



Due to recent federal legislation, Vermont small businesses may have more affordable plan choices for 2019 through Association Health Plans. This means, you may have more options to improve the health and wellness of your employees, connect them to essential health benefits and save money.

Curious about Association Health Plans?

Association Health Plans (AHP) work by allowing small businesses, including self-employed workers, to band together by geography or industry as if they are one single entity thereby creating a larger risk pool, lower costs and greater security.

Contact Information

For more information about health plans call your local chamber of commerce, your broker or us!

VACE health plans are administered by:
 The Vermont Association of Chamber of Commerce Executives
 P.O. Box 810
 Montpelier, VT 05601
 (802) 229-2231
 Email: vacehealth@vtchamber.com
www.VACEinsurance.com



The Value of Blue

As a BCBSVT member, you and your employees have access to:


BlueCard, the nation's most comprehensive provider network

Receive care within the largest network of health care providers within Vermont and the U.S. with over 96 percent of hospitals and 91 percent of providers, as well as BlueCard, the most comprehensive national network of the Blue Cross and Blue Shield Association of health plans. This includes access to care in all 50 states and in 200 countries worldwide, 24/7, 365 days a year. The BlueCard Worldwide program ensures access to doctors and hospitals in more than 200 countries and territories.

Best-in-class member experience

Our award-winning member service always puts the member first and is guided by principles such as offering a single point of contact for all questions and resolving issues on the first call and is only a click, call or email away.

Blue Cross and Blue Shield of Vermont (BCBSVT) does not discriminate on the basis of race, color, national origin, age, disability, gender identity or sex.

 **For free language-assistance services, call (800) 247-2583.**

Pour obtenir des services d'assistance linguistique gratuits, appelez le (800) 247-2583.

Para servicios gratuitos de asistencia con el idioma, llame al (800) 247-2583.

Pharmacy programs to help you keep your costs down

Your employees will have access to our National Preferred Formulary (NPF), which is designed to provide effective medications at a fair price as well as Accredo, our speciality pharmacy provider. Through Accredo, members who need speciality medications have access to speciality-trained pharmacists and avoid higher paying higher costs for their medications through direct delivery.

Integrated health programs

Our caring staff ensures you find the right care at the right time for your diagnosis, regardless of your age, sex or gender identity. Our team has cross-disciplinary medical, mental health and substance abuse treatment expertise—we look at the physical manifestations of disease, any emotional effects and other possible co-occurring conditions. In a sense, we look at the “whole you.” Then, we build an individualized plan that helps you navigate your health care options.

Online tools and resources to help you take charge of your health and wellness

- Member Resource Center
 - Check the status of a claim
 - Print a temporary proof of coverage or order a new ID card
 - Find a doctor
 - View your Summary of Health Plan Payments and other contract documents to better understand your health care benefits
- Pharmacy Resource Center
 - Compare the cost of a medication between pharmacies or home delivery
 - Find a pharmacy near you or across the county
 - Refill Home Delivery prescriptions online and check the status of orders
 - View pharmacy benefit information
- My Blue Health Wellness Center—our online wellness center provides interactive tools and resources, such as food and exercise trackers, to help you take charge of your health. A mobile app makes it convenient to track your health and wellness goals from the palm of your hand.

(800) 255-4550 | consumersupport@bcbstv.com | www.bcbstv.com



An Independent Licensee of the Blue Cross and Blue Shield Association.

VACEplus

2019
plans and premiums

	PLAN BENEFITS		MEDICAL							PHARMACY				MONTHLY PREMIUMS				
	Financial accounts		Individual plan deductible		Individual plan out-of-pocket maximum	Medical cost-sharing				Individual prescription deductible	Individual prescription out-of-pocket maximum	Prescription drugs cost-sharing		single	two person	adult and child or children	family	
	Health Savings Account (HSA)	Health Reimbursement Arrangement (HRA) (available only through an employer)	deductible is doubled for 2-person and family policies	deductible type (see below right for definitions)	out-of-pocket maximum is doubled for 2-person and family policies	preventive care: visit www.bcbsvt.com/preventive for the full list of preventive services covered at \$0	primary care provider or mental health visits	specialist visits	emergency room	inpatient	deductible is doubled and aggregate for 2-person and family policies when combined with medical	out-of-pocket maximum is doubled for 2-person and family policies	select wellness drugs (generic/preferred/non-preferred brands)					prescription drugs (generic/preferred/non-preferred brands)
Option #1: VACE Advantage 100% H.S.A.	●	●	\$3,000	Stacked	\$3,000	\$0	Deductible, then no cost				Combined with medical	\$1,350	\$10 co-payment for generic only	Deductible, then no cost	\$596.00	\$1,169.00	n/a	\$1,666.00
Option #2: VACE Advantage Co-Pay		●	\$3,000	Stacked	\$7,900	\$0	\$30 co-payment per visit	\$50 co-payment per visit	Deductible, then \$500 co-payment per visit	Deductible, then \$500 per day	Co-payments only	\$1,350	same as any other	\$10/\$50/\$75/50%	\$535.00	\$1,047.00	n/a	\$1,494.00
Option #3: VACE Advantage Co-Pay H.S.A.	●	●	\$3,000	Stacked	\$6,750	\$0	Deductible, then \$30 co-payment per visit	Deductible, then \$50 co-payment per visit	Deductible, then \$500 co-payment per visit	Deductible, then \$500 per day	Combined with medical	\$1,350	\$10 co-payment for generic only	deductible, then \$10/\$50/\$75/50%	\$507.00	\$991.00	n/a	\$1,415.00

