Cape Cod Municipal Health Group

N	Current	Proposed for 7/1/12	Health Plan	Segal Co.
Network Blue New England EPO	CCMHG	CCMHG	Estimated	Estimated
Legacy	NetworkBlue Legacy	Network Blue	<u>Savings</u>	Savings
Plan Design Features	Co-Pay/Deductible	Co-Pay/Deductible	from changes	from changes
Front-End Deductible	None	\$250/\$750		
PCP Office Visits	\$10	\$20		
Specialist Office Visits	\$10	\$35		
Mental Health Office Visits	\$10	\$20		
Preventive Services	\$0	\$0		
ER	\$25	\$100		
Inpatient Admission	\$0	\$500		
Outpatient Surgery	\$0	\$150		
Radiology (MRI, CT, & PET)	\$0	\$100		
Rx - Retail	\$5/15/30	\$10/25/50		
Rx - Mail Order	\$5/15/30	\$20/50/110		
Out of Pocket Max	None	\$2,000/ \$4000	-13.50%	-12.80%
Cat of F Conce max	110110	Ψ2,000, Ψ1000	1010070	12.0070
	Current	Proposed for 7/1/12	Health Plan	Segal Co.
Network Blue New England EPO	CCMHG	CCMHG	Estimated	Estimated
Rate Saver	NetworkBlue Rate Saver	Network Blue	Savings	Savings
			_	from changes
Plan Design Features	Co-Pay/Deductible	Co-Pay/Deductible	from changes	nom changes
Front-End Deductible	None	\$250/\$750		
PCP Office Visits	\$20	\$20		
Specialist Office Visits	\$20	\$35		
Mental Health Office Visits	\$20	\$20		
Preventive Services	\$0	\$0		
ER	\$75	\$100		
Inpatient Admission	\$500	\$500		
Outpatient Surgery	\$250	\$150		
Radiology (MRI, CT, & PET)	\$50	\$100		
Rx - Retail	\$15/30/50	\$10/25/50		
Rx - Mail Order	\$30/60/100	\$20/50/110		
Out of Pocket Max		· ·		4.000/
JOUL OF FOUNDLIVIAX	None	\$2,000/ \$4000	-3.80%	-4.00%
Out Of Focket Max	None	\$2,000/ \$4000	-3.80%	-4.00%
Out OF FOUNCE IVIDA	Current IN-NETWORK	\$2,000/ \$4000 Proposed for 7/1/12	-3.80% Health Plan	Segal Co.
Blue Care Elect Preferred PPO				
	Current IN-NETWORK CCMHG	Proposed for 7/1/12	Health Plan	Segal Co.
Blue Care Elect Preferred PPO Legacy	Current IN-NETWORK	Proposed for 7/1/12 CCMHG	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO	Current IN-NETWORK CCMHG BCare Elect Legacy	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible	Health Plan Estimated	Segal Co. Estimated
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET)	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$0	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$5 \$0 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$100	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$100/25/50 \$20/50/110	Health Plan Estimated Savings from changes	Segal Co. Estimated Savings from changes
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$0 \$5 \$5 \$0 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$100	Health Plan Estimated Savings	Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$20/50/110 \$2,000/\$4000	Health Plan Estimated Savings from changes	Segal Co. Estimated Savings from changes
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000	Health Plan Estimated Savings from changes -13.50% Health Plan	Segal Co. Estimated Savings from changes -12.60% Segal Co.
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$50 \$0 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20 \$20	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20 \$20 \$20 \$20 \$0	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$500 \$150 \$100 \$20/50/110 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20 \$20 \$20 \$20 \$75	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$1500 \$1500 \$1500 \$10/25/50 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20 \$20 \$20 \$50 \$500	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$150 \$150 \$150 \$20/50/110 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery	Current IN-NETWORK CCMHG BCare Elect Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$50 \$50 \$0 \$0 \$5/15/30 \$5/15/30 \$5/15/30 None Current IN-NETWORK CCMHG BCare Elect Rate Saver Co-Pay/Deductible None \$20 \$20 \$20 \$5/15/30 \$5/15/30 None	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET)	Current IN-NETWORK	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$100	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail	Current IN-NETWORK	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$100 \$500 \$1100 \$500 \$1100 \$500 \$1100 \$10025/50	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings
Blue Care Elect Preferred PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out of Pocket Max Blue Care Elect Preferred PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET)	Current IN-NETWORK	Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$150 \$100 \$20/50/110 \$2,000/\$4000 Proposed for 7/1/12 CCMHG BlueCare Elect Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$100	Health Plan Estimated Savings from changes -13.50% Health Plan Estimated Savings	Segal Co. Estimated Savings from changes -12.60% Segal Co. Estimated Savings

Cape Cod Municipal Health Group

	Current	Proposed for 7/1/12	Health Plan	Segal Co.
