HIGHMARK® Blue Cross Blue Shield

An Independent Licensee of the Blue Cross and Blue Shield Association

INDIVIDUAL PROGRAMS

Monthly Rates Effective January 1, 2011

PreferredBlue®
Individual Preferred-Provider Program

Individual/Family Deductibles	One Person	One Parent & Child	One Parent & Children	Husband & Wife	Two Parents & Child	Two Parents & Children
$500/$1,500*	$590.05	$879.20	$1,168.30	$1,180.20	$1,469.30	$1,758.50
$1,000/$3,000*	$527.65	$786.20	$1,044.85	$1,055.30	$1,313.85	$1,572.45

* For a PreferredBlue agreement covering more than one family member, each covered individual must meet his/her individual deductible (within a benefit period) before Highmark will pay for covered services for that individual. No individual member may satisfy the entire family deductible. Only after three individual family members have satisfied their deductibles will the deductibles for all remaining family members also be considered to have been satisfied.

PPOBlue℠
Individual Preferred-Provider High-Deductible Program

Individual/Family Deductibles	One Person	One Parent & Child	One Parent & Children	Husband & Wife	Two Parents & Child	Two Parents & Children
$1,500/$3,000**	$639.80	$953.25	$1,266.75	$1,279.55	$1,592.85	$1,906.35
$2,600/$5,200**	$574.50	$856.00	$1,137.55	$1,149.00	$1,430.50	$1,712.10
$3,500/$7,000**	$543.40	$809.65	$1,075.70	$1,086.75	$1,352.85	$1,619.10

** For a PPOBlue agreement covering more than one family member, the ENTIRE family deductible must be met (within a benefit period) before Highmark will pay for covered services for any family member. The family deductible can be satisfied by an individual family member or a combination of one or more family members. When more than one family member is covered, one or more family members must satisfy the ENTIRE family deductible (within a benefit period) before Highmark will pay for covered services for ANY individual family member.

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PPOBlue is a service mark of the Blue Cross and Blue Shield Association.

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