

CareFirst BlueChoice, Inc. (HMO)

CHARLES COUNTY COMMISSIONERS

Summary of Benefits

Services	You Pay
Inpatient Hospitalization	Covered in full
Inpatient Medical/Surgical	Covered in full
Emergency Services (Life Threatening)	ER—100% after \$50 copay; waived if admitted Urgent Care Center—\$10 PCP copay, \$15 Specialist copay
Primary Care Office Visit Specialist Office Visit	\$10 PCP \$15 Specialist
Outpatient Surgery	\$10 PCP/\$15 Specialist
Maternity Care	Covered in full
Diagnostic X-ray & Lab	Office—\$10 copay Outpatient Facility—\$30 copay
Other Diagnostic (MRI, CAT Scan, Pet Scan)	Office—\$20 copay Outpatient Facility—\$30 copay
Well Child Care	Covered in full
Routine Physicals	Covered in full
Allergy Testing	Allergy Testing/Injections/Serum \$10 PCP/\$15 Specialist copay
Physical/Occupational/Speech Therapy (PT, OT, ST)	\$15 copay, 30 visits per condition, per calendar year
Chiropractic Care	\$15 copay; 20 visits per calendar year
Radiation/Chemotherapy/Renal Dialysis	\$15 copay per visit
Durable Medical Equipment	Covered in full – no max
Prescription Drugs (When filled by Participating Pharmacies)	\$5 copay Generic/\$20 copay Formulary Brand \$35 copay Non-Formulary Brand 3 copays for 90-day maintenance supply at retail 2 copays for 90-day maintenance supply
Inpatient Psychiatric	*Covered in full
Outpatient Psychiatric	*\$10 copay per visit
Alcohol/Substance Abuse Rehabilitation	*See Psychiatric Benefits
Plan Provisions	
Copays	\$10 PCP, \$15 Specialist, \$50 ER
Calendar Year Deductible	None
Coinsurance	None
Out-of-Pocket Maximum (Includes Deductible)	\$2,000 Individual/\$6,000 Family
Dependent Age Limit	End of the month in which they turn 26
Cost Containment	N/A

The above serves as a comparison only. Please consult each plan benefit guide for full details, particularly in regard to exclusions, limitations, and additional coverage.

Benefits subject to the contract between CareFirst BlueCross BlueShield, CareFirst BlueChoice, Inc. and Charles County Commissioners.

*Benefits will be managed through Magellan Behavioral Health. All inpatient psychiatric/alcoholism treatment requires preauthorization by Magellan Behavioral Health: (800) 245-7013.



The CareFirst BlueCross BlueShield family of health care plans

www.carefirst.com

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. are both independent licensees of the Blue Cross and Blue Shield Association.

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