

Chicago					St. Louis					Mid-Missouri				Louisville/Lexington				Cincinnati																			
H6200-009 Essence Advantage Choice PPO		H6200-010 Essence Advantage Choice Plus PPO		H6200-011 Essence Advantage Premier Plus PPO		H2610-027 Essence Advantage Select HMO		H6200-001 Essence Advantage Choice PPO		H6200-002 Essence Advantage Choice Plus PPO		H6200-008 Essence Advantage Premier Plus PPO		H2610-005 Essence Advantage HMO		H2610-006 Essence Advantage Plus HMO		H2610-016 Essence Advantage Select HMO		H2610-026 Essence Advantage Empower HMO		H6200-003 Essence Advantage Choice PPO		H2610-001 Essence Advantage HMO		H6200-006 Essence Advantage Choice PPO		H2610-021 Essence Advantage HMO		H6200-007 Essence Advantage Choice PPO		H2610-023 Essence Advantage HMO		H6200-003 Essence Advantage Choice PPO		H3189-001 Essence Advantage HMO	
Service Area: Cook Dupage Will					Service Area: Missouri: Crawford Franklin Gasconade Jefferson Lincoln Montgomery St. Charles St. Louis St. Louis City Warren Washington					Service Area: Missouri: Barry Christian Dallas Greene Lawrence Polk Stone Taney Webster				Service Area: Kentucky: Anderson Bourbon Bullitt Carroll Clark Fayette Harrison Henry Jefferson Letcher Meade Mercer Nelson Oldham Owen Robertson Shelby Spencer Trimble Washington Woodford				Service Area: Kentucky: Boone Bracken Campbell Gallatin Kenton Pendleton; Ohio: Brown Butler Clermont Clinton Hamilton Warren																			
Illinois: Bond Clinton Jersey Macoupin Madison Monroe St. Clair					Arkansas: Benton Carroll Madison Washington					Indiana: Clark Crawford Floyd Harrison Jefferson Ripley Scott Switzerland Washington				Indiana: Dearborn Franklin Ohio																							
Premium	\$0	\$47	\$247	\$0	Premium	\$0	\$47	\$247	Premium	\$0	\$58	\$0	\$0	Premium	\$0	\$0	\$0	Premium	\$0	\$0	\$0	\$0	Premium	\$0	\$0	\$0	\$0	Premium	\$0	\$0	\$0	\$0	Premium	\$0	\$0	\$0	\$0
MOOP	\$4,150 INN, \$6,150 INN/OON	\$4,150 INN, \$6,150 INN/OON	\$1,000	\$3,250	MOOP	\$4,150 INN, \$6,200 INN/OON	\$3,900 INN, \$5,900 INN/OON	\$1,000	MOOP	\$3,400	\$2,900	\$3,900	\$3,900	MOOP	\$4,900 INN, \$6,900 INN/OON	\$0	\$3,350	MOOP	\$4,900 INN, \$6,900 OON	\$4,600	\$4,900 INN, \$6,900 OON	\$4,600	\$4,600	MOOP	\$4,900 INN, \$6,900 OON	\$4,600	\$4,900 INN, \$6,900 OON	\$4,600	\$4,600	MOOP	\$4,900 INN, \$6,900 OON	\$4,600	\$4,900 INN, \$6,900 OON	\$4,600	\$4,600		
Inpatient	\$310 Days 1-5	\$275 Days 1-5	\$500 per stay INN or OON	\$350 Days 1-7	Inpatient	\$275 Days 1-5	\$275 Days 1-4	\$500 per stay INN or OON	Inpatient	\$230 Days 1-4	\$195 Days 1-5	\$240 Days 1-5	\$250 Days 1-5	Inpatient	\$290 Days 1-4	\$310 Days 1-4		Inpatient	\$315 Days 1-5	\$295 Days 1-5			Inpatient	\$375 Days 1-5	\$295 Days 1-5	\$375 Days 1-5	\$295 Days 1-5	Inpatient	\$375 Days 1-5	\$295 Days 1-5	\$375 Days 1-5	\$295 Days 1-5					
