

FOR BUSINESSES WITH
51+ EMPLOYEES

—
2025

Preferred Choice health plan guide

Innovative health plans created for today's evolving healthcare needs

At Premera Blue Cross Blue Shield of Alaska, the customer is at the center of all we do, even those located outside of Alaska. That's why your local Premera team offers a range of comprehensive plans that fit your budget and your employees' diverse needs.

FOR OPTIFLEX FUNDED EMPLOYER GROUPS WITH 51-199 EMPLOYEES



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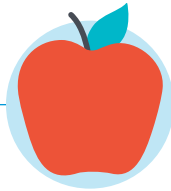
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Why businesses choose Premera



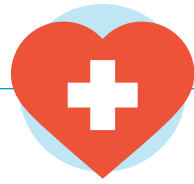
Unmatched access and deep discounts

We offer a variety of provider network options so you can choose the level of access that works best for your employees.



Well-rounded benefits package

Choose from a range of plans to find the right balance that best fits the needs and budget for your business and your employees.



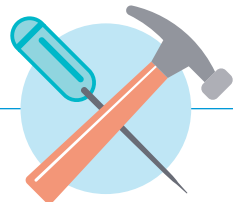
Programs for employees

Our built-in support programs encourage your employees to engage in their healthcare.



Digital health messages

Members who opt-in received personalized healthcare updates on their mobile phone. Text messages may include member benefits, tips on how to save on care, and more.



Administrative ease and support

Integrated benefits with Premera make for a streamlined experience. We make it simple for you to promote components of your healthcare benefits with your employees or explain to them how to best use their plan.



Meeting members where they are

With the broadest provider network in the state, Premera supports every member no matter where they are on their healthcare journey. From physical well-being to behavioral health and virtual care, we provide the support you need.



