Brown Health High-Deductible Medical Plan

Understanding Your Benefits

Deductibles

Preferred Network & National Blue Cross Network:

$2,000 per individual plan; **$4,000** per family plan in-network;

$4,000 per individual plan; **$8,000** per family plan out-of-network

Aggregate deductible: All deductible payments count toward the family deductible, one or all can meet it. The full family deductible must be met before the plan begins to pay benefits.

Out-of-pocket limits

Preferred Network & National Blue Cross Network:

$4,000 per individual plan; **$8,000** per family plan in-network ;

$11,000 per individual plan; **$22,000** per family plan out-of-network

All out-of-pocket payments count toward the family out-of-pocket limit.

Please note: The deductible and out-of-pocket limits are separate for in-network and out-of-network services.

This plan has an extensive national network with access to thousands of providers across the country.

Service	Preferred Network*	National Blue Cross Network	Out-of-network
Primary Care	10% after deductible	20% after deductible	50% after deductible
Specialist	10% after deductible	20% after deductible	50% after deductible
Urgent Care	10% after deductible	20% after deductible	50% after deductible
Emergency Room	$200 Copay after deductible	$200 Copay after deductible	Covered the same as Tier 2 benefit
Ambulance	10% after deductible	10% after deductible	Covered the same as Tier 2 benefit
Chiropractic	10% after deductible	20% after deductible	50% after deductible
Acupuncture	10% after deductible	20% after deductible	50% after deductible
Preventive Care	Covered in full	Covered in full	50% after deductible
Diagnostic Lab work	10% after deductible	20% after deductible	50% after deductible
Diagnostic imaging	10% after deductible	20% after deductible	50% after deductible
Diagnostic Colonoscopy**	10% after deductible	20% after deductible	50% after deductible
High-end Radiology	10% after deductible	20% after deductible	50% after deductible
Outpatient Surgery	10% after deductible	20% after deductible	50% after deductible
Inpatient Services	10% after deductible	20% after deductible	50% after deductible
Inpatient Maternity	10% after deductible	10% after deductible	50% after deductible
Behavioral Health/Chemical Dependency-Inpatient/Outpatient	10% after deductible	10% after deductible	50% after deductible
Durable Medical Equipment	10% after deductible	10% after deductible	50% after deductible

Service	Preferred Network*	National Blue Cross Network	Out-of-network
Physical, Occupational, and Speech Therapy	10% after deductible	10% after deductible	50% after deductible

* The Preferred Network includes Rhode Island Hospital and its pediatric division, Hasbro Children's; The Miriam Hospital; Newport Hospital; Bradley Hospital; Gateway Healthcare; Saint Anne's Hospital; Morton Hospital; Brown University Health Urgent Care Centers, Hawthorn Medical Associates, Prima CARE, Hawthorn Urgent Care, Pediatric Associates at Northwoods, Middleboro Pediatrics, Pediatric Associates of Fall River, Prima CARE Walk In, Revere Medical Group, Brown Health Medical Group, Brown Health Medical Group Primary Care, and related service locations. Visit bcbsri.com/brownhealth for the complete list of Preferred Network hospitals, providers, and laboratories.

** Preventive colonoscopies: covered once every 5 years starting at age 45

Online member account:

Create your member account at **bluecareconnectRI.com** or download the BlueCare Connect app to get started.

This summary provides information about your Brown University Health benefits. This document does not entitle you to benefits offered by Brown University Health. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern

Need Help?

Call your Brown University Health Employee CARE Center

- *Locally: (401) 429-2102*
- *Outside Rhode Island: 1-866-987-3706*
- *TTY/TDD (Telecommunication Device for the Deaf) Users should call 711*

Hours:

Monday – Friday 8:00 am to 8:00 pm; Saturday 8:00 am to 12 pm, Eastern Time

Your Blue Stores:

- *East Providence- 71 Highland Ave*
- *Lincoln- 622 George Washington Hwy*
- *Warwick- 300 Quaker Ln*
- *Cranston- 1400 Oaklawn Ave*
- *Narragansett- 91 Point Judith Rd*

Plan Year: 2027
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