PCP	\$0 INN, \$30 OON	\$0 INN, \$30 OON	\$0	\$0	PCP	\$0 INN, \$30 OON	\$0 INN, \$30 OON	\$0	PCP	\$0	\$0	\$0	\$0	PCP	\$0 INN, \$15 OON	\$0	\$0	PCP	\$0 INN, \$15 OON	\$0	\$0	\$0	PCP	\$0 INN, \$15 OON	\$0	\$0	\$0	PCP	\$0 INN, \$15 OON	\$0	\$0	\$0					
Specialist	\$30 INN, 50% OON	\$25 INN, 50% OON	\$0	\$25	Specialist	\$40 INN or OON	\$30 INN or OON	\$0	Specialist	\$30	\$30	\$30	\$35	Specialist	\$30 INN or OON	\$5	\$5	Specialist	\$30 INN or OON	\$5	\$5	\$5	Specialist	\$30 INN or OON	\$5	\$30 INN or OON	\$30	Specialist	\$30 INN or OON	\$5	\$30 INN or OON	\$30					
Labs	\$0, 40% OON	\$0, 50% OON	\$0	\$0	Labs	\$0, 40% OON	\$0, 40% OON	\$0	Labs	\$0	\$0	\$0	\$0	Labs	\$0, 40% OON	\$0	\$0	Labs	\$0, 40% OON	\$0	\$0	\$0	Labs	\$0, 40% OON	\$0	\$0, 40% OON	\$0	Labs	\$0, 40% OON	\$0	\$0, 40% OON	\$0					
OTC	None	None	None	None	OTC	None	None	None	OTC	\$45 per quarter	\$40 per quarter		\$40 per quarter	OTC	None	\$52.50 per quarter		OTC	None	\$40 per quarter			OTC	None	\$40 per quarter	None	\$40 per quarter	OTC	None	\$40 per quarter	None	\$40 per quarter					
Flex Card	\$1,000 Dental, Vision, Hearing INN or OON	\$2,500 Dental, Vision, Hearing INN or OON	None	\$2,000 Medical, Dental, Vision, Hearing INN or OON	Flex Card	\$2,000 Dental, Vision, Hearing INN or OON	\$3,500 Medical, Dental, Vision, Hearing INN or OON	None	Flex Card	\$250 Dental, Vision, Hearing INN or OON	\$240 Dental, Vision, Hearing INN or OON	None	\$1,000 Medical, Dental, Vision, Hearing INN or OON	Flex Card	\$1,420 Medical, Dental, Vision, Hearing INN or OON (Medical Copays)	\$650 Dental, Vision, Hearing		Flex Card	\$1,000 Medical, Dental, Vision, Hearing INN or OON	\$750 Medical, Dental, Vision, Hearing INN or OON			Flex Card	\$1,000 Medical, Dental, Vision, Hearing INN or OON	\$750 Medical, Dental, Vision, Hearing INN or OON	\$1,000 Medical, Dental, Vision, Hearing INN or OON	\$750 Medical, Dental, Vision, Hearing INN or OON										
Medical Copays on Flex	N	N	N	Y	Medical Copays on Flex	N	Y	N	Medical Copays on Flex	N	N	N	Y	Medical Copays on Flex	Y	N		Medical Copays on Flex	Y	Y			Medical Copays on Flex	Y	Y	Y	Y										
Preventive Dental	Flex Card	Flex Card	None	Flex Card	Preventive Dental	Flex Card	Flex Card	None	Preventive Dental	2 per year DQ	2 per year DQ	2 per year DQ	2 per year DQ	Preventive Dental	Flex Card	2 per year DQ		Preventive Dental	Flex Card	2 per year DQ			Preventive Dental	Flex Card	2 per year DQ	Flex Card	2 per year DQ										
Comprehensive Dental	Flex Card	Flex Card	None	Flex Card	Comprehensive Dental	Flex Card	Flex Card	None	Comprehensive Dental	Flex Card	Flex Card	"Implants & Devices NOT covered"	Flex Card	Comprehensive Dental	Flex Card	Flex Card		Comprehensive Dental	Flex Card	Flex Card			Comprehensive Dental	Flex Card	Flex Card	Flex Card	Flex Card										
