Emergent Holdings

2025 NBU High-level comparison of medical benefit plans

Benefits	Simply Blue ^{sм} PPO \$1,000*	Simply Blue sM HSA \$2,000**
	Network providers	Network providers
Deductible	\$1,000 for one member or \$2,000 for a family (2 or more members)	\$2,000 for one member or \$4,000 for a family (2 or more members)
Coinsurance	20%	20%
Out-of-Pocket Maximum	\$2,250 for one member or \$4,500 for a family (2 or more members)	\$3,500 for one member or \$7,000 for a family (2 or more members)
Fixed Dollar Copays	 \$30 for office visits \$30 for medical online visits \$30 for chiropractic visits \$30 for osteopathic manipulative therapy \$60 for urgent care \$50 for specialist visits \$150 for emergency room 	None
Preventive Care Services	100% Covered	100% Covered
Pharmacy Retail	30 Day Supply \$10 for generic drugs, \$40 for preferred brand name drugs, and \$80 for non-preferred brand name drugs	Subject to deductible and coinsurance
Pharmacy mail	90 Day Supply \$20 for generic drugs, \$80 for preferred brand name drugs, and \$160 for non-preferred brand name drugs	Subject to deductible and coinsurance

*Annual out-of-pocket maximums applies to deductibles, copays and coinsurance amounts for all covered services – including cost-sharing amounts for prescription drugs, if applicable

**Simply Blue HSA deductible combines the deductible amounts paid under the Simply Blue medical coverage and Simply Blue prescription drug coverage.

Simply Blue copay dollar maximum combines the copay amounts paid under the Simply Blue medical coverage and Simply Blue prescription drug coverage.