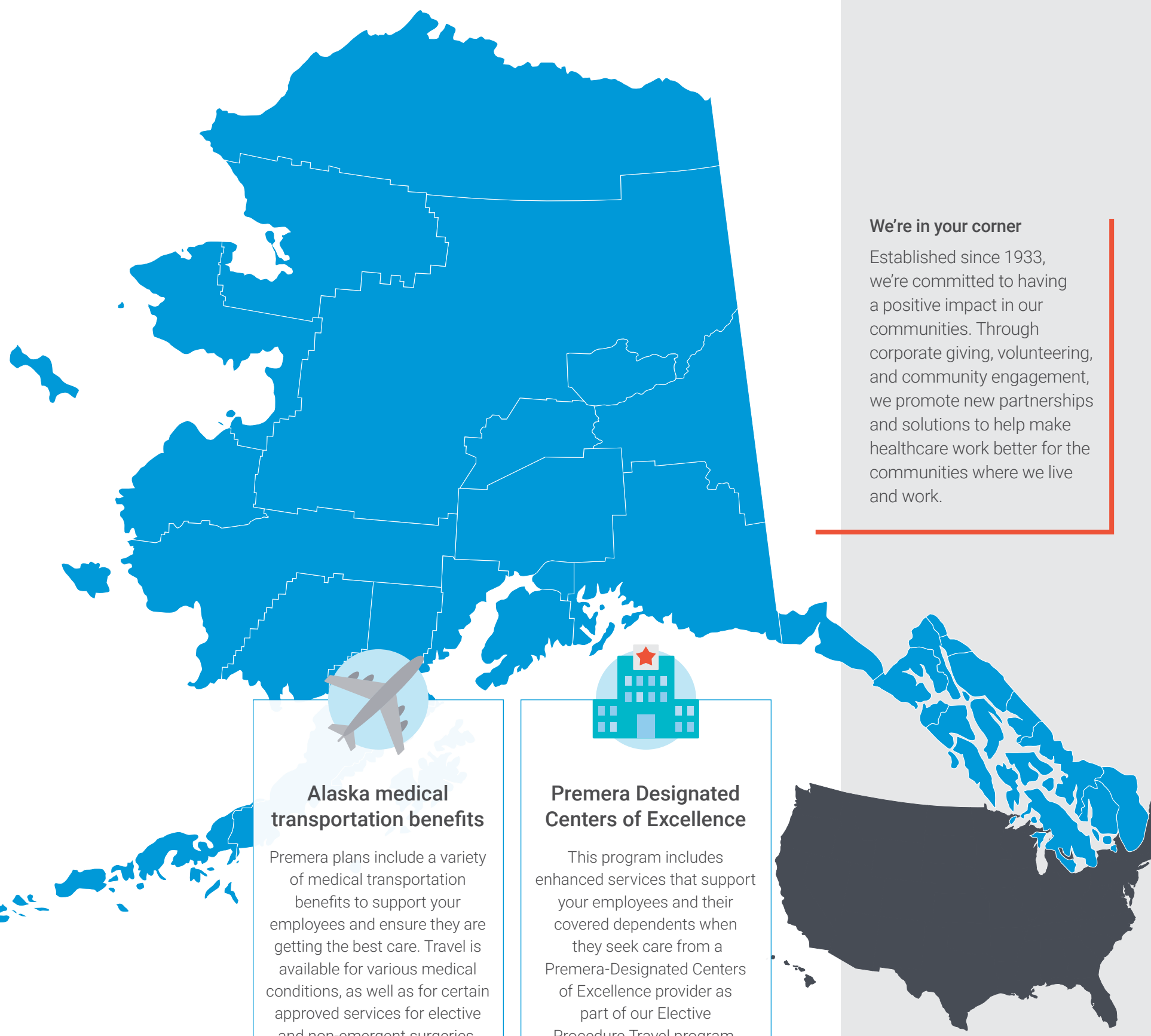
Alaska medical transportation benefits

Premera plans include a variety of medical transportation benefits to support your employees and ensure they are getting the best care. Travel is available for various medical conditions, as well as for certain approved services for elective and non-emergent surgeries.



Premera Designated Centers of Excellence

This program includes enhanced services that support your employees and their covered dependents when they seek care from a Premera-Designated Centers of Excellence provider as part of our Elective Procedure Travel program.



We're in your corner

Established since 1933, we're committed to having a positive impact in our communities. Through corporate giving, volunteering, and community engagement, we promote new partnerships and solutions to help make healthcare work better for the communities where we live and work.

Diabetes Condition Management Plus

Chronic conditions like diabetes are costly and highly prevalent. Two in three adults living with diabetes also have hypertension and nine out of ten are overweight or obese.^{1,2} Premera has included a comprehensive diabetes condition management solution that supports the whole member as part of your health plan.

How Diabetes Condition Management Plus works

MULTI-CONDITION SUPPORT
Members must have diabetes diagnosis to be eligible to enroll in Diabetes Management Plus.

- Diabetes Management Plus
 - + Hypertension support
 - + Digital mental health
 - + Standard weight management

Multi-faceted program design

Diabetes Condition Management Plus takes a comprehensive approach. Once enrolled, members will receive support for their primary condition and standard weight management and digital mental health services.



Comprehensive support

Integrated support that goes beyond the primary condition specific program.



Improved outcomes

Members who manage chronic conditions in one place can overcome care fragmentation and improve their health outcomes² to reduce total cost of care.



Holistic approach

No matter what program the member is engaged with, digital mental health and weight support is embedded.

Chronic Condition Management Plus access

- Fully insured:** Diabetes Management Plus included as part of your plan
- OptiFlex:** Diabetes Management Plus included as part of your plan



Did you know?

Members enrolled in Diabetes Management Plus can also access standard weight management and digital mental health support.



Tools for success

Members who qualify can receive a smart scale or blood pressure cuff in the Diabetes Management Plus program.

