CDPHP Medicare Choices ~ Group PPO Plan Options
Effective January 1, 2010

Type of Medical Service	CDPHP Group Medicare PPO In-Network $5/$10	CDPHP Group Medicare PPO Out of Network $5/$10	CDPHP Group Medicare PPO In-Network $12/$20	CDPHP Group Medicare PPO Out-of-Network $12/$20	CDPHP Group Medicare PPO In-Network $10/$15 (New)	CDPHP Group Medicare PPO Out-of-Network $10/$15 (New)
Primary Care Physician Visits	$5	$5	$12	$12	$10	$10
Specialty Visits	$10	$10	$20	$20	$15	$15
Annual Out-of-Pocket Maximum (Member Responsibility)	$3,350 combined in and out of network per year	$3,350 combined in and out of network per year	$3,350 combined in and out of network per year	$3,350 combined in and out of network per year	$3,350 combined in and out of network per year	$3,350 combined in and out of network per year
Routine Annual Adult Exam	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Physician Services During Inpatient Stay	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Bone Mass Screening	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Mammograms	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Pap smears and pelvic exams	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Colorectal Screening Exams	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Prostate Cancer Screening	No copayment (men age 50+) $10 copayment (men under 50)	No copayment (men age 50+) $10 copayment (men under 50)	No copayment (men age 50+) $20 copayment (men under 50)	No copayment (men age 50+) $20 copayment (men under 50)	No copayment (men age 50+) $15 copayment (men under 50)	No copayment (men age 50+) $15 copayment (men under 50)
Immunizations (Flu, Pneumonia & Hepatitis B)	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Inpatient Hospitalization	$350 (Max 2 copays per year)	$800 copay per admission	$250 (Max 2 copays per year)	$750 copay per admission	$0 Copay per admission	$500 copay per admission
Outpatient Surgery	$125	$125	$125	$125	$125	$125
Lab Services	$10	$10	$20	$20	$15	$15
X-Rays	$10	$10	$20	$20	$15	$15
Emergency Care	$50 (waived if admitted)	$50 (waived if admitted)	$50 (waived if admitted)	$50 (waived if admitted)	$50 (waived if admitted)	$50 (waived if admitted)
Ambulance Services	$75	$75	$75	$75	$75	$75
Urgent Care	$5 - $35	$5 - $35	$12 - $35	$12 - $35	$10 - $35	$10 - $35
Physical, Speech & Occupational Therapies	$10	$10	$20	$20	$15	$15
Chiropractic Care	$10	$10	$20	$20	$15	$15
Home Health Care	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Prosthetic Devices	30% - $200 max out-of-pocket cost per item	30% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item
DME	30% - $200 max out-of-pocket cost per item	30% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item	20% - $200 max out-of-pocket cost per item
Diabetic Insulin, Needles & Syringes	Covered under Part D benefit	Covered under Part D benefit	Covered under Part D benefit	Covered under Part D benefit	Covered under Part D benefit	Covered under Part D benefit
Diabetic Supplies	30% coinsurance or $10 copay, whichever is less	30% coinsurance or $10 copay, whichever is less	20% coinsurance or $10 copay, whichever is less	20% coinsurance or $10 copay, whichever is less	20% coinsurance or $10 copay, whichever is less	20% coinsurance or $10 copay, whichever is less
Diabetic DME	30% coinsurance	30% coinsurance	20% coinsurance	20% coinsurance	20% coinsurance	20% coinsurance
Inpatient Mental Health	$350 (Max 2 copays per year)	$800 copay per admission	$250 (190-day lifetime limit) (Max 2 copays per year)	$750 (190-day lifetime limit)	$0 copay (190-day lifetime limit)	$500 (190-day lifetime limit)
Outpatient Mental Health	$10 Ind. visits $10 Grp. Visits	$10 Ind. visits $10 Grp. Visits	$20 Ind. visits $20 Grp. Visits	$20 Ind. visits $20 Grp. Visits	$15 Ind visits $15 Grp visits	$15 Ind visits $15 Grp visits
Inpatient Substance Abuse	$350 (Max 2 copays per year)	$800 copay per admission	$250 (Max 2 copays per year)	$750 per admission	$0 copay per admission	$500 copay per admission
Outpatient Substance Abuse	$10 Ind. visits $10 Grp. Visits	$10 Ind. visits $10 Grp. Visits	$20 Ind. visits $20 Grp. Visits	$20 Ind. visits $20 Grp. Visits	$15 Ind visits $15 Grp visits	$15 Ind visits $15 Grp visits
Skilled Nursing Facility	No copayment	No copayment	No copayment	No copayment	No copayment	No copayment
Hearing Services	$10 exam	$10 exam	$20 exam	$20 exam	$15 exam	$15 exam
Hearing Aids	$600 allowance every 3 years		$600 allowance every 3 years		$600 allowance every 3 years	
Vision Services	$10 exam	$10 exam	$20 exam	$20 exam	$15	$15 exam
Eyewear	$80 eyewear allowance every 12 months		$80 eyewear allowance every 12 months		$80 eyewear allowance every 12 months	
Dental Services	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year	Preventative Dental - $150 annual reimbursement for dental office visits and cleanings up to 2 per year
Health/Wellness Education	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes	SilverSneakers/Curves/ Capital District YMCAs/ Health Wellness Classes