



Established 1984



# 2024 Plan Changes

Business ADVANTAGE<sup>SM</sup>

BA Primary Choice<sup>SM</sup>



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# 2024 Small Group Plan Changes

This grid illustrates key benefit changes that will become effective January 1, 2024, for existing BusinessADVANTAGE and BA Primary Choice plans offered in 2023. This does not include all changes. Please refer to your Schedule of Benefits for complete details of your 2024 plan benefits.

## BusinessADVANTAGE Plans

### GOLD PLANS

Gold 2000	2023 — Gold 2000	2024 — Gold 2000
Individual/Family Maximum Out of Pocket (MOOP)	\$4,225/\$8,450	\$5,000/\$10,000
Blue CareOnDemand Powered by MDLIVE	\$10	\$13
Primary Care Office Visit	\$20	\$25
Gold 3000 HD	2023 — Gold 3000 HD	2024 — Gold 3200 HD
Plan name changes to Gold 3200 HD.		
Individual/Family Deductible	\$3,000/\$6,000	\$3,200/\$6,400
Individual/Family Maximum Out of Pocket (MOOP)	\$3,000/\$6,000	\$3,200/\$6,400

Silver 3500	2023 — Silver 3500	2024 — Silver 3500
Individual/Family Maximum Out of Pocket (MOOP)	\$7,500/\$15,000	\$8,600/\$17,200
Specialist Office Visit	\$85	\$90
Prescription Drug Tiers 1 and 2	\$30	\$35
Silver 4800 HD	2023 — Silver 4800 HD	2024 — Silver 5100 HD
Plan name changes to Silver 5100 HD.		
Individual/Family Deductible	\$4,800/\$9,600	\$5,100/\$10,200
Individual/Family Maximum Out of Pocket (MOOP)	\$4,800/\$9,600	\$5,100/\$10,200
Silver 5001	2023 — Silver 5001	2024 — Silver 5001
Individual/Family Maximum Out of Pocket (MOOP)	\$8,000/\$16,000	\$8,500/\$17,000
Silver 5500 HD	2023 — Silver 5500 HD	2024 — Silver 5100 HD
Plan is no longer available. Members will move to Silver 5100 HD.		
Individual/Family Deductible	\$5,500/\$11,000	\$5,100/\$10,200
Individual/Family Maximum Out of Pocket (MOOP)	\$5,500/\$11,000	\$5,100/\$10,200
Silver 5501	2023 — Silver 5501	2024 — Silver 5501
Individual/Family Maximum Out of Pocket (MOOP)	\$9,000/\$18,000	\$9,200/\$18,400
Prescription Drug Tiers 1, 2 and 3	Tiers 1 and 2: \$23 Tier 3: \$50	Tiers 1 and 2: \$25 Tier 3: \$55
Silver 7100	2023 — Silver 7100	2024 — Silver 7100
Individual/Family Maximum Out of Pocket (MOOP)	\$8,700/\$17,400	\$9,000/\$18,000
Specialist Office Visit	\$70	\$75
Prescription Drug Tiers 1 and 2	\$20	\$25



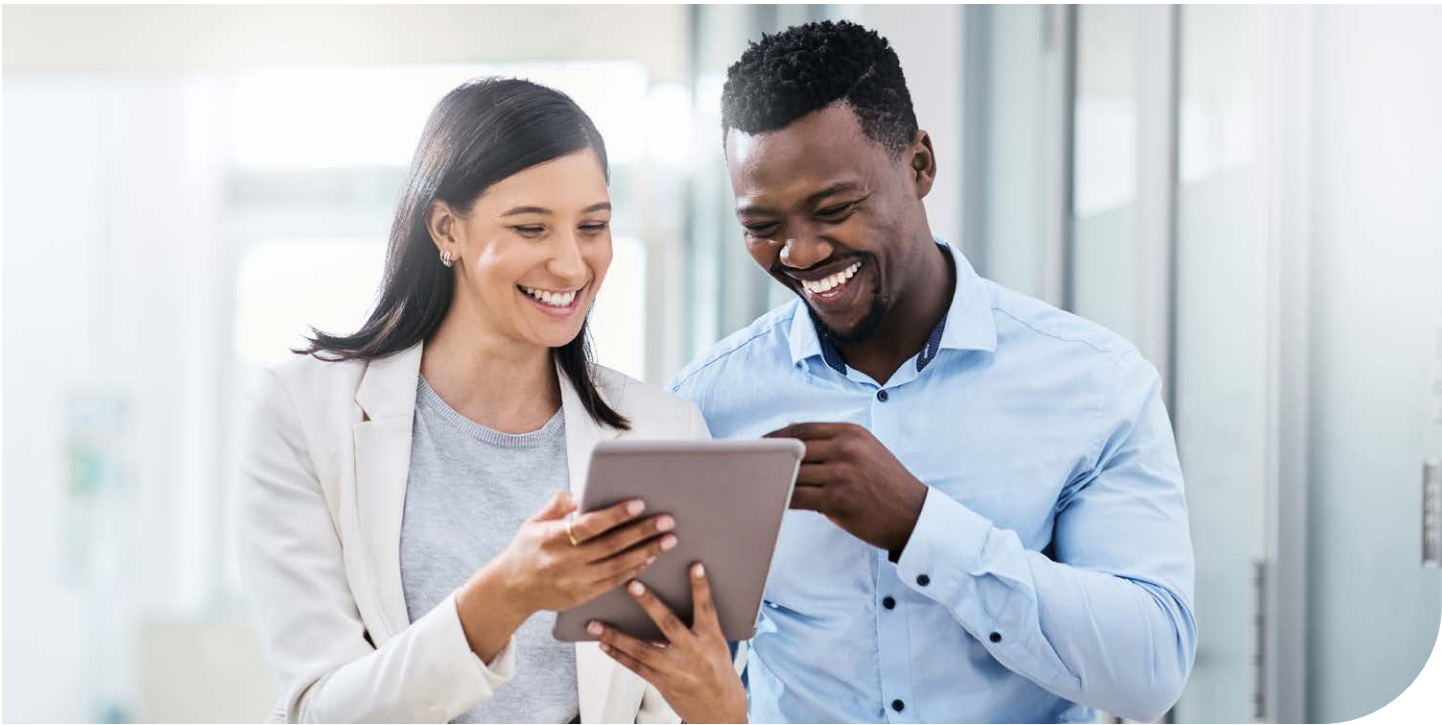
## SILVER PLANS (continued)

