionists, and behavioral health specialists.
- Enhanced primary care services include extended/weekend hours and secure online access to test results.
- Primary care teams work directly with most hospitals in Rhode Island to ensure full involvement in care and coordinated follow-up care.
- **SelectRI** includes all specialists and hospitals and most free-standing outpatient facilities in BCBSRI's local network.

# BlueSolutions<sup>SM</sup>

*Ideal if you're looking for: An affordable plan that offers tax savings*



**BlueSolutions** helps keep premiums manageable—for you and your employees—while still offering comprehensive benefits. This high-deductible health plan empowers your employees to be savvy healthcare consumers. They'll have the option to set up a health savings account (HSA) so they can save pre-tax dollars for current and future medical expenses.

### Plan Features

- Higher deductibles that promote smart healthcare choices
- Lower employee contributions
- Up-front coverage for preventive care
- Coverage for most other services once the deductible has been met, which provides security and makes it easier for employees to plan for expenses
- HSA is portable and rolls over from year to year
- Savings are tax-deductible and money grows tax-deferred
- No taxes on HSA withdrawals for qualified medical expenses

BlueSolutions Offers:	
Lower premiums	✓
Wellness incentives	
National network	✓
Tax savings opportunities	✓
Predictable copayments	
Flexible plan/network options	

# LifeStyleBlue

*Ideal if you're looking for: A choice of unique benefit designs that match employees' individual needs without adding any additional administrative hassles*



This 3-in-1 health plan puts your employees in the driver's seat. They get to choose the plan that best fits their lifestyle and healthcare needs, and you have only one plan to manage. **LifeStyleBlue** also offers incentives and rewards to help members be healthy and active.

### Plan Features

- Easy administration for employers
- Tailored medical benefits that make sense for your employees' lifestyles and health status
- A financial incentive for your employees when they meet three simple wellness steps
- A lifestyle reward when your employees participate in certain healthy activities

LifeStyleBlue Offers:	
Lower premiums	
Wellness incentives	✓
National network	✓
Tax savings opportunities	
Predictable copayments	✓
Flexible plan/network options	✓

# BlueCHIP for Healthy Options

*Ideal if you're looking for: Affordable coverage plus wellness incentives*



**BlueCHIP for Healthy Options** features special wellness requirements that encourage your employees to take responsibility for their health. The idea is that a personal commitment to healthy living can lead to improved quality of life.

## Plan Features

- Significantly lower deductibles for employees who complete wellness requirements
- In-network coverage only
- Compliance with the Rhode Island Office of the Health Insurance Commissioner's requirements for a HEALTHpact plan

BlueCHIP for Healthy Options Offers:	
Lower premiums	✓
Wellness incentives	✓
National network	✓
Tax savings opportunities	
Predictable copayments	✓
Flexible plan/network options	

# HealthMate Coast-to-Coast®

*Ideal if you're looking for: A traditional health plan that helps you control premiums*



**HealthMate Coast-to-Coast** offers coverage for many services with no copayments or coinsurance in network once the deductible is met. Coinsurance applies to out-of-network services only.

## Plan Features

- Coverage for most services once the deductible has been met, which provides security and makes it easier for employees to plan for expenses
- No wellness requirements for employees

HealthMate Coast-to-Coast Offers:	
Lower premiums	✓
Wellness incentives	
National network	✓
Tax savings opportunities	
Predictable copayments	
Flexible plan/network options	