Vision	\$200 allowance INN or OON	\$200 allowance INN or OON	None	\$200 allowance	Vision	\$200 allowance INN or OON	\$200 allowance INN or OON	None	Vision	\$200 allowance	\$200 allowance	\$200 allowance	\$200 allowance	Vision	\$200 allowance INN or OON	\$200 allowance		Vision	\$200 allowance INN or OON	\$200 allowance			Vision	\$200 allowance INN or OON	\$200	\$200 allowance INN or OON	\$200										
Hearing Aid	\$1,000 every 2 years	\$1,000 every 2 years	\$1,000 every 2 years	\$1,000 every 2 years	Hearing Aid	\$1,000 every 2 years	\$1,000 every 2 years	\$1,000 every 2 years	Hearing Aid	\$1,000 every 2 years	\$1,000 every 2 years	\$1,000 every 2 years	\$1,000 every 2 years	Hearing Aid	\$1,000 every 2 years	\$1,000 every 2 years		Hearing Aid	\$1,000 every 2 years	\$2,000 every year			Hearing Aid	\$1,000 every year	\$2,000 every year	\$1,000 every year	\$2,000 every year										
Oura Ring	None	Oura Ring	None	None	Oura Ring	None	Oura Ring	None	Oura Ring	None	None	None	None	Oura Ring	SilverSnakers	SilverSnakers		Oura Ring	Oura Ring	None			Oura Ring	Oura Ring	None	Oura Ring	None										
Fitness Referral	SilverSnakers	SilverSnakers	SilverSnakers	SilverSnakers	Fitness Referral	SilverSnakers	SilverSnakers	SilverSnakers	Fitness Referral	None	Y	Y	Y	Fitness Referral	Oura Ring	None	Y	Fitness Referral	SilverSnakers	SilverSnakers			Fitness Referral	SilverSnakers	SilverSnakers	SilverSnakers	SilverSnakers										
Part D	Preferred Pharmacy Pricing				Part D	Preferred Pharmacy Pricing				Part D	Preferred Pharmacy Pricing				Part D	Preferred Pharmacy Pricing				Part D	Preferred Pharmacy Pricing																
Deductible	\$295 Tiers 3-5	None	\$590 Tier 3-5	None	Deductible	\$295 Tiers 3-5	None	\$590 Tiers 3-5	Deductible	None	None	\$295 Tier 3-5	\$295 Tiers 3-5	Deductible	\$295 Tiers 3-5	\$295 Tiers 3-5		Deductible	\$295 Tiers 3-5	\$295 Tiers 3-5			Deductible	None	\$295 Tier 3-5	None	\$295 Tier 3-5										
Tier 1	\$0	\$0	\$0	\$0	Tier 1	\$0	\$0	\$0	Tier 1	\$0	\$0	\$0	\$0	Tier 1	\$0	\$0	\$0	Tier 1	\$0	\$0	\$0	\$0	Tier 1	\$0	\$0	\$0	\$0										
Tier 2	\$3	\$3	\$3	\$3	Tier 2	\$3	\$3	\$3	Tier 2	\$3	\$3	\$3	\$3	Tier 2	\$3	\$3	\$3	Tier 2	\$3	\$3	\$3	\$3	Tier 2	\$3	\$3	\$3	\$3										
Tier 3	\$47	\$47	\$47	\$45	Tier 3	\$47	\$47	\$47	Tier 3	\$42	\$42	\$42	\$45	Tier 3	\$47	\$45	\$45	Tier 3	\$47	\$45	\$45	\$45	Tier 3	\$47	\$45	\$45	\$45										
Tier 4	\$100	\$95	\$66	\$95	Tier 4	\$100	\$95	\$66	Tier 4	\$75	\$95	\$75	\$75	Tier 4	\$46	\$85	\$85	Tier 4	\$46	\$85	\$85	\$85	Tier 4	\$46	\$85	\$85	\$85										
Tier 5	29%	33%	25%	33%	Tier 5	29%	33%	25%	Tier 5	33%	33%	29%	29%	Tier 5	29%	29%	29%	Tier 5	29%	29%	29%	29%	Tier 5	33%	29%	33%	29%										
Tier 6	None	None	None	\$0	Tier 6	None	None	None	Tier 6	\$0	\$0	\$0	\$0	Tier 6	None	\$0	\$0	Tier 6	None	\$0	\$0	\$0	Tier 6	None	None	None	None										
Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Yes	Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Yes	Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Yes	Non-Part D drugs (Tier 2)	Yes	Yes	Yes	Yes										