## BC/BS PPO Plans

**Program 3 Plus**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
<th>Premium</th>
<th>Premium</th>
<th>Premium</th>
<th>Dental</th>
</tr>
</thead>
<tbody>
<tr>
<td>SINGLE (Without Medicare)</td>
<td>$682.00</td>
<td>$935.00</td>
<td>$938.00</td>
<td>$943.00</td>
<td>$28.68</td>
</tr>
<tr>
<td>FAMILY (Without Medicare)</td>
<td>$1,598.00</td>
<td>$2,189.00</td>
<td>$2,196.00</td>
<td>$2,209.00</td>
<td>$77.06</td>
</tr>
</tbody>
</table>

**Deductible 3 Plus**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
<th>Premium</th>
<th>Premium</th>
<th>Premium</th>
<th>Dental</th>
</tr>
</thead>
<tbody>
<tr>
<td>SINGLE (Without Medicare)</td>
<td>$355.00</td>
<td>$485.00</td>
<td>$484.00</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>FAMILY</td>
<td>$908.00</td>
<td>$1,237.00</td>
<td>$1,236.00</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

**Delta Dental**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>SINGLE (Without Medicare)</td>
<td>$1,002.00</td>
</tr>
<tr>
<td>FAMILY</td>
<td>$2,136.00</td>
</tr>
</tbody>
</table>

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**WHPI Managed Care Plans**

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**Medicare Eligible with Part D (MedicareBlueRx Iowa)**

MedicareBlueRx bills $90.20 per Medicare eligible person.

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<tr>
<td>SINGLE</td>
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<td>FAMILY</td>
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**Medicare Eligible without MedicareBlueRx Iowa**

Wellmark bills the amounts in green. If an eligible member does not enroll in MedicareBlueRx Iowa, the price will be changed to the price listed in pink.

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>SINGLE</td>
<td>$728.00</td>
</tr>
<tr>
<td>FAMILY</td>
<td>$1,553.00</td>
</tr>
</tbody>
</table>

*NOTE: Coordination of pharmacy benefits between Deductible 3 Plus plan and MedicareBlueRx Iowa is not available.*

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If you choose the Group F or N option, you are leaving the regular State plan options above but have the option to return to the regular State plans during the next open change time.

**Employer Retiree Group N with Group MedicareBlueRx BASIC**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group N Medical</td>
<td>$168.04</td>
</tr>
<tr>
<td>Group MedicareBlueRx BASIC</td>
<td>$90.20</td>
</tr>
</tbody>
</table>

**Employer Retiree Group F with Group MedicareBlueRx PLUS**

<table>
<thead>
<tr>
<th></th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group F Medical</td>
<td>$255.00</td>
</tr>
<tr>
<td>Group MedicareBlueRx PLUS</td>
<td>$139.90</td>
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</tbody>
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