Silver 7800	2023 — Silver 7800	2024 — Silver 8300
Plan name changes to Silver 8300.		
Individual/Family Deductible	\$7,800/\$15,600	\$8,300/\$16,600
Individual/Family Maximum Out of Pocket (MOOP)	\$7,800/\$15,600	\$8,300/\$16,600
Specialist Office Visit	\$80	\$85
Prescription Drug Tiers 1, 2 and 3	Tiers 1 and 2: \$30 Tier 3: \$60	Tiers 1 and 2: \$32 Tier 3: \$65
Silver 8550	2023 — Silver 8550	2024 — Silver 8300
Plan is no longer available. Members will move to Silver 8300.		
Individual/Family Deductible	\$8,550/\$17,100	\$8,300/\$16,600
Individual/Family Maximum Out of Pocket (MOOP)	\$8,550/\$17,100	\$8,300/\$16,600
Primary Care Office Visit	\$35	\$0
Blue CareOnDemand Powered by MDLIVE	\$18	\$0
Specialist Office Visit	\$65	\$85
Prescription Drug Tiers 1, 2, 3 and 4	Tiers 1 and 2: \$15 Tier 3: \$40 Tier 4: \$80	Tiers 1 and 2: \$32 Tier 3: \$65 Tier 4: \$75



## BRONZE PLANS

Bronze 4000	2023 — Bronze 4000	2024 — Bronze 4000
Blue CareOnDemand Powered by MDLIVE	\$30	\$0
Bronze 5550	2023 — Bronze 5550	2024 — Bronze 5550
Individual/Family Maximum Out of Pocket (MOOP)	\$9,000/\$18,000	\$9,350/\$18,700
Primary Care Office Visit	\$45	\$55
Blue CareOnDemand Powered by MDLIVE	\$23	\$28
Specialist Office Visit	\$110	\$145
Bronze 6500	2023 — Bronze 6500	2024 — Bronze 6900
Plan name changes to Bronze 6900.		
Individual/Family Deductible	\$6,500/\$13,000	\$6,900/\$13,800
Individual/Family Maximum Out of Pocket (MOOP)	\$8,900/\$17,800	\$9,350/\$18,700
Specialist Office Visit	\$100	\$115
Prescription Drug Tiers 1 and 2	Tiers 1 and 2: \$30	Tiers 1 and 2: \$32
Bronze 7000 HD	2023 — Bronze 7000 HD	2024 — Bronze 7800 HD
Plan name changes to Bronze 7800 HD.		
Individual/Family Deductible	\$7,000/\$14,000	\$7,800/\$15,600
Individual/Family Maximum Out of Pocket (MOOP)	\$7,000/\$14,000	\$7,800/\$15,600
Bronze 8000	2023 — Bronze 8000	2024 — Bronze 9350
Plan is no longer available. Members will move to Bronze 9350.		
Individual/Family Deductible	\$8,000/\$16,000	\$9,350/\$18,700
Individual/Family Maximum Out of Pocket (MOOP)	\$9,000/\$18,000	\$9,350/\$18,700
Coinsurance	50%	0%
Primary Care Office Visit	\$55	\$80
Blue CareOnDemand Powered by MDLIVE	\$28	\$35
Specialist Office Visit	\$110	\$140
Prescription Drug Tiers 1, 3, 4, 5 and 6	Tier 1 and 2: \$25 Tier 3: 50% Tier 4: 50% Tiers 5 and 6: 50%	Tier 1 and 2: \$30 Tier 3: \$135 Tier 4: \$215 Tiers 5 and 6: \$350
Bronze 8800	2023 — Bronze 8800	2024 — Bronze 9350
Plan name changes to Bronze 9350.		
Individual/Family Deductible	\$8,800/\$17,600	\$9,350/\$18,700
Individual/Family Maximum Out of Pocket (MOOP)	\$8,800/\$17,600	\$9,350/\$18,700
Primary Care Office Visit	\$70	\$80
Blue CareOnDemand Powered by MDLIVE	\$65	\$35
Specialist Office Visit	\$130	\$140



# BA Primary Choice Plans

## SILVER PLANS

Silver 3500	2023 — Silver 3500	2024 — Silver 3500
Individual/Family Maximum Out of Pocket (MOOP)	\$7,500/\$15,000	\$8,600/\$17,200
Specialist Office Visit	\$85	\$90
