

Anthem PPO and Anthem HDHP + HSA Plan Design Changes

There will be a few changes to the plan design for the Anthem PPO and the Anthem High Deductible Health Plan (HDHP) + Health Savings Account (HSA), effective January 1, 2024.

Anthem PPO	Anthem HDHP + HSA
 Emergency room copay: Increasing from \$100 to \$150 per visit 	 Annual deductibles — this change is required due to updated Affordable Care Act (ACA) rules:
 Generic prescription copay: Increasing from \$5 (retail) / \$10 (mail order) to \$10 (retail) / \$20 (mail order) 	 In-network: Increasing from \$1,500 to \$1,600 (individual), and from \$3,000 to \$3,200 (family)
 Primary Care Physician (PCP) copay: Increasing from \$20 to \$25 Specialist copay: Increasing from \$30 to \$40 	 Out-of-network: Increasing from \$3,000 to \$3,200 (individual), and from \$6,000 to \$6,400 (family)
Out-of-pocket maximums:	Out-of-pocket maximums:
 In-network: Increasing from \$3,000 to \$3,500 (individual), and from \$6,000 to \$7,000 (family) 	 In-network: Increasing from \$6,350 to \$7,000 (individual), and from \$12,700 to \$14,000 (family)
 Out-of-network: Increasing from \$6,000 to \$7,000 (individual), and from \$12,000 to \$14,000 (family) 	 Out-of-network: Increasing from \$7,000 to \$14,000 (individual), and from \$14,000 to \$20,000 (family)