

DirectBlue and PPOBlue. Different by design.

DirectBlue smoothes all the rough patches.

DirectBlue was designed for the person who wants the choices of a traditional health care plan with the ability to plan around a budget. DirectBlue helps you control health care costs — simply and easily. DirectBlue costs a little more per month, but you protect yourself from high out-of-pocket expenses.

PPOBlue provides coverage at a low monthly cost.

You need health care coverage, but many plans have monthly premiums that are just too high. With PPOBlue, you get the significant protection you need against serious illnesses, accidents and other high-dollar medical expenses — all at an affordable monthly premium.

PPOBlue was designed to give you more control over your health care spending. You can choose a lower premium with a higher deductible, or pay a little more each month and lower your deductible. PPOBlue works hand-in-hand with a tax-advantaged Health Savings Account (HSA). For more details about HSAs, see page 16.

Choosing the right deductible.

Every person and every family is different. Your health care needs are unique. And so is your budget. Both DirectBlue and PPOBlue offer a choice of individual and family deductibles.

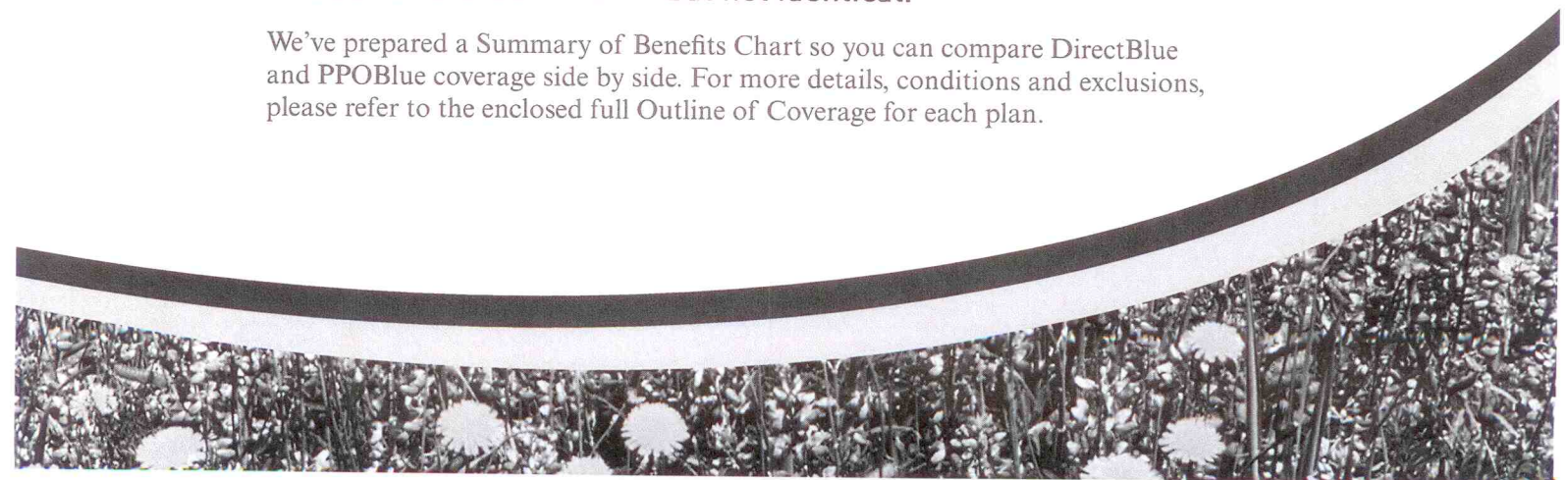
Most preventive care is covered immediately, so you don't have to think about your deductible. That means if you see your doctor only for routine preventive care, a higher deductible PPOBlue plan may make sense for you.

DirectBlue and PPOBlue give you a range of deductibles to choose from. Having options to match your deductibles to your needs is very important to make sure your coverage fits your budget. Of course, you need to be sure you can afford the deductible should something happen and you need extensive treatment or hospitalization.

If you would prefer to pay a little more each month for the peace of mind of knowing your out-of-pocket costs will be low if you get sick, then selecting a lower deductible may be a smarter move for you. And both plans protect you from the expenses of a serious illness or injury by limiting the amount of your out-of-pocket expenses each year.