# ONLINE TOOLS AND SERVICES

## GET MORE FROM YOUR HEALTH PLAN: GET ON BCBSRI.COM!

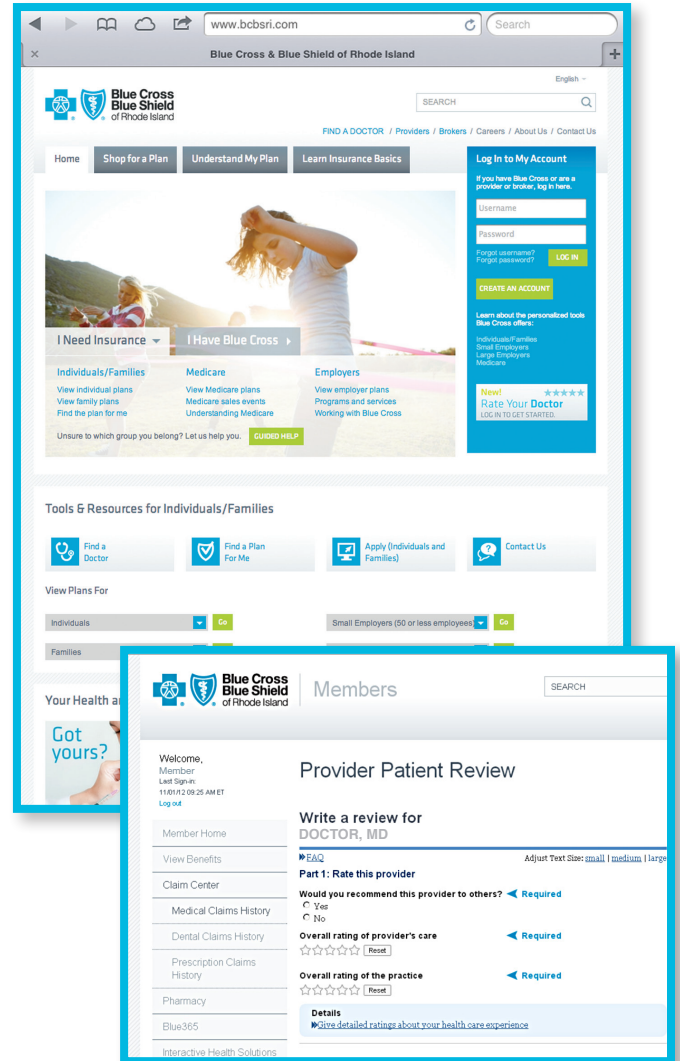
Your employees can get more from their health plan simply by registering on **BCBSRI.com**. They can:

- **Manage their health plan** – Check benefits and claims information, request a new ID card, and more
- **Find tools to improve their health** – Take a quick PHA, browse the Health Center for health-related articles, and more
- **Connect with other members and save money** – Interact on My Blue Community<sup>SM</sup>, get offers and discounts from Blue365<sup>®</sup>, and more

### Smarter Healthcare Decisions

Our online tools make it easier for your employees to make smarter, more informed decisions about their healthcare. When they log in to BCBSRI.com, they can get objective information to choose doctors, estimate and compare costs, and more:

- **Read and write reviews of network providers** – Share experiences and see quality ratings to find the right doctor.
- **Find Blue Physician Recognition-rated doctors** – Identify doctors who have been recognized by the national Blue Physician Recognition program because of their commitment to delivering quality, patient-centered care.
- **View cost estimates for common medical services** – Compare costs for the same service or procedure at various providers or hospitals.
- **Estimate out-of-pocket costs** – Find deductibles, copayments, and/or coinsurance for specific services (and compare between providers) based on their health plan design (coming soon).



# OPTIONAL BENEFITS AND SERVICES

We offer a total solution for your employees' healthcare needs. Simply add the optional benefits and services below.

	VantageBlue SelectRI	VantageBlue	LifeStyleBlue	HealthMate Coast-to-Coast 2000/4000	BlueSolutions for HSA	BlueCHIP for Healthy Options
<b>Blue Cross Dental</b>	✓	✓	✓	✓	✓	✓
<b>Acupuncture Benefit</b> (limit of 12 visits at \$10 copay)	✓	✓	✓	✓	✓	✓
<b>Vision Benefit</b> (reimbursement for glasses or contacts up to \$100 per member per year)	✓	✓	✓	✓	—	—
<b>Group Medicare Options</b>	✓	✓	✓	✓	✓	✓

## Pair your health plan with a consumer-spending account.

By providing tax-advantaged savings for medical expenses, these accounts help members better manage costs while encouraging them to be more involved in their overall care. Consumer-spending accounts, which are conveniently available through our preferred vendors London Health Administrators and Wells Fargo Health Benefit Services, also provide tax savings to employers.

**Flexible Spending Account:** Can be paired with LifeStyleBlue, VantageBlue, HealthMate Coast-to-Coast, BlueCHIP for Healthy Options, and BlueSolutions for HSA plans.

