

Know How City of Bellevue Health Plans Work

	Kaiser HMO	Premera Choice	Premera Core
Type of Plan	The Kaiser plan is a health maintenance organization (HMO) which means the providers exclusively serve Kaiser members.	The Premera plans are Preferred Provider Organization (PPO). With PPO plans, you can elect to use a Premera network provider or any other provider. If you choose a network provider, your cost will be less.	
Network of Providers The facilities, providers and suppliers your health insurer or plan has contracted with to provide healthcare services.	With Kaiser, you will need to seek care within the Kaiser facilities for in-network benefits.	With the Premera Plans, you have Access through the Heritage & Heritage Plus 1 in-network provider or Blue Card PPO network if traveling outside of WA & AK.	
Deductible The amount you need to pay up front before the plan begins paying expenses. Not all services are subject to the deductible, such as preventive care.	\$0 per covered Individual	\$750 per covered Individual	\$0 per covered Individual
Mandatory Generics Rules on Prescriptions If a brand name drug is dispensed when a generic equivalent is available, the cost will be the difference in cost between the brand name drug and the generic equivalent in addition to the brand name co-pay amount.	No	Yes	No
Out-of-Pocket Maximum The maximum amount you'll have to pay in a calendar year for covered medical and prescription drug expenses. You pay toward the out-of-pocket maximum when you pay copays, deductibles, and coinsurance amounts. Anything above the out-of-pocket maximum will be covered by the plan at 100%.	\$2,000 per covered Individual	\$1,500 per covered Individual	\$1,500 per covered Individual