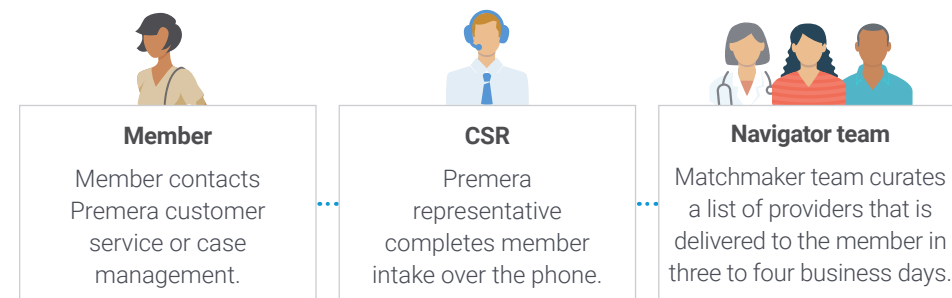
¹National Diabetes Statistics Report." Centers for Disease Control and Prevention, Centers for Disease Control and Prevention , www.cdc.gov/diabetes/php/data-research/index.html. Accessed 11 July 2024
² https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10170908/#:~:text=Some%20promising%20research%20has%20shown%20that%20patient%E2%80%90centered%20care%2C,%28Joo%20%26%20Liu%2C%202017%3B%20McKay%20et%20al.%2C%202019%29

Finding the right provider for you

Two out of three employers rank employee mental health as a top health priority.¹ Premera has made it easier than ever for members to access behavioral health services virtually or in person.

Matchmaker™ for Behavioral Health

Matchmaker for Behavioral Health is an expansion of our commitment to improve access and lessen the hurdles members face when seeking behavioral health services. With Matchmaker for Behavioral Health, members receive a highly personalized list of behavioral health providers based on their plan, needs, and preferences.



Matchmaker for Behavioral Health access

- ✓ **Fully insured:** Included as part of your plan
- ✓ **OptiFlex:** Included as part of your plan

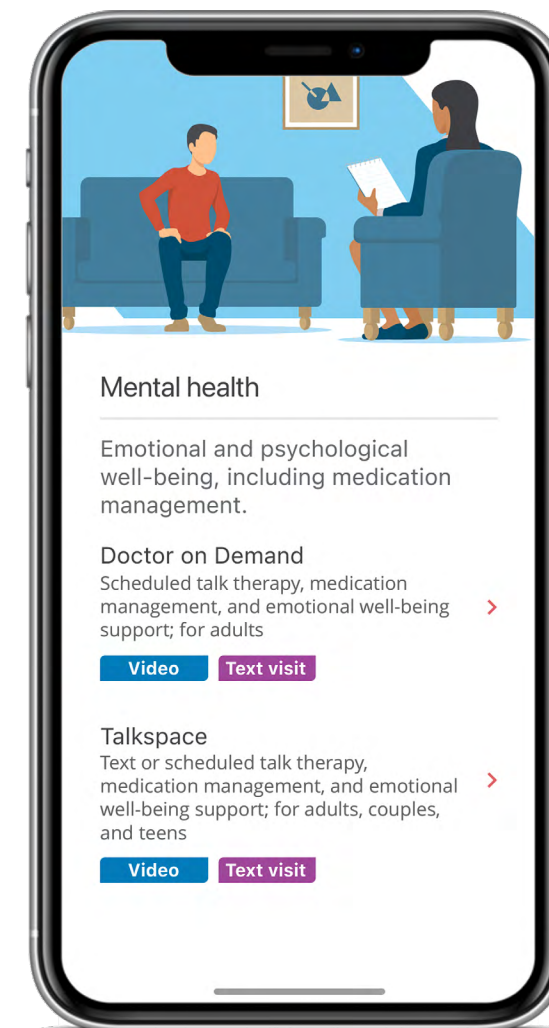
The Matchmaker for Behavioral Health intake asks members their preferences on the following:

- Religious affiliation
- In-person or virtual appointments
- Gender, race, and ethnicity
- Language
- And more

Every Matchmaker for Behavioral Health list includes a minimum of two in-network providers.

Behavioral health in the palm of your hand

Premera has partnered with industry-leading behavioral health virtual care vendors to ensure our members get the care they need, when they need it, and in a way that works for them.



83%

of employers offer behavioral health services through virtual care.¹



Virtual behavioral health care can support members with the following:

- Generalized anxiety
- Depression
- Adjustment disorders
- And more



Members struggling with substance use disorder (SUD) have access to confidential and high-quality virtual care including medically assisted treatment (MAT).² **Contact your Premera account representative for more information.**

¹2022 Best Practices in Healthcare Employer Survey, 2022 Global Benefit Attitudes Survey

²Medically assisted treatment (MAT) may be prohibited to certain U.S. states in order to meet federal in-person prescribing requirements.

