

SimplyBlue Plus Hybrid Plan



With the advantage of moderate premiums, this plan offers a blend of predictability and cost savings through a mix of deductibles and fixed copays. So you'll get the confidence of a comprehensive plan with more freedom than you might expect.



What's covered in full?

Here are some commonly used preventive care services* that are covered in full:

- Adult annual physical examinations
- Adult immunizations
- Bone mineral density measurements or testing
- Family planning and reproductive health services
- Mammograms
- Well-baby and well-child care
- Well-woman examinations



Deductibles and your plan

Your plan includes a deductible.

Hybrid plans combine a deductible and copays, which means some benefits are subject to the deductible which means you will pay a negotiated, allowed amount before the copay/coinsurance kicks in. For Hybrid Non-Standard C plans, the deductible only applies to inpatient and outpatient surgical services. For Hybrid Standard and Non-Standard A plans, all medical services are subject to the deductible (including diabetic drugs and supplies). For Hybrid Non-Standard F plans, the deductible applies to inpatient, outpatient surgical services as well as emergency room and ambulance services. Prescription drugs are never subject to a deductible on Hybrid plans. Once you meet your deductible, you will pay a copay for some medical services and coinsurance for others.



Prescription drugs and your plan

You can get a prescription filled at the copay or coinsurance level on the first day your coverage begins.

Hybrid Standard: Standard Gold, Standard Silver
Hybrid Non-Standard A: Gold 14, Silver 6

Hybrid Non-Standard C: Platinum 4, Gold 17, 19
Hybrid Non-Standard F: Silver 18



Member benefits

NEW! Deductible removed for Telemedicine

Our partnership with MD Live virtual care and Vori Health gives you convenient access to urgent care, behavioral health, physical therapy and dermatology, 24/7/365 from the comfort of your home — visits are now provided to members before deductible at low to no cost.

NEW! Sempre Health

A smarter way for group plans to boost adherence and reduce costs for members managing chronic conditions. Sempre Health is an SMS-based program that helps eligible members save on prescriptions while improving medication adherence.

Enrollment is easy. Once signed up, members unlock copay discounts at their regular pharmacy by refilling their medications on time. With text reminders and increasing incentives, members are rewarded for staying adherent and keeping their refills on schedule.

NEW! Pharmacy Concierge

A high-touch program designed to control costs by optimizing medication use. Pharmacy Concierge leverages a dedicated, in-house team of pharmacists who proactively review pharmacy claims to identify savings opportunities across the population.

This team works directly with prescribing physicians to recommend lower-cost, clinically appropriate alternatives — ensuring members receive effective treatment at the best possible value.

Our comprehensive approach delivers measurable savings. The Pharmacy Concierge team evaluates a wide range of optimization opportunities, including:

- Channel optimization
- Dose efficiency
- Multi-source brands
- Dosage form optimization
- High-cost generics
- Specialty medications

New! Updating our preventive drug list for smarter, more sustainable coverage:

Effective January 1, 2027, Excellus BCBS will update the preventive drug list to better align coverage on high value, clinically appropriate preventive medications. As part of this update, select non preferred drugs, multi source brands, and high cost generics will no longer be included on the preventive drug list. These changes are designed to support more sustainable pharmacy costs while maintaining access to effective preventive care. This policy change applies to all groups regardless of renewal date.

New! Woman and family health support through Ovia Health

Ovia Health by Labcorp is a comprehensive solution that supports women and families through every stage of life — from fertility and pregnancy to postpartum, parenting, and menopause. With personalized guidance, digital tools and 1:1 access to specialists and/or licensed health care professionals, Ovia Health connects members to the care and support they need for better health outcomes and greater confidence throughout their journey. Ovia Health is embedded in all Small Group plans.

Bright Beginnings

Access to maternity support, through our Care Management team, while navigating the health care system, with a focus on early intervention, prenatal education and personalized support during and after pregnancy.

