

My employees want a plan with predictable costs. I need a plan that saves me money.

BUSINESS BLUE HIGH DEDUCTIBLE HEALTH PLAN

This is our plan.

Business BlueSM High Deductible Health Plan (HDHP)

PLAN FEATURES ■ Just choose the deductible, benefit and out-of-pocket level you want, and we'll take care of the rest.

- Ten plan designs to choose from with four deductible levels
- Three benefit levels and seven out-of-pocket maximum options
- Prescription drug coverage standard
- Maternity coverage standard
- Unlimited lifetime benefit maximum
- Access to the largest preferred provider network in South Carolina

PLAN OPTIONS ■ Want to add extra benefits to your plan? Enhance your plan with additional options.

- Health Savings Accounts
- MyBlueDentalSM
- Life insurance with \$10,000 standard, higher amounts available, as well as dependent life, short-term and long-term disability
- Spinal subluxation (chiropractic) coverage
- Dual options available



South Carolina

These are the details.

You need health care coverage that allows you to control your costs and puts your employees in charge of their health care spending. Business Blue High Deductible Health Plans help you keep costs down, while providing your employees great benefits and options to make their health care dollars go further.

BlueCross BlueShield of South Carolina has been a trusted name in health care coverage for more than 60 years and carries the assurance of an A.M. Best A+ (Superior) rating.* Our flexible plan designs, outstanding network value and commitment to member service make Business Blue HDHP the right choice for your business.

Multiple choices available

Core benefits

Additional coverage options

Choose my plan

Select one plan from the list of options below.

	Deductible		Benefit Percentages	Out-of-Pocket	
	Single In-Network/ Out-of-Network	Family In-Network/ Out-of-Network	In-Network/ Out-of-Network	Single In-Network/ Out-of-Network	Family In-Network/ Out-of-Network
<input type="checkbox"/> HD 1	\$1,500/\$1,500	\$3,000/\$3,000	100/60	\$1,500/\$3,000	\$3,000/\$6,000
<input type="checkbox"/> HD 2	\$1,500/\$1,500	\$3,000/\$3,000	80/60	\$3,000/\$4,500	\$6,000/\$9,000
<input type="checkbox"/> HD 3	\$1,500/\$1,500	\$3,000/\$3,000	70/50	\$3,000/\$4,500	\$6,000/\$9,000
<input type="checkbox"/> HD 4	\$2,600/\$2,600	\$5,200/\$5,200	100/60	\$2,600/\$5,200	\$5,200/\$10,400
<input type="checkbox"/> HD 5	\$2,600/\$2,600	\$5,200/\$5,200	80/60	\$5,200/\$7,800	\$10,400/\$15,600
<input type="checkbox"/> HD 6	\$2,600/\$2,600	\$5,200/\$5,200	70/50	\$5,200/\$7,800	\$10,400/\$15,600
<input type="checkbox"/> HD 7	\$3,500/\$3,500	\$7,000/\$7,000	100/60	\$3,500/\$5,500	\$7,000/\$11,000
<input type="checkbox"/> HD 8	\$3,500/\$3,500	\$7,000/\$7,000	80/60	\$5,500/\$7,500	\$11,000/\$15,000
<input type="checkbox"/> HD 9	\$3,500/\$3,500	\$7,000/\$7,000	70/50	\$5,500/\$7,500	\$11,000/\$15,000
<input type="checkbox"/> HD 10	\$5,000/\$5,000	\$10,000/\$10,000	100/60	\$5,000/\$10,000	\$10,000/\$20,000

* A.M. Best Company rating December 2009. For the latest rating, visit www.ambest.com.

Physician Services

After the member meets the deductible, we pay the applicable benefit percentage for covered physician services. Covered services include:

- Daily medical visits and consultations in a hospital or facility
 - Medical, lab work, X-rays and other diagnostic services at a hospital outpatient department, clinic or doctor's office
 - Surgery
 - Second surgical opinions
 - All other covered physician services
-

Preventive Services

We cover a wide variety of preventive screenings as recommended by the United States Preventive Services Task Force to help promote better health and monitoring, to improve early detection. Screenings vary based on member age, sex and family history. Your doctor will recommend appropriate screenings.