Care when you need it

For the times when you can't wait for an in-person visit, virtual care is there. Premera virtual care providers offer secure text or video visits to treat a variety of primary care needs.

Virtual care can help with these conditions and more:

- Common cold symptoms
- COVID-19 treatments
- Follow-up visits with a physician
- Sinus infections
- Urinary tract infections (UTIs)

Benefits

- **Improved employee experience**—Employees can get near-instant access to providers for primary care, behavioral health, and chronic care management needs from the safety and comfort of their own homes.
- **Cost savings**—Virtual care can be less costly than an in-person visit and employees save by staying in network.
- **Quality**—Access to high-quality providers leads to a better care experience, resulting in happier, healthier employees.



Did you know?

Every Premera medical plan includes our 24-Hour NurseLine. Members can call day or night to receive free and confidential health advice from a registered nurse.



Preventive health

Preventive healthcare services are part of every Premera plan. Our secure member website provides suggested preventive routine exams, vaccinations, and screenings.

Covering customers wherever they go

We believe in working closely with providers and hospitals to deliver healthcare for the customer together. That's why our provider networks are more than just a collection of contracts. They also give members access to quality care and satisfying experiences.

For decades, Premera has maintained one of the largest networks of providers and medical facilities in Alaska. As a result, we offer great network stability and deep discounts for covered in-network services.

Heritage network

Our contracted providers and hospitals include over 6,063 preferred providers and 23 preferred hospitals across Alaska.

Yukon network*

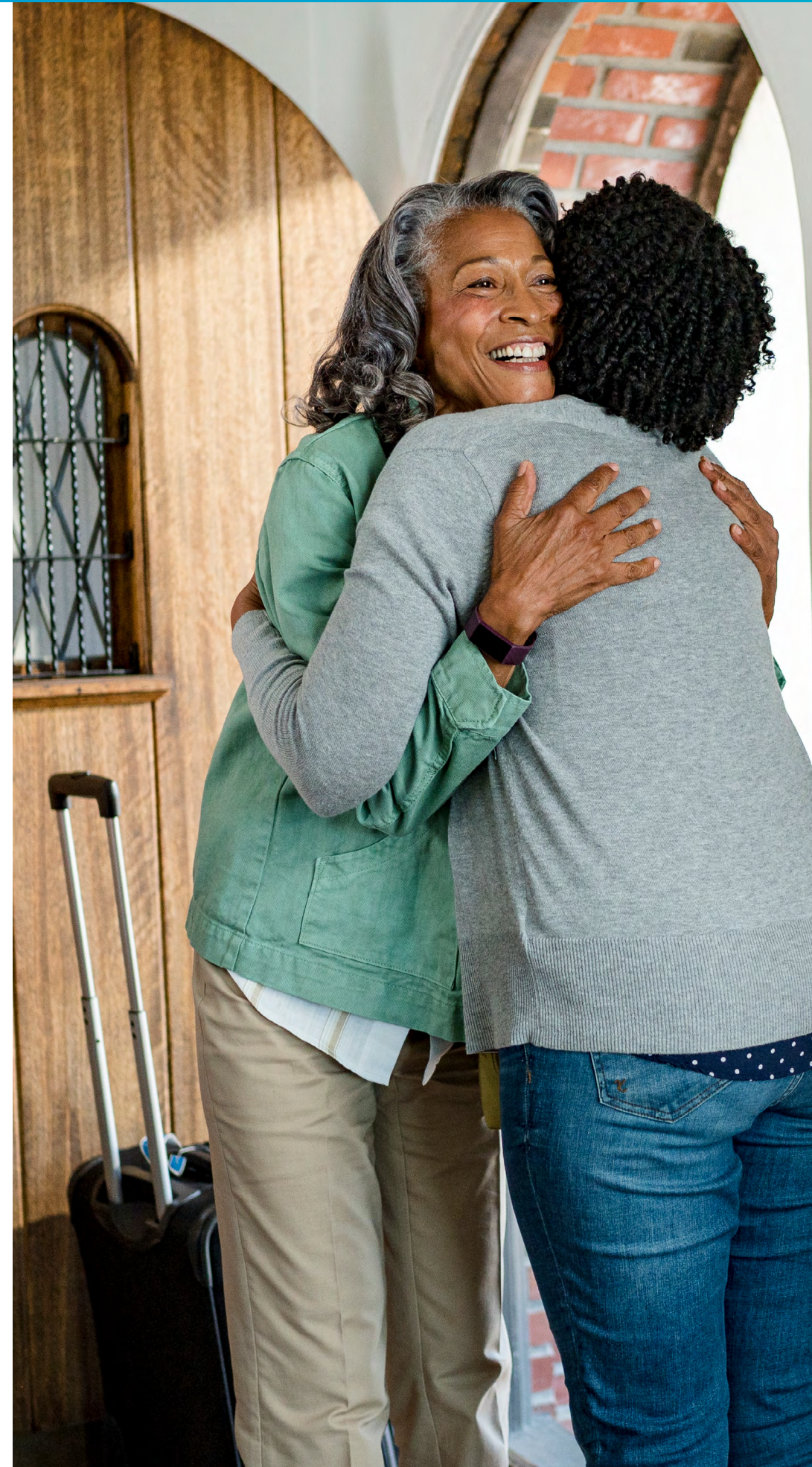
We designed a network that lowers costs by excluding dialysis providers that are not competitively priced. The Yukon network limits the financial impact of unanticipated dialysis costs for members and employers. It also reduces expenses when members require dialysis prior to qualifying for Medicare. For OptiFlex employers, this network makes carving out dialysis coverage a reality.

