

Understanding Your Benefits

Registering Online at [myBCBSRI](https://myBCBSRI.com) after 7/1/2023

- Go to myBCBSRI.com
- Click on "Register Here"
- Follow the registration instructions provided

Deductibles

In Network:

\$3,000 per individual plan;
\$6,000 per family plan

Out of Network:

\$8,000 per individual plan;
\$16,000 per family plan

All deductible payments count toward the family deductible amount, but the individual will never pay more than their individual deductible amount.

Out-of-pocket Limits

In Network:

\$6,650 per individual plan;
\$13,300 per family plan

Out of Network:

\$16,000 per individual plan;
\$32,000 per family plan

All out-of-pocket payments count toward the family out-of-pocket limit. The individual will never pay more than their individual out-of-pocket amount.

Please note:

The deductible and out-of-pocket limits are separate for in-network and out-of-network services.

Network:

Extensive national network, with access to thousands of providers across the country.

Office Visits	In-Network	Out-of-Network
Primary Care	30% per visit after deductible	50% per visit after deductible
Specialist	30% per visit after deductible	50% per visit after deductible
Urgent Care	30% per visit after deductible	30% per visit after deductible
Emergency Room	30% per visit after deductible	30% per visit after deductible
Mental Health/Substance Abuse Office Visit	30% per visit after deductible	50% per visit after deductible

Other Covered Services	In-Network	Out-of-Network
Preventive Care	\$0 per visit	50% per visit after deductible
Diagnostic Lab/X-ray	30% per visit after deductible	50% per visit after deductible
High-end Radiology	30% per visit after deductible	50% per visit after deductible
Outpatient Surgery	30% per visit after deductible	50% per visit after deductible
Inpatient Services	30% per visit after deductible	50% per visit after deductible
Durable Medical Equipment	30% per service/device after deductible	50% per service/device after deductible
Physical, Occupational, and Speech Therapy (limit 30 visits each per year)	30% per visit after deductible	50% per visit after deductible