Master Health Plus	CCMHG	CCMHG	Estimated	Estimated
Indemnity Plan	Master Health Plus	Master Health Plus	<u>Savings</u>	<u>Savings</u>
Plan Design Features	Co-Pay/Deductible	Co-Pay/Deductible	from changes	from changes
Front-End Deductible	None	\$250/\$750		
PCP Office Visits	\$10	\$20		
Specialist Office Visits	\$10	\$20		
Mental Health Office Visits	\$0	\$20		
Preventive Services	\$0	\$0		
ER	\$25	\$100		
Inpatient Admission	\$0	\$700		
Outpatient Surgery	\$0	\$150		
Radiology (MRI, CT, & PET)	\$0	\$100		
Rx - Retail	\$5/15/30	\$10/25/50		
Rx - Mail Order	\$5/15/30	\$20/50/110		
Out of Pocket Max	None	\$2,000/ \$4000	12.30%	8.90%

	Current	Proposed for 7/1/12	Health Plan	Segal Co.
Master Medical/Master Health *	ССМНС	ССМНС	Estimated	Estimated
Indemnity Plan	Master Med/Mstr Health	Master Health Plus	Savings	Savings
Plan Design Features	Co-Pay/Deductible	Co-Pay/Deductible	from changes	from changes
Front-End Deductible	None	\$250/\$750		
MM Extended Benefits Deductible	\$50/\$100	None		
PCP Office Visits	20% coinsurance	\$20		
Specialist Office Visits	20% coinsurance	\$20		
Mental Health Office Visits	20% coinsurance	\$20		
Preventive Services	\$0	\$0		
ER	\$0	\$100		
Inpatient Admission	\$0	\$700		
Outpatient Surgery	\$0	\$150		
Radiology (MRI, CT, & PET)	\$0	\$100		
Rx - Retail	20% coinsurance	\$10/25/50		
Rx - Mail Order	\$5/15/30	\$20/50/110		
	None	\$2,000/ \$4000	11.20%	5.00%

^{*} Master Medical will be changed to same benefits as Master Health Plus. As of 7/1/12 CCMHG will have only one indemnity plan.

Harvard Pilgrim EPO					
Per		Current	Proposed for 7/1/12	Health Plan	Segal Co.
Plan Design Features From-End Deductible Sinon-End Deductible			_		
Front-End Deductible Pop Office Visits Specialist Office Visits Spe					
PCP Office Visits				from changes	from changes
Specialist Office Visits					
Mental Health Office Visits		· .			
Preventive Services So So Si Si Si Si Si Si	1 .				
ER		· .			
Inpatient Admission		·			
Authority (NR, CT, & PET) Racial (NR, CT,					
Radiology (NRI, CT, & PET) Rx - Retail Rx - Rx	, ·	·	· ·		
Rx - Refail S5/10/25 S10/25/50 S2/20/50/10 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S10/25/50 S10/25/50 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S10/25/50 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S10/25/50 S2/20/50/10 S2/20/50/		\$0			
Rx - Mail Order S10/20/75 S2/0/60/110 S2/00/64/000 -13.40%	Radiology (MRI, CT, & PET)	\$0	\$100		
Cutrent Cutr	Rx - Retail	\$5/10/25	\$10/25/50		
Harvard Pilgrim EPO Rato Saver	Rx - Mail Order	\$10/20/75	\$20/50/110		
Harvard Pilgrim EPO Rate Saver Plan Design Features Pront-End Deductible Pront-End Deductible Savings From changes Pront-End Deductible Savings From changes Pront-End Deductible Savings Proventive Services Savings Sa	Out-of-Pocket Maximum	None	\$2,000/\$4,000	-13.40%	12.70%
Harvard Pilgrim EPO Rate Saver Plan Design Features Pront-End Deductible Pront-End Deductible Savings From changes Proventive Services Savings Proventive Services Saving Proventive Services					
PRICE PD (Rate Saver Co-Pay/Deductible Co-Pay/Deductible Co-Pay/Deductible Savings From changes F			-	Health Plan	
Plan Design Features Front-End Deductible S200/8750 S20	Harvard Pilgrim EPO	CCMHG	CCMHG	Estimated	Estimated
Front-End Deductible PCP Office Visits S20 S20 Specialist Office Visits S40 S20		HPHC EPO Rate Saver	HPHC EPO		
Front-End Deductible PCP Office Visits S20 Specialist Office Visits S40 S35 S20 S20 Specialist Office Visits S40 S35 S30	Plan Design Features	Co-Pay/Deductible	Co-Pay/Deductible	from changes	from changes
Specialist Office Visits		None	\$250/\$750		
Specialist Office Visits	PCP Office Visits	\$20	\$20		
Preventive Services R	Specialist Office Visits	\$40	\$35		
Preventive Services R	·	· .	· ·		
R			-		
Inpatient Admission		·			
Cutpatient Surgery \$200		·	· ·		
Radiology (MRI, CT, & PET) S0 \$100 \$200/50/500 \$200/50/100 \$200/50/500 \$200/50/100 \$200/50/500 \$200/50/100 \$200/50/500 \$200/50/100 \$200/50/500 \$		· ·			
Rx - Retail		·	· ·		
Rx - Mail Order	- · · · · · · · · · · · · · · · · · · ·	* -	· ·		
None \$2,000/\$4,000 4.70% 4.20%			· ·		
Harvard Pilgrim PPO Legacy Plan Design Features Front-End Deductible PCP Office Visits Store Sto		· ·	· ·	4 700/	4 200/
Harvard Pilgrim PPO Legacy Plan Design Features	Out-oi-Pocket Maximum	None	\$2,000/\$4,000	-4.70%	4.20 %
Harvard Pilgrim PPO Legacy Plan Design Features					
Page Plan Design Features Front-End Deductible PCP Office Visits Stopecialist Office Visits		Current IN-NETWORK	Proposed for 7/1/12	Health Plan	Segal Co.
