SUMMARY OF MEDICAL BENEFITS WITH
BLUE CROSS BLUE SHIELD
Effective 1/1/15

1. Deductible
   $950 individual coverage
   $1,900 maximum per family per covered year

2. Co-Insurance
   80/20% in-network
   60/40% Out-of-network

4. Maximum
   Out-of-pocket
   Expense
   $3,450 individual ($950 deductible + $2,500 Coinsurance max)

5. Office Visit
   Co-Pay
   $35 for each office visit
   In-network General Practitioner, Pediatrician, or
   Family Practitioner (Specialist are subject to deductible)

6. Drug Co-payment
   $15/$45/$65 - $15 for generic drugs, $45 for brand name,
   And $65 for non-preferred brand name
   Oral contraceptives are covered.

7. Mail Order
   $15/$45/$65 for maintenance drugs
   A 90 day supply is available for one co-pay through mail order only.
   Oral contraceptives are covered.

8. Emergency
   In case of an emergency, the 80% coverage is extended to
   any hospital or doctor if treated within the first 48 hours and the
   deductible is waived for that incident

9. Wellness
   Benefit pays 100% for routine physical exams, gynecological exams
   and preventive child care

Please visit the Arkansas Blue Cross Blue Shield website at www.arkbluecross.com for verification of
network status for doctors, hospitals, pharmacies, and dentists and additional information regarding your
True Blue PPO network.

Arkansas Tech University's health insurance plan through Arkansas Blue Cross Blue Shield is a
grandfathered plan under the Patient Protection and Affordable Care Act. As permitted by the Act, a
grandfathered health plan can preserve certain basic health coverage that was already in effect when the
law was enacted.