National and worldwide network coverage with BlueCard

Every Premera health plan includes the BlueCard® Program. This program provides access to networks of contracted preferred and participating Blue Cross Blue Shield providers across the country. Just like here at home, these networks provide valuable discounts on billed charges. Plus, they have the added advantage of direct billing.

The BlueCard Program includes worldwide coverage with Blue Cross Blue Shield Global Core. This program provides members access to an international network of participating providers and hospitals for a broad range of medical care services. This access means they can feel safe wherever they go.

*Network selection specific to OptiFlex employer groups.



Looking to lower costs in 2025?

Premera offers low-cost health plan options in 2025 to meet both the needs of your employees as well as your business. Discuss new Essentials plan options with your Premera representative or producer.

Choosing your health plan is as easy as 1, 2, 3

You select the medical, pharmacy, and dental plans that work best for your business needs and budget. At the same time, you provide great benefits to your employees and their eligible dependents.

STEP 1 Choose up to 2 medical plans from 18 options (when you provide a dual option, you give your employees a choice).

STEP 2 Choose a pharmacy plan.

STEP 3 Choose a dental plan.

Integrated medical, pharmacy, and dental plans encourage healthy habits and good outcomes, provide a robust network of medical and dental providers, and make it easy for you to take great care of your employees.



Vision and hearing

With a Preferred Choice plan, the vision benefit is included (excludes the Essentials Medical plan).



The power of choice

Talk to your Premera representative or producer to determine which plans have the programs and services to best meet your needs.



Preferred Choice lets you choose from

- 18 medical plans
- 10 pharmacy plans
- 11 dental plans

STEP 1

Choose a medical plan

You can choose from a range of plans to find the right balance between budget and healthcare needs for both your business and your employees. Choose up to 2 medical plans from 18 options.

	PPO plans	HSA-qualified PPO plans
Number of plan options	11	7
Network	Heritage	Heritage
Benefits	Wide range of quality benefits to fit your business' needs	Wide range of quality benefits to fit your business' needs
Pharmacy plan	Make your choice*	Included
Can be paired with employee-owned HSA	No	Yes—plus Premera can administer the account for you

*Essentials Medical 7550 and 8550 have in-network pharmacy embedded in the plan. If you select either one of these medical plans you are unable to select a different pharmacy option.