Co-Pay/Deductible	Harvard Pilgrim PPO				
Front-End Deductible		ССМНС	ССМНС	Estimated	Estimated
PCP Office Visits Specialist Office Visits	Legacy	CCMHG HPHC PPO Legacy	CCMHG HPHC PPO	Estimated Savings	Estimated Savings
Specialist Office Visits S10 S35 S35 S10 S20 S	Legacy Plan Design Features	CCMHG HPHC PPO Legacy Co-Pay/Deductible	CCMHG HPHC PPO Co-Pay/Deductible	Estimated Savings	Estimated Savings
Mental Health Office Visits	Legacy Plan Design Features Front-End Deductible	CCMHG HPHC PPO Legacy Co-Pay/Deductible None	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750	Estimated Savings	Estimated Savings
Preventive Services ER	Legacy Plan Design Features Front-End Deductible PCP Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20	Estimated Savings	Estimated Savings
ER	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35	Estimated Savings	Estimated Savings
Inpatient Admission	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20	Estimated Savings	Estimated Savings
Outpatient Surgery \$0 \$150 \$100 \$1	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$0	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35	Estimated Savings	Estimated Savings
Radiology (MRI, CT, & PET) Rx - Retail Rx - Retail Rx - Mail Order Stoloy	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100	Estimated Savings	Estimated Savings
Rx - Retail	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$30 \$30 \$30	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500	Estimated Savings	Estimated Savings
Rx - Mail Order	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$30 \$30 \$0 \$0	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150	Estimated Savings	Estimated Savings
Current IN-NETWORK	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET)	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$0	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100	Estimated Savings	Estimated Savings
Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible Co-Pay/Deductible PCP Office Visits Savings From changes From changes Current IN-NETWORK CCMHG HPHC PPO Co-Pay/Deductible Savings from changes From changes From changes Segal Co. Estimated Savings from changes From changes Segal Co. Estimated Savings from changes From changes Som Co-Pay/Deductible Savings From changes From changes Segal Co. Estimated Savings From changes From changes Som Co-Pay/Deductible Savings From changes From changes Som Co-Pay/Deductible Savings From changes From changes Som Co-Pay/Deductible Savings From changes	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$100 \$5100	Estimated Savings	Estimated Savings
Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order CCMHG HPHC PPO Rate Saver Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 S20 S20 S20 S20 S20 S20 S20 S20 S20 S2	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$0 \$30 \$0 \$0 \$0 \$5/10/25 \$10/20/75	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110	Estimated Savings from changes	Estimated Savings from changes
Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order CCMHG HPHC PPO Rate Saver Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 Co-Pay/Deductible S250/\$750 S20 S20 S20 S20 S20 S20 S20 S20 S20 S2	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$0 \$30 \$0 \$0 \$0 \$5/10/25 \$10/20/75	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110	Estimated Savings from changes	Estimated Savings from changes
Rate Saver HPHC PPO Rate Saver Co-Pay/Deductible HPHC PPO Co-Pay/Deductible Savings from changes Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rate Saver Co-Pay/Deductible Where Co-Pay/Deductible Savings from changes None Specialist Office Visits Specialist Office Visits Mental Health Office Visits Specialist Office Visit	Legacy Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25 \$10/20/75 None	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$100 \$500 \$100 \$2,000/\$4,000	Estimated Savings from changes -12.10%	Estimated Savings from changes -12.40%
Plan Design Features Co-Pay/Deductible Co-Pay/Deductible from changes Front-End Deductible None \$250/\$750 \$20 PCP Office Visits \$20 \$20 Specialist Office Visits \$40 \$35 Mental Health Office Visits \$20 \$20 Preventive Services \$0 \$100 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$10/25/50 Rx - Retail \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000	Estimated Savings from changes -12.10%	Estimated Savings from changes -12.40% Segal Co.
