

**Town of Hingham**  
 HPHC Medicare Enhance

**Fiscal Year 2017 Plan Designs**

	Current HPHC Medicare Enhance	MIIA BCBS Benchmark I Plan	MIIA BCBS Benchmark II Plan	GIC UniCare OME Plan
<u>Deductible</u>	\$0	\$0	\$0	\$35 per person
<u>Office Visits</u>	\$5	\$0	\$0	\$0
<u>Emergency Room</u>	\$30	\$0	\$0	\$25
<u>Inpatient Hospitalization</u>	\$0	\$0	\$0	\$50 per admission
<u>Outpatient Surgery</u>	\$0	\$0	\$0	\$0
<u>Retail Prescription Drugs (30-Day Supply)</u>				
Generics	\$5	\$10	\$10	\$10
Brand-Name	\$15	\$20	\$30	\$30
Non-Preferred	\$35	\$35	\$65	\$65
<u>Mail Order Prescription Drugs (90-Day Supply)</u>				
Generics	\$5	\$20	\$25	\$25
Brand-Name	\$15	\$40	\$75	\$75
Non-Preferred	\$35	\$70	\$165	\$165

Note: Benefits subject to Medicare rules and restrictions and benefit limitations and exclusions  
 Consult subscriber certificate for complete details.

**Town of Hingham**  
BCBS Medex III Plan

**Fiscal Year 2017 Plan Designs**

	Current BCBS Medex III	MIIA BCBS Benchmark I Plan	MIIA BCBS Benchmark II Plan	GIC UniCare OME Plan
<u>Deductible</u>	\$0	\$0	\$0	\$35 per person
<u>Office Visits</u>	\$0	\$0	\$0	\$0
<u>Emergency Room</u>	\$0	\$0	\$0	\$25
<u>Inpatient Hospitalization</u>	\$0	\$0	\$0	\$50 per admission
<u>Outpatient Surgery</u>	\$0	\$0	\$0	\$0
<u>Retail Prescription Drugs (30-Day Supply)</u>				
Generics	\$5	\$10	\$10	\$10
Brand-Name	\$10	\$20	\$30	\$30
Non-Preferred	\$25	\$35	\$65	\$65
<u>Mail Order Prescription Drugs (90-Day Supply)</u>				
Generics	\$10	\$20	\$25	\$25
Brand-Name	\$20	\$40	\$75	\$75
Non-Preferred	\$50	\$70	\$165	\$165

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