Your medical plan options

Premera Preferred Choice medical plans	Deductible	Coinsurance		Office visit copay	Out-of-pocket maximum	Emergency room cost share
		In network (Preferred/Participating)	Out of network (Non-participating)			
Plus Split Copay \$100	\$100	20% / 40%	60%	\$20 / \$50	\$1,000	\$100 copay, then deductible and preferred coinsurance
Plus Split Copay \$250	\$250			\$20 / \$60	\$2,000	
Plus Split Copay \$500	\$500			\$25 / \$60	\$3,500	
Plus Split Copay \$1,000	\$1,000			\$25 / \$65	\$4,500	
Plus Split Copay \$2,000	\$2,000			\$30 / \$65	\$6,000	
Plus Split Copay \$4,000	\$4,000			\$45 / \$80	\$7,150	
Plus Split Copay \$5,000	\$5,000	30% / 40%	60%	Deductible / Coinsurance applies	\$7,350	Deductible, then preferred coinsurance
Plus Split Copay \$6,000	\$6,000				\$6,500	
Plus HSA Qualified \$1,650¹	\$1,650	20% / 40%	60%	Deductible / Preferred coinsurance applies	\$3,200	Deductible, then preferred coinsurance
Plus HSA Qualified \$2,000²	\$2,000				\$5,000	
Plus HSA Qualified \$3,300³	\$3,300				\$6,000	
Plus HSA Qualified \$4,000³	\$4,000				\$6,550	
Plus HSA Qualified \$5,000³	\$5,000				\$6,550	
Plus HSA Qualified \$6,000³	\$6,000				\$6,500	
Essentials 7550	\$7,550	30% / 40%	60%	Deductible / Preferred coinsurance applies	\$8,550	\$450 copay, then deductible and preferred coinsurance
Essentials 8550	\$8,550	0%				Deductible, then preferred coinsurance

¹ Aggregate deductible and aggregate out of pocket

² Aggregate deductible and embedded out of pocket

³ Embedded deductible and embedded out of pocket

NOTE: The deductible spread between the two plans cannot exceed \$3,000.

Medical covered services

Covered services (In network)

Deductible, copay, and coinsurance percentages shown represent customer's cost share. Medical benefits apply after the calendar-year deductible is met unless otherwise noted, or if the cost share is a copay. PCY = per calendar year

	MEDICAL PLAN TYPES					
	PPO		HSA Qualified		Essentials Medical	
	IN NETWORK					
	Preferred	Participating	Preferred	Participating	Preferred	Participating
Preventive office visit unlimited (subject to standard medical guidelines)	Covered in full					
Vaccinations unlimited (subject to standard medical guidelines)						
Health education unlimited						
Nicotine dependency programs unlimited						
Type 2 diabetes health education unlimited	Office visit cost share					
Professional office visit						
Virtual care	Covered in full		Deductible/preferred coinsurance		Covered in full	
Inpatient professional services	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Contraceptive management services unlimited	Covered in full					
Preventive professional diagnostic imaging and laboratory services including mammogram and PAP test, prostate-specific antigen (PSA) test	Covered in full					
Other professional diagnostic imaging	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Professional diagnostic major imaging						
Other professional diagnostic laboratory and pathology tests	Covered in full					
Diagnostic mammography	Covered in full		Deductible, then 0%		Covered in full	
Inpatient facility	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Outpatient surgery facility						
Skilled nursing facility 60 days PCY; includes room and board, and facility billed professional and ancillary fees						
Hospice inpatient facility 10 days inpatient; within the 6-month lifetime maximum	Deductible/preferred coinsurance					
Emergency room physician	\$40 copay		Deductible/preferred coinsurance		Office visit cost share	
Ambulance transportation unlimited	\$100 copay, then deductible/preferred coinsurance		Deductible/preferred coinsurance			
Air ambulance unlimited						