Front-End Deductible None \$250/\$750 PCP Office Visits \$20 \$20 Specialist Office Visits \$40 \$35 Mental Health Office Visits \$20 \$20 Preventive Services \$0 \$0 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK CCMHG	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG	Estimated Savings from changes -12.10% Health Plan Estimated	Estimated Savings from changes -12.40% Segal Co. Estimated
PCP Office Visits \$20 \$20 Specialist Office Visits \$40 \$35 Mental Health Office Visits \$20 \$20 Preventive Services \$0 \$0 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO	Estimated Savings from changes -12.10% Health Plan Estimated Savings	Estimated Savings from changes -12.40% Segal Co. Estimated Savings
Specialist Office Visits \$40 \$35 Mental Health Office Visits \$20 \$20 Preventive Services \$0 \$0 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Mental Health Office Visits \$20 \$20 Preventive Services \$0 \$0 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$500 \$150 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750	Estimated Savings from changes -12.10% Health Plan Estimated Savings	Estimated Savings from changes -12.40% Segal Co. Estimated Savings
Preventive Services \$0 \$0 ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
ER \$100 \$100 Inpatient Admission \$300 \$500 Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$500 \$150 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Inpatient Admission	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$110/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$1100 \$500 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Outpatient Surgery \$200 \$150 Radiology (MRI, CT, & PET) \$0 \$100 Rx - Retail \$15/30/50 \$10/25/50 Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order \$0 \$100 \$10/25/50 \$10/25/50 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0 \$100	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Rx - Retail \$15/30/50 \$10/25/50	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0 \$100 \$300	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Rx - Mail Order \$30/60/150 \$20/50/110	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0 \$100 \$300 \$200	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35 \$20 \$0 \$100 \$500 \$150	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET)	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0 \$100 \$300 \$200 \$0	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
Out_of_Pocket Maximum None \$2,000/\$4,000 _4,70% 4,20%	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$0 \$100 \$300 \$200 \$0 \$15/30/50	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$50/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35 \$20 \$35 \$20 \$35 \$20 \$100 \$100 \$500 \$1100 \$500 \$1100 \$5000 \$1100 \$5000 \$1100 \$5000 \$1100 \$5000 \$1100	Estimated Savings from changes -12.10% Health Plan Estimated Savings	-12.40% Segal Co. Estimated Savings From changes
-4.30 / ₀	Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order Out-of-Pocket Maximum Harvard Pilgrim PPO Rate Saver Plan Design Features Front-End Deductible PCP Office Visits Specialist Office Visits Mental Health Office Visits Preventive Services ER Inpatient Admission Outpatient Surgery Radiology (MRI, CT, & PET) Rx - Retail Rx - Mail Order	CCMHG HPHC PPO Legacy Co-Pay/Deductible None \$10 \$10 \$10 \$10 \$10 \$30 \$30 \$0 \$0 \$5/10/25 \$10/20/75 None Current IN-NETWORK CCMHG HPHC PPO Rate Saver Co-Pay/Deductible None \$20 \$40 \$20 \$40 \$20 \$100 \$300 \$200 \$0 \$15/30/50 \$30/60/150	CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$0 \$100 \$500 \$150 \$100 \$10/25/50 \$20/50/110 \$2,000/\$4,000 Proposed for 7/1/12 CCMHG HPHC PPO Co-Pay/Deductible \$250/\$750 \$20 \$35 \$20 \$35 \$20 \$0 \$100 \$100 \$500 \$1100 \$500 \$10/25/50 \$20/50/110	-12.10% Health Plan Estimated Savings from changes	-12.40% Segal Co. Estimated Savings from changes