Blue365®

Exclusive discounts on health-related products and services such as fitness gear, exercise programs, weight-loss programs and more.

Building healthy habits with ThriveWellSM

A digital homebase dedicated to engaging teams in health and wellbeing. Our partnership with Personify Health gives employees the tools to make small everyday changes to their wellbeing that are focused on the area they want to improve the most. They'll build healthy habits, have fun with friends and experience the lifelong rewards of better health and wellbeing.

ThriveWell is embedded in all plans, offering rewards of up to \$200 per subscriber and \$200 per spouse, or domestic partner, for a total rewards payout of up to \$400 per plan year.

Connect with a personalized Care Manager with Wellframe[®]

A convenient way for our Care Managers to provide confidential, proactive, one-on-one, text-based outreach to members using a smartphone or tablet.

Our network

Access to more top-quality doctors, hospitals and pharmacies — locally and nationwide.

Pharmacy home delivery

Save time and money by having your prescriptions delivered to your home.

BlueCard[®]

Access to care when you travel in the United States and its territories, Canada and Mexico.

Welvie[®] My SurgerySM

To inform, empower, and give employees and their covered family members what they need to make the best surgery decisions possible.



Other things to know about your plan

1

How does the money I pay toward my deductible add up (or aggregate)?

Each person only has to pay their own deductible. Once you reach your deductible, your insurance begins paying towards your claims.

2

How much will I pay out-of-pocket for this plan? And how does it add up (or aggregate)?

- To help limit your out-of-pocket costs, all of our plans have a maximum amount that any one person will pay. This is called an out-of-pocket maximum.
- This amount varies, depending on which plan you have. Log into ExcellusBCBS.com/Member to view your benefits and see your coverage amount.
- Each person will only have to pay their own out-of-pocket maximum amount. Once that amount is reached, care is covered in full.

3

What kind of funding accounts work with this plan?

This plan qualifies for a Flexible Spending Account (FSA) or Health Reimbursement Account (HRA).

Preventive Care Covered at 100% before deductible: Eligible in-network preventive services, including recommended screenings, immunizations, annual wellness visits, and preventive counseling, are covered at no cost when provided in accordance with ACA preventive care guidelines.



Important terms

Coinsurance

Coinsurance is similar to a copay, but instead of a fixed-dollar amount, you pay a percentage of the negotiated, allowed amount. For example: You need crutches, and your bill is \$100. If your coinsurance is 15%, that means you pay \$15, and the insurance company pays the remaining \$85.

Copays

A fixed amount you pay each time you use a medical service, like a doctor's visit. For example: If your plan's coverage includes a \$20 copay for a Primary Care Provider (PCP), you pay \$20 for each visit to your PCP, and the insurance company pays for the rest.

Deductible

An amount of money you have to pay before the health insurance company will make any payment toward your health care services. For example: If you have a \$3,000 deductible, you pay 100% of the negotiated, allowed amount of your first \$3,000 in medical bills.

After you reach your deductible amount, you may pay a portion of your health care costs, and your health insurance company will pay the rest.

Out-of-pocket maximum

An annual limit on the amount of money that you pay for health care services, not including your monthly premiums.

Unmatched access to the doctors you know

Excellus BlueCross BlueShield gives you access to one of the largest provider networks in the nation. Through the BlueCard® program, you can find participating providers all across America. To see whether your doctor is in the Excellus BCBS network, go to ExcellusBCBS.com/FindProvider.

Healthy every day

When you have questions about your health, we have answers at **ExcellusBCBS.com**. You can check symptoms. Research conditions. Contact a registered nurse or pharmacist. Your membership even gives you exclusive access to discounts and savings from local and national wellness brands to keep you healthy.



To learn more about your benefits and register your account, visit ExcellusBCBS.com/Member



- View your benefits
- Check your claims
- Check referrals and authorizations
- Download the Excellus BCBS app for 24/7 access to telemedicine and information regarding your health plan including your deductible status