	PPO		HSA Qualified		Essentials Medical	
	IN NETWORK					
	Preferred	Participating	Preferred	Participating	Preferred	Participating
Allergy and therapeutic injections	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Mental health inpatient facility care unlimited	Deductible/preferred coinsurance					
Mental health outpatient professional care unlimited	Non-specialist office visit cost share		Deductible/preferred coinsurance		Office visit cost share	
Chemical dependency inpatient facility care unlimited	Deductible/preferred coinsurance					
Chemical dependency outpatient professional care unlimited	Non-specialist office visit cost share		Deductible/preferred coinsurance		Office visit cost share	
Rehab inpatient facility 30 days PCY	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Rehab outpatient care 45 visits PCY, including cardiac/pulmonary rehab; chronic pain; physical, occupational, speech, and massage therapy (massage therapy must be billed by MD, DO, or DPM)	Specialist office visit cost share		Deductible/preferred coinsurance		Office visit cost share	
Medical supplies, equipment, and prosthetics unlimited	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance	Deductible/preferred coinsurance	Deductible/participating coinsurance
Foot orthotics, orthopedic shoes, and accessories \$300 PCY; includes orthotics and orthopedic shoes						
Home health visits 130 visits PCY						
Hospice care hospice home visits: unlimited; respite: unlimited	Covered as any other service					
Transplants unlimited; \$7,500 travel and lodging limits	Covered as any other service					
Manipulations 12 visits PCY; spinal and other	Non-specialist office visit cost share		Deductible/preferred coinsurance		Not covered	
Acupuncture 12 visits PCY	Non-specialist office visit cost share		Deductible/preferred coinsurance			
Routine vision exam 1 PCY	Deductible waived, 10% coinsurance					
Vision hardware 1 set of frames every 2 consecutive years, \$90 max; 1 pair of lenses PCY; contacts \$170 PCY max; vision exam/test and hardware \$350 PCY max	Covered in full					
Pediatric vision exam 1 PCY under age 19	Non-specialist office visit cost share		Deductible/preferred coinsurance			
Pediatric vision hardware under age 19: 1 pair of glasses, including frames and lenses PCY or 12-month supply of contacts in lieu of glasses PCY	Covered in full					
Hearing exam 1 every 2 calendar years	Deductible waived, 20% coinsurance					
Hearing hardware \$3,000 every 3 calendar years	Deductible waived, 20% coinsurance					
Annual plan maximum	Unlimited					

*Talk with your producer or Premera representative to find out if this plan is right for your business.

STEP 2

Choose a pharmacy plan

All medical plans require a pharmacy plan, except health savings account (HSA)-qualified plans, which already include a pharmacy plan.

Choose from 10 pharmacy plan options. Each offers the following services:

- Negotiated discount rates from preferred providers
- Retail and mail-order coverage
- Drug classification based on the tier of coverage selected

Your drug list options for each pharmacy plan are as follows:

- Select HSA plans: Paired with Preferred-A1
- Plus HSA plans: Choose between Preferred-A1 or Essentials-E1

Premera Preferred Choice pharmacy plans	Retail cost share				Mail cost share ¹				Drug list
	Tier 1	Tier 2	Tier 3	Tier 4	Tier 1	Tier 2	Tier 3	Tier 4	
Essentials - \$10 / \$25 / \$45 / 30%	\$10	\$25	\$45	30%	\$25	\$62.50	\$45	30%	Essential - E4
Essentials - \$15 / \$30 / \$50 / 30%	\$15	\$30	\$50		\$37.50	\$75	\$50		
Essentials - \$150 - \$15 / \$60 / \$100 / 50% ²		\$60	\$100	50%	\$150	\$100	50%		
\$10 / \$30 / \$50	\$10	\$30	\$50	N/A	\$25	\$75	\$125	N/A	Preferred - B3
\$20 / \$40 / \$60	\$20	\$40	\$60		\$50	\$100	\$150		
\$10 / \$20 / \$40	\$10	\$20	\$40	30%	\$25	\$75	\$100	30%	Preferred - B4
\$10 / \$30 / \$30 / 30%		\$30	\$75		\$125				
\$15 / \$30 / \$50 / 30%	\$15	\$30	\$50	\$37.50	\$75	\$125	50%		
\$150-\$15 / \$30 / \$50 / 30% ²			\$50	\$125				50%	
\$20 / \$50 / 50% / 30%	\$20	\$50	50%		\$50	\$125	50%		

¹ Specialty drugs are limited to a 30-day supply from Premera's specialty pharmacy provider.

² Deductible is waived for tier 1.