**Health Reimbursement Arrangement:** Can be paired with LifeStyleBlue, VantageBlue, HealthMate Coast-to-Coast, BlueCHIP for Healthy Options, and BlueSolutions for HSA plans.

**Health Savings Account:** Can be paired with BlueSolutions for HSA plans.

# PLAN BENEFIT GRIDS

## VantageBlue SelectRI

Network:	In Network		Out of Network
	TIER 1	TIER 2	
<b>Plan Year Deductible</b>	Individual \$1,000 Family \$2,000		Individual \$2,000 Family \$4,000
<b>Coinsurance</b>	0%	20%	50%
<b>Plan Year Out-of-Pocket Maximum</b>	Individual \$3,000 Family \$6,000		Individual \$6,000 Family \$12,000
<b>Deductible/OOP Max Calculation</b>	Hybrid		Hybrid
<b>Wellness Program Incentives:</b>			
<b>Incentives</b>	\$50 for the completion of a PHA (personal health assessment) for the member and spouse (age 18+) on BCBSRI.com Reduced copayments for certain prescriptions and services for members with certain health conditions		
<b>Office Visits:</b>			
<b>Preventive Services</b>	\$0	\$0	50% after deductible
<b>Primary Care Office Visit</b>	\$10	\$10 up to age 19 \$30 ages 19+	50% after deductible
<b>Specialist Office Visit</b>	\$30	\$50	50% after deductible
<b>Chiropractic Office Visit</b>	\$30 (20 visit limit)	\$50 (20 visit limit)	50% after deductible (20 visit limit)
<b>Annual Foot and Eye Exam for Members with Diabetes</b>	\$0	\$0	50% after deductible
<b>Outpatient Services:</b>			
<b>Diagnostic Lab</b>	\$25	\$75	50% after deductible
<b>Diagnostic X-ray, Imaging and Machine Tests</b>	\$50	\$150	50% after deductible
<b>High-end Radiology Services (MRI, CAT, PET) and Nuclear Medicine</b>	\$200	\$600	50% after deductible
<b>Sleep Studies</b>	\$200	\$600	50% after deductible
<b>Surgery - Performed in Physician's Office</b>	\$0	\$0	50% after deductible
<b>Surgery - Outpatient</b>	0% after deductible	0% after deductible	50% after deductible
<b>Durable Medical Equipment</b>	20% after deductible	20% after deductible	50% after deductible
<b>Physical Therapy, Occupational Therapy, and Speech Therapy</b>	\$25 (30 visit limit for each)	\$75 (30 visit limit for each)	50% after deductible (30 visit limit for each)
<b>Emergency Services:</b>			
<b>Urgent Care Center</b>	\$75	\$75	\$75
<b>Emergency Room</b>	\$200	\$200	\$200
<b>Inpatient Services:</b>			
<b>Inpatient Services</b>	0% after deductible	20% after deductible	50% after deductible
<b>Prescription Benefit Options:</b>			
<b>Standard Option</b>	\$10/\$35/\$60/\$100		N/A
<b>Buy-Up Option</b>	\$7/\$30/\$50/\$75		N/A

# LifeStyleBlue 1

80/60

On Your Own

Family Matters

House to Yourself

Your Medical Benefits\*

Your Cost

Your Cost

Your Cost

**Office Visits:**

	Patient-Centered Medical Home (PCMH)	Non-PCMH	Patient-Centered Medical Home (PCMH)	Non-PCMH	Patient-Centered Medical Home (PCMH)	Non-PCMH
Primary care office visit (non-preventive services)	\$0	\$15 ages 19+	\$0	\$25 ages 19+	\$0	\$15 ages 19+
		\$25 (5-18yrs)		\$15 (5-18yrs)		\$25 (5-18yrs)
		\$25 (0-4 yrs)		\$5 (0-4yrs)		\$25 (0-4 yrs)
Specialist office visit	\$30		\$30		\$30	
Chiropractic office visit	\$30 limit 24		\$30 limit 12		\$30 limit 12	
Acupuncture office visit	Not covered		Not covered		\$30 limit 12	

**Preventive Services:**

This includes adult and pediatric well-exams, adult and child immunizations, PAP smears and mammogram screenings, PSA tests, and colorectal screenings.