Some common screenings are:

- Breast, uterine and cervical cancer, and associated conditions
- PSA test for prostate cancer
- Colorectal screenings
- High blood pressure
- Heart disease
- Osteoporosis
- Depression
- Recommendations for iron, folic acid and other vitamins

We also cover child immunizations recommended by the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics. Other vaccinations recommended for people at risk of certain diseases are covered at 100 percent.

All approved preventive services are paid at 100 percent and must be obtained from an in-network provider.

Drug Coverage

Blue RxSM Express — Before meeting the deductible, the member obtains prescription drugs at the BlueCross discounted rate when he or she fills prescriptions at a pharmacy. After the member meets his or her deductible, we pay the applicable benefit percentage on allowable prescription drug charges. Mail-order coverage is also available to obtain up to a 90-day supply.

Outpatient Hospital Services

After the member meets the benefit period deductible, we pay allowable charges for covered outpatient hospital services at the plan's in- or out-of-network benefit percentages. Covered services include:

- Hospital, ambulatory surgical center or clinic charges
- Medical and surgical services
- Preadmission testing, lab work, X-rays and other diagnostic services
- All other covered outpatient services

Inpatient Hospital Services

After meeting the deductible, we pay for services at the benefit percentage for allowable charges. Covered services include:

- Semi-private room and board, or special care unit
- All other covered hospital services, including surgical services and anesthesia
- Inpatient rehabilitation

We require a preadmission review, emergency admission review and continued stay review for medically necessary treatment for all hospital admissions.

Maternity

Allowable charges, subject to the member's deductible and coinsurance, for the member or a covered spouse. Includes maternity services, surgery, anesthesia, lab work and X-rays in a hospital or at a hospital outpatient department, ambulatory surgical center, clinic or doctor's office.

Newborn Care

Newborn preventive screenings are covered at 100 percent of the allowable charge. All other allowable charges are covered, subject to the member's deductible and coinsurance, including the initial pediatric exam in the hospital by the doctor. Routine nursery charges are billed by the hospital upon the birth of the baby.

Newborn must be added to coverage within 31 days and applicable premium paid.

Transplant Services

Allowable charges for covered services for human organ and tissue transplants, subject to transplant annual maximums; services must be pre-authorized. Subject to member's deductible and coinsurance.

Lifetime Benefit Maximum

Unlimited

Durable Medical Equipment (DME)

We pay allowable charges subject to the member's deductible and coinsurance. Members must obtain pre-authorization for any benefit of \$500 or more. Includes ostomy supplies and orthotics.

Physical Therapy

We pay allowable charges, subject to the member's deductible and coinsurance.

Skilled Nursing Facility

We pay allowable charges subject to the member's deductible and coinsurance. Admission must be within 14 days of release from hospital stay. Preapproval is required.

Home Health and Hospice

We pay allowable charges subject to the member's deductible and coinsurance. Must receive preapproval.

Mental Health and Substance Abuse Services

We pay allowable charges up to the annual limit per member, per benefit period, for combined inpatient and outpatient facilities, and physician services. All benefits are subject to the member's deductible and coinsurance.

Companies with 51 or more employees will automatically receive enhanced benefits. These conditions will be covered at the same benefit level as medical conditions when your employees use in-network providers. Deductibles and coinsurance still apply.

This is how I can manage my health care expenses.

Health Saving Accounts

Adding a health savings account (HSA) to your Business Blue High Deductible Health Plan allows your employees to take control of their health care dollars. You, your employees or both can contribute to these accounts, which offer significant tax savings.

Use these tax-advantaged dollars to pay for eligible medical expenses. Members also can use the HSA funds to pay deductibles, coinsurance amounts and other medical expenses that their plan may not cover. Unused dollars roll over at the end of the year.

Ask how BlueCross can make adding the HSA option easy.

Here are the options.

MyBlueDental

Pays 100 percent of allowable charges on preventive care (Class I), 80 percent of allowable charges on restorative care (Class II) and 50 percent on major restorative care (Class III). Class II and Class III benefits are subject to a \$50 deductible per member, per benefit period (limited to three family members).

Standard Option

Pays maximum of \$1,000 per member per benefit period

High Option

Pays maximum of \$2,000 per member per benefit period

For groups of two to six, 100 percent of those enrolled in health coverage must enroll in dental coverage (if selected by the group) and an employee's dental coverage must match health coverage (if employee elects single health coverage, dental selection must also be single).