Essentials tiers and customer cost shares

First tier	Preferred generic drugs
Second tier	Preferred brand-name drugs
Third tier	Preferred specialty ¹ drugs
Fourth tier	Non-preferred drugs (generic, brand, and specialty)

Preferred tiers and customer cost shares

First tier	Generic drugs
Second tier	Preferred brand-name drugs
Third tier	Non-preferred brand-name drugs
Fourth tier	Specialty ¹ drugs

Rx Savings Solutions

Premera partnered with Rx Savings Solutions to offer an innovative pharmacy savings tool. Members are notified of opportunities to spend less on their prescription drugs with little to no impact to the member's healthcare journey. Ways members can save:

- Generic substitutions
- Dosage form change
- Pharmacy change

When a member decides to make a switch to save, the Rx Savings Solutions manages the process for the member by contacting the prescribing physician and submitting a revised prescription.

Rx Savings Solutions is an independent company that does not provide Blue Cross Blue Shield products or services.



The Essentials pharmacy plan keeps costs as low as possible by focusing on high-value drugs that are approved by the U.S. Food and Drug Administration (FDA).

STEP 3

Choose a dental plan

Select the right plan for your company from 14 dental plans. Each plan offers the following:

A broad network

We offer access to one of the largest networks of dentists—hundreds within the state of Alaska and nearly 72,000 licensed dentists practicing in more than 250,000 locations in Alaska, Washington, and nationwide. Perfect for your employees who live or travel outside of Alaska!

Administrative ease

Bundling your Premera medical, vision, hearing, and dental helps you simplify your work with only one health plan for medical and dental administration.

Healthier, happier employees

Oral health is key to overall health. If your employees get the care they need for healthy smiles, they'll be better prepared to meet the needs of your business.

Dental expertise

Partner with a company backed by more than 30 years of experience serving dental customers.

An emphasis on prevention

Premera dental customers do not pay a deductible for regular dental visits, and most plans will cover preventive services in full.



Want to offer your employees more dental options?

A **shared family maximum** may be the best choice for you and your family. This dental plan option allows you to share your dental annual maximum to help maximize your family's dental coverage. The shared family maximum does not apply to preventive dental services, ensuring that everyone in your family has access to preventive dental care.

Contact your producer or Premera representative for more information.

Your dental plan options

Preferred Choice Dental plans

INN: In network OON: Out of network

Premera Preferred Choice dental plans	Individual deductible ¹	Family deductible	Coinsurance— Diagnostic & preventive (INN & OON)	Coinsurance— Basic (INN & OON)	Coinsurance— Major (INN & OON)	Annual maximum (applicable services)	Endodontic/ Periodontic services	Waiting period	Orthodontia														
Dental Optima 20% 1000	\$50	\$150	20%	20%	50%	\$1,000 (Prevent, Basic, Major)	Major	No	No														
Dental Optima 1000																							
Dental Optima 1500																							
Dental Optima 1500 Enhanced + annual max waiver			\$1,500 (Prevent, Basic, Major)			Basic	0%			20%	50%	No	0% coinsurance to \$1,500 lifetime maximum (all ages)										
Dental Optima 1500 Enhanced + annual max waiver + ortho																							
Dental Optima 1500 shared family max + annual max waiver																							
Dental Optima Enhanced 1500 shared family max + annual max waiver + ortho			\$1,500 Shared (Basic, Major)			Major								0%	20%	50%	No	0% coinsurance to \$1,500 lifetime maximum (all ages)					
Dental Optima 2000 Enhanced + annual max waiver																							
Dental Optima 2000 Enhanced + annual max waiver + ortho			\$2,000 (Basic, Major)			Basic													0%	20%	50%	No	0% coinsurance to \$1,500 lifetime maximum (all ages)
Dental Optima Voluntary 1500																							
Dental Optima Voluntary 1500 + annual max waiver	\$1,500 (Prevent, Basic, Major)	Major	0%	20%	50%	12 months ³		No															
	\$1,500 (Basic, Major)																						

¹ Applies to Basic and Major only

² Limited coverage

³ Applies to Major only



Find out more:

Visit premera.com/ak/employer.

Talk with your Premera representative or producer.



This brochure is not a contract. It is only a summary of the major benefits provided by these plans. For full coverage provisions, including a description of waiting periods, limitations, and exclusions, please contact your producer.