Preventive services	\$0	\$0	\$0
---------------------	-----	-----	-----

**Emergency Services:**

Urgent care center/ER	\$50/\$150	\$75/\$100	\$75/\$200
Ambulance	\$50	\$50	\$50

<b>Deductible (Hybrid) In-network:</b> Individual/Family	\$1,500/\$3,000	\$1,000/\$2,000	\$1,000/\$2,000
<b>Deductible (Hybrid) Out-of-network:</b> Individual/Family	\$3,000/\$6,000	\$2,000/\$4,000	\$2,000/\$4,000

<b>Coinsurance In-network</b>	20%	20%	20%
<b>Coinsurance Out-of-network</b>	40%	40%	40%

<b>Out-of-Pocket Maximum In-network:</b> Individual/Family	\$4,500/\$9,000	\$3,000/\$6,000	\$3,000/\$6,000
<b>Out-of-Pocket Maximum Out-of-network:</b> Individual/Family	\$9,000/\$18,000	\$6,000/\$12,000	\$6,000/\$12,000

**Inpatient Services:**

Hospitalization	20% after deductible	20% after deductible	20% after deductible
-----------------	----------------------	----------------------	----------------------

**Outpatient Services:**

Lab tests/X-rays	\$0	\$0	\$0
1 initial MRI per year	100% coverage pre-deductible	N/A	N/A
High-end radiology	20% after deductible	20% after deductible	20% after deductible
Physical therapy	\$30 copay/30 visit limit, deductible does not apply	20% after deductible/30 visit limit	20% after deductible/30 visit limit
Occupational therapy	20% after deductible/30 visit limit	20% after deductible/30 visit limit	20% after deductible/30 visit limit
Speech therapy	20% after deductible/30 visit limit	\$30 copay/30 visit limit, deductible does not apply	20% after deductible/30 visit limit
Durable medical equipment	20% after deductible	20% after deductible	20% deductible does not apply

**NEW Additional Services:**

<b>Maternity classes</b>	Not covered	\$30 copay	Not covered
<b>Dental, vision, and acupuncture riders</b>	Available	Available	Available

**Prescription Drugs:**

<b>Retail pharmacy</b>			
<b>Generic</b>	\$4	\$10	\$10
Preferred	20% (up to \$50)	\$35	\$35
Non-preferred brand	20% (up to \$75)	\$60	\$60
Specialty	20% (up to \$200)	\$100	\$100
<b>Mail-order pharmacy (3-month supply)</b>			
<b>Generic</b>	\$10	\$25	\$25
Preferred	20% (up to \$125)	\$87.50	\$87.50
Non-preferred brand	20% (up to \$187.50)	\$150	\$150

\* Actual benefits will be determined in accordance with your subscriber agreement.



\* Actual benefits will be determined in accordance with your subscriber agreement.

