

# EmblemHealth ConsumerDirect Plan Discontinuance 2012 and Replacement Plans



**START DATE:** JANUARY 2012, ON RENEWAL\*

**END DATE:** DECEMBER 2012

## CONSUMERDIRECT PPO PLAN OPTION

**2+ Groups in the CD PPO will be transitioned into the plan below.**

In-network Deductible Individual/Family	Out of Network Deductible	In-network Coinsurance Individual/Family	Out of Network Coinsurance	In-network Out of Pocket Max Individual/Family	Out of Network Out of Pocket Max Individual/Family
\$3,000/\$6,000	\$6,000/\$12,000	20%	40%	\$5,000/\$10,000	\$10,000/\$20,000

## PRESCRIPTION DRUG OPTIONS

**All plans will be moved to the Pharmacy plan below.**  
Retail copay amounts apply after meeting the plan deductible.  
Retail: \$10/\$25/\$50\*\*

## CONSUMERDIRECT EPO PLAN OPTIONS

**2+ Groups in the CD EPO plan options with individual deductible \$5,000 or below will be transitioned into the plan option below.**

In-network Deductible Individual/Family	In-network Coinsurance	In-network Out of Pocket Max Individual/Family
\$3,000/\$6,000	20%	\$5,000/\$10,000

## PRESCRIPTION DRUG OPTIONS

**All plans will be moved to the Pharmacy plan below.**  
Retail copay amounts apply after meeting the plan deductible.  
Retail: 15/\$35/\$75\*\*

**Sole Proprietors in the CD EPO plan options with individual deductible below \$5,800 will be transitioned into the plan option below.**

In-network Deductible Individual/Family	In-network Coinsurance	In-network Out of Pocket Max Individual/Family
\$5,800 / \$11,600	0%	\$5,800/\$11,600

Covered in full after meeting the plan deductible.

\* All ConsumerDirect plans with calendar year deductibles will be discontinued and replaced with the new plans on January 1, 2012. The group renewal date will change to January 1.

\*\* Tier 1 includes multi-source generic drugs. Tier 2 includes single-source generic drugs and brand-name drugs. Tier 3 includes non-formulary brand drugs.