Optional Orthodontic — Pays 50 percent of allowable charges for employees through age 18 or covered dependents through age 18. Available only to groups of 13 or more enrolled employees. Standard option orthodontic care pays \$500 lifetime maximum per member. High option pays \$1,000 lifetime maximum per member for orthodontic care.

Companion Life Insurance Coverage

\$10,000 is standard on all health insurance contracts, with higher amounts available. You can also choose to offer your employees more options, with dependent life, short-term and long-term disability.

Companion Life is a separate life insurance company that does not provide BlueCross BlueShield of South Carolina products. Companion Life is solely responsible for its product offerings.

Spinal Subluxation (Chiropractic)

We will pay up to \$500 in allowable charges per member, per benefit period, after the member meets his or her deductible and pays the applicable coinsurance.

Dual Option

If you have seven or more employees participating in the health plan, you can offer your employees additional choices. You can pair your Business Blue High Deductible Health Plan with one of our other Business BlueSM plans for maximum flexibility. Choose from:

Business BlueSM Complete

Business BlueSM Secure

When you choose a dual option including Business Blue Complete, the \$250 and \$500 deductible choices and the 90/70 benefit level are not available.

Plus...

My Health Toolkit

Our members enjoy the convenience of 24-hour access to information on benefits, claims and personal health information by using My Health Toolkit,[®] located at SouthCarolinaBlues.com.

My Health Toolkit also features a physician finder, hospital comparison tool, treatment and drug cost estimators, and access to a health library. Members can also manage their health reimbursement accounts, flexible spending accounts or health savings accounts.

Out-of-Area Coverage

The BlueCard[®] and BlueCard Worldwide[®] give members access to participating doctors and hospitals across the country and around the world. You have peace of mind knowing you're covered if you get sick or injured while traveling outside of South Carolina.

It's as easy as showing your BlueCross ID card to a participating provider. We pay benefits at the same BlueCross rate members receive at home.

Exclusions for Business Blue High Deductible Health Plan

- Before a member's policy is in effect or after he or she is no longer covered.
- Services which are not medically necessary.
- When a member does not obtain preapproval for hospital or nursing facility charges, room and board charges will not be paid.
- When the member is entitled to payment from other sources, or is not legally obligated to pay for the services.
- Any service or supply provided by the patient or a member of the patient's family.
- Services or treatment for complications resulting from any excluded procedure or condition.
- Dental services or spinal subluxation unless the employer chooses to cover these expenses.
- Prescription drugs are covered only to the extent outlined in the contract.
- Human organ and tissue transplants — only as listed in the contract. Preapproval is required.
- Investigational and experimental services.
- Cosmetic surgery, or surgery or treatment for the purpose of weight reduction.
- Sanitarium care or rest cures, long-term residential psychiatric care, custodial care and nursing homes.
- Eyeglasses, contact lenses (except after cataract surgery), hearing aids or refractive care, including related examination, hospital or physician charges.
- Occupational, visual or speech therapy, or private duty nursing.
- Evaluation, diagnosis or counseling for learning and behavioral disabilities; mental retardation; vocational rehabilitation; or relationship dysfunctions.
- Premarital or pre-employment physical examinations.
- Treatment for injuries resulting from intoxication over the legal limit as specified by state law or resulting from the influence of any narcotic or drug, unless taken on the advice of a physician.

This is a list of some of our exclusions. For a full list of excluded services and supplies, or for all limitations, please refer to the contract or your booklet.

Money Saving Network

Our statewide network includes more than 9,000 doctors, more than 4,000 other providers and all of South Carolina's acute care hospitals. The combination of access and discount value is unbeatable. Members also have access to every Blue Cross and Blue Shield plan's provider network in the country. Finding a doctor or hospital in our network is simple and saves money.

Discount and Value-Added Programs

We are always looking for ways to make your health care dollars go further. Our members enjoy discounts on non-covered services such as fitness and weight loss programs, cosmetic surgery, vision correction, healthy reading materials and much more.

Learn more about our discount and value-added programs at SouthCarolinaBlues.com.

BluesEnrollSM

BluesEnroll makes group maintenance easy with 24/7 access to our online benefit administration and enrollment solution. Add new employees, delete members or change member information with the click of a mouse. Your changes are sent to us instantly, saving you time and money.

If you have a question or need help, contact your local BlueCross BlueShield of South Carolina agent, call us at 800-500-5281 or visit us online at SouthCarolinaBlues.com.