LifeStyleBlue 2	100/80					
	On Your Own		Family Matters		House to Yourself	
Your Medical Benefits*	Your Cost		Your Cost		Your Cost	
<b>Office Visits:</b>						
	Patient-Centered Medical Home (PCMH)	Non-PCMH	Patient-Centered Medical Home (PCMH)	Non-PCMH	Patient-Centered Medical Home (PCMH)	Non-PCMH
Primary care office visit (non-preventive services)	\$10	\$25	\$10	\$25 ages 19+ \$15 (5-18yrs) \$5 (0-4yrs)	\$10	\$25
Specialist office visit	\$50		\$50		\$50	
Chiropractic office visit	\$50 limit 24		\$50 limit 12		\$50 limit 12	
Acupuncture office visit	Not covered		Not covered		\$10 limit 12	
<b>Preventive Services:</b>						
This includes adult and pediatric well-exams, adult and child immunizations, PAP smears and mammogram screenings, PSA tests, and colorectal screenings.						
Preventive services	\$0		\$0		\$0	
<b>Emergency Services:</b>						
Urgent care center/ER	\$50/\$150		\$75/\$100		\$75/\$200	
Ambulance	\$50		\$50		\$50	
<b>Deductible (Hybrid) In-network:</b> Individual/Family	\$3,500/\$7,000		\$3,000/\$6,000		\$3,000/\$6,000	
<b>Deductible (Hybrid) Out-of-network:</b> Individual/Family	\$7,000/\$14,000		\$6,000/\$12,000		\$6,000/\$12,000	
<b>Coinsurance In-network</b>	0%		0%		0%	
<b>Coinsurance Out-of-network</b>	20%		20%		20%	
<b>Out-of-Pocket Maximum In-network:</b> Individual/Family	\$10,500/\$21,000		\$9,000/\$18,000		\$9,000/\$18,000	
<b>Out-of-Pocket Maximum Out-of-network:</b> Individual/Family	\$21,000/\$42,000		\$18,000/\$36,000		\$18,000/\$36,000	
<b>Inpatient Services:</b>						
Hospitalization	0% after deductible		0% after deductible		0% after deductible	
<b>Outpatient Services:</b>						
Lab tests/X-rays	\$0		\$0		\$0	
1 initial MRI per year	100% coverage pre-deductible		N/A		N/A	
High-end radiology	20% after deductible		20% after deductible		20% after deductible	
Physical therapy	\$30 copay/30 visit limit, deductible does not apply		20% after deductible/30 visit limit		20% after deductible/30 visit limit	
Occupational therapy	20% after deductible/30 visit limit		20% after deductible/30 visit limit		20% after deductible/30 visit limit	
Speech therapy	20% after deductible/30 visit limit		\$30 copay/30 visit limit, deductible does not apply		20% after deductible/30 visit limit	
Durable medical equipment	20% after deductible		20% after deductible		20% deductible does not apply	
<b>NEW Additional Services:</b>						
<b>Maternity classes</b>	Not covered		\$50 copay		Not covered	
<b>Dental, vision, and acupuncture riders</b>	Available		Available		Available	
<b>Prescription Drugs:</b>						
<b>Retail pharmacy</b>						
<b>Generic</b>	\$7		\$10		\$10	
Preferred	25% (up to \$75)		\$50		\$50	
Non-preferred brand	35% (up to \$75)		\$75		\$75	
Specialty	50% (up to \$150)		\$200		\$200	
<b>Mail-order pharmacy (3-month supply)</b>						
<b>Generic</b>	\$17.50		\$25		\$25	
Preferred	20% (up to \$187.50)		\$125		\$125	
Non-preferred brand	20% (up to \$187.50)		\$187.50		\$187.50	

	HealthMate Coast-to-Coast	BlueSolutions for HSA		BlueCHIP for Healthy Options*	
	2000/4000 Ded	1500	3000	Advantage	Basic
<b>In-Network</b>					
<b>Plan Year Deductible</b>	Individual \$2,000 Family \$4,000	Individual \$1,500 Family \$3,000	Individual \$3,000 Family \$6,000	Individual \$750 Family \$1,500	Individual \$5,000 Family \$10,000
<b>Coinsurance</b>	0%	0%		N/A	20%
<b>Plan Year Out-of-Pocket Maximum</b>	Individual \$2,000 Family \$4,000	Individual \$3,000 Family \$6,000	Individual \$5,950 Family \$11,900	Individual \$2,000 Family \$4,000	Individual \$5,000 Family \$10,000
<b>Deductible/OOP Max Calculation</b>	Family	Family	Family	Hybrid	Hybrid
<b>Out-of-Network</b>					
<b>Plan Year Deductible</b>	Individual \$4,000 Family \$8,000	Individual \$1,500 Family \$3,000	Individual \$3,000 Family \$6,000	No coverage	No coverage
<b>Coinsurance</b>	20%	40%		N/A	N/A
<b>Plan Year Out-of-Pocket Maximum</b>	Individual \$8,000 Family \$16,000	Individual \$3,000 Family \$6,000	Individual \$5,950 Family \$11,900	N/A	N/A
<b>Deductible/OOP Max Calculation</b>	Family	Family	Family	N/A	N/A
<b>Wellness Program Incentives</b>					
<b>Incentives</b>	N/A	N/A		N/A	N/A
<b>In-Network Benefits</b>					
<b>Primary Care Office Visit</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$10	\$30
<b>Specialist Office Visit</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$50	\$60
<b>Preventive Services</b>	\$0	\$0	\$0	\$0	\$0
<b>Outpatient Services, including surgery, lab tests, and X-rays</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	20% after deductible
<b>Durable Medical Equipment</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	20% after deductible	30% after deductible
<b>Physical Therapy, Occupational Therapy, and Speech Therapy</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$50	\$60
<b>Urgent Care Center</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$100	\$100
<b>Emergency Room</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$200	\$200
<b>Inpatient Services</b>	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	20% after deductible
<b>Prescription Benefit Options</b>					
<b>Standard Option</b>	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100 after deductible		\$10/\$40/\$75/\$75	\$10/\$40/\$75/\$75 \$250/\$500 Ded (applies to tiers 2-4)
<b>Buy-Up Option</b>	\$7/\$30/\$50/\$75	Not available		Not available	Not available