The benefits are similar — but not identical.

We've prepared a Summary of Benefits Chart so you can compare DirectBlue and PPOBlue coverage side by side. For more details, conditions and exclusions, please refer to the enclosed full Outline of Coverage for each plan.



Coverage highlights and a side-by-side comparison.

PPOBlue

Description of Service	Network		Out-of-network	
	PPOBlue pays	You pay ¹	PPOBlue pays	You pay ¹
Lifetime benefits	Up to \$5,000,000		Up to \$300,000	
Office visits	90%	10%	70%	30%
Diagnostic services	90%	10%	70%	30%
Ambulance service	90%	10%	70%	30%
Emergency care	90%	10%	90%	10%
Inpatient hospital services	90%	10%	70% (Limited to 90 days per benefit period)	30% (100% after 90-day covered period)
Inpatient and outpatient surgery and medical services	90%	10%	70%	30%
Prescription drugs	90% (\$50,000 calendar year maximum)	10%	Not covered	100%
Maternity services	90%	10%	70%	30%
Therapy and rehabilitation services ³	90%	10%	70%	30%
Spinal manipulations 10 visits per contract year combined in and out-of-network	90%	10%	70%	30%
Allergy extracts/injections	90%	10%	70%	30%
Preventive care Annual deductible does not apply to services listed below				
Routine annual physical exam	90%	10%	Not covered	100%
Routine annual gynecological exam and Pap smear	90%	10%	Not covered	100%
Immunizations Adult and pediatric	90%	10%	Not covered	100%
Mammographic screenings	90%	10%	Not covered	100%
Routine eye exams every 24 months	Not covered	100%	Not covered	100%
Individual (1 member per agreement)				
Deductible—individual		Choice of: \$1,200; \$2,600; \$3,500		Choice of network deductible includes out-of-network benefits
Out-of-pocket maximum—individual		\$1,000; \$1,200; \$1,500		\$2,000; \$2,400; \$3,000
Family (2 or more family members per agreement)				
Deductible—family ⁶		Choice of: \$2,400; \$5,200; \$7,000		Choice of network deductible includes out-of-network benefits
Out-of-pocket maximum—family		\$2,000; \$2,400; \$3,000		\$4,000; \$4,800; \$6,000

Please see back cover for Important Benefit Details.

DirectBlue

Description of Service	Network		Out-of-network	
	DirectBlue pays	You pay ²	DirectBlue pays	You pay ²
Lifetime benefits	Up to \$5,000,000		Up to \$300,000	
Office visits	90%	10%	70%	30%
Diagnostic services	90%	10%	70%	30%
Ambulance service	90%	10%	70%	30%
Emergency care ⁴	90%	10%	90%	10%
Inpatient hospital services	90%	10%	70% (Limited to 90 days per benefit period)	30% (100% after 90-day covered period)
Inpatient and outpatient surgery and medical services	90%	10%	70%	30%
Prescription drugs	100% except copayment, after \$100 annual deductible (\$50,000 calendar year maximum)	\$10/generic \$20/brand-name (In addition to annual deductible)	Not covered	100%
Maternity services	90%	10%	70%	30%
Therapy and rehabilitation services ⁵	90%	10%	70%	30%
Spinal manipulations 10 visits per calendar year	90%	10%	70%	30%
Allergy extracts/injections	90%	10%	70%	30%
Preventive care Annual deductible does not apply to services listed below				
Routine annual physical exam	90%	10%	Not covered	100%
Routine annual gynecological exam and Pap smear	90%	10%	Not covered	100%
Immunizations Adult and pediatric	90%	10%	Not covered	100%
Mammographic screenings	90%	10%	Not covered	100%
Routine eye exams every 24 months Service must be provided by a participating vision provider.	100%	0%	Not covered	100%
Deductible—individual/family ⁷		Choice of: \$0 \$250/\$750 \$500/\$1,500		\$500
Out-of-pocket maximum—individual/family		\$1,500/\$4,500		\$1,500/\$4,500

Please see back cover for Important Benefit Details.