2019 Qualified Health Plans (for comparison)

Blue Rewards Health and Wellness plans and premiums

Blue Rewards Health and Wellness Plan GOLD CDHP	●	●	\$3,000	aggregate	\$3,000	\$0	deductible, then \$0	deductible, then \$0	deductible, then \$0	deductible, then \$0	combined with medical	\$1,350	\$5/40%/60%	deductible, then \$0	\$625.62	\$1,251.24	\$1,207.45	\$1,757.99
Blue Rewards Health and Wellness Plan Reflective SILVER		●	\$2,850	aggregate	\$7,900**	\$0	combined 3/6/9 visits with no cost-sharing, then deductible applies, then co-pay \$30	deductible, then \$50	deductible, then \$450	deductible, then \$1,750	combined with medical	\$1,350	deductible, then \$5/40%/60%	deductible, then \$5/40%/60%	\$568.63	\$1,137.26	\$1,097.46	\$1,597.85
Blue Rewards Health and Wellness Plan Reflective SILVER CDHP	●	●	\$4,125	aggregate	\$4,125**	\$0	deductible, then \$0	deductible, then \$0	deductible, then \$0	deductible, then \$0	combined with medical	\$1,350	\$15/40%/60%	deductible, then \$0	\$566.47	\$1,132.94	\$1,093.29	\$1,591.78

Standard plans and premiums

Standard PLATINUM		●	\$350	stacked	\$1,350 medical plus \$1,350 Rx	\$0	\$10	\$30	deductible, then \$100	deductible, then 10%	\$0	\$1,350	\$5/\$50/50%	\$5/\$50/50%	\$786.86	\$1,573.72	\$1,518.64	\$2,211.08
Standard GOLD		●	\$850	stacked	\$4,700 medical plus \$1,350 Rx	\$0	\$15	\$30	deductible, then \$150	deductible, then 30%	\$100 per member	\$1,350	\$10/deductible, then \$50/50%	\$10/deductible, then \$50/50%	\$674.23	\$1,348.46	\$1,301.26	\$1,894.59
Standard SILVER		●	\$2,800	stacked	\$7,500	\$0	\$30	\$75	deductible, then \$250	deductible, then 40%	\$300 per member	\$1,350	\$15/deductible, then \$60/50%	\$15/deductible, then \$60/50%	\$570.96	\$1,141.92	\$1,101.95	\$1,604.40
Standard BRONZE		●	\$5,500	stacked	\$7,900	\$0	deductible, then \$35	deductible, then \$90	deductible, then 50%	deductible, then 50%	\$900 per member	\$1,350	deductible, then \$20/\$85/60%	deductible, then \$20/\$85/60%	\$496.39	\$992.78	\$958.03	\$1,394.86
Standard BRONZE without Rx MOOP		●	\$7,600	stacked	\$7,600	\$0	\$40	\$100	deductible, then \$0	deductible, then \$0	combined with medical	n/a*	\$25/deductible, then \$0/\$0	\$25/deductible, then \$0/\$0	\$512.57	\$1,025.14	\$989.26	\$1,440.32
Standard SILVER CDHP	●	●	\$1,550	aggregate	\$6,650**	\$0	deductible, then 10%	deductible, then 30%	deductible, then 30%	deductible, then 30%	combined with medical	\$1,350	\$10/\$40/50%	deductible, then \$10/\$40/50%	\$585.80	\$1,171.60	\$1,130.59	\$1,646.10
Standard BRONZE CDHP	●	●	\$5,250	aggregate	\$6,650**	\$0	deductible, then 50%	deductible, then 50%	deductible, then 50%	deductible, then 50%	combined with medical	\$1,350	\$12/40%/60%	deductible, then \$12/40%/60%	\$507.44	\$1,014.88	\$979.36	\$1,425.91

* This plan does not include a separate prescription drug out-of-pocket maximum (Rx MOOP). All expenses accumulate to the overall out-of-pocket maximum.

** Regardless of all other cost-sharing, if one individual's out-of-pocket costs reach \$7,900 in a year, we begin paying 100 percent of the allowed amount for that person's covered services and supplies.