\*BlueCHIP for Healthy Options complies with the Rhode Island Office of the Health Insurance Commissioner's (OHIC) requirements for a HEALTHpact plan. HEALTHpact plans are designed to assist small employers in offering health coverage that encourages members to make healthy lifestyle choices by meeting certain wellness participation requirements.

VantageBlue						
100/80				100/60	80/60	
250	500	1000	2000	1500	1000	2000
Individual \$250 Family \$500	Individual \$500 Family \$1,000	Individual \$1,000 Family \$2,000	Individual \$2,000 Family \$4,000	Individual \$1,500 Family \$3,000	Individual \$1,000 Family \$2,000	Individual \$2,000 Family \$4,000
0%	0%	0%	0%	0%	20%	20%
Individual \$750 Family \$1,500	Individual \$1,500 Family \$3,000	Individual \$3,000 Family \$6,000	Individual \$6,000 Family \$12,000	Individual \$4,500 Family \$9,000	Individual \$3,000 Family \$6,000	Individual \$4,000 Family \$8,000
Hybrid	Hybrid	Hybrid	Hybrid	Hybrid	Hybrid	Hybrid
Individual \$1,000 Family \$2,000	Individual \$1,000 Family \$2,000	Individual \$2,000 Family \$4,000	Individual \$4,000 Family \$8,000	Individual \$4,000 Family \$8,000	Individual \$2,000 Family \$4,000	Individual \$6,000 Family \$12,000
20%	20%	20%	20%	40%	40%	40%
Individual \$3,000 Family \$6,000	Individual \$3,000 Family \$6,000	Individual \$6,000 Family \$12,000	Individual \$12,000 Family \$24,000	Individual \$12,000 Family \$24,000	Individual \$6,000 Family \$12,000	Individual \$12,000 Family \$24,000
Hybrid	Hybrid	Hybrid	Hybrid	Hybrid	Hybrid	Hybrid
\$50 for the completion of a PHA (Personal Health Assessment) for the member and spouse (age 18+) on BCBSRI.com Reduced copayments for certain prescriptions and services for members with certain health conditions						
\$15	\$15	\$15	\$15	\$25 ages 19+ \$15 Sick visits (5-18 yrs) \$5 Sick visits (0-4 yrs)	\$15	\$15
\$30	\$30	\$30	\$30	\$40	\$30	\$30
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	20% after deductible	20% after deductible
20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
\$50	\$50	\$50	\$50	\$50	\$50	\$50
\$100	\$100	\$100	\$100	\$250	\$100	\$100
\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	\$0 after deductible	20% after deductible	20% after deductible
\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100	\$10/\$35/\$60/\$100
\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75	\$7/\$30/\$50/\$75

This is not a contract; it is to be used as a general guide. For specific plan details, please contact your account representative or broker for a detailed benefit summary.

## *Questions?*

*To find out more about **VantageBlue SelectRI** or any of our health plans for small businesses, call your Broker or BCBSRI Account Executive today.*



[www.bcbsri.com](http://www.bcbsri.com)

500 Exchange Street • Providence, RI 02903-2699

Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

02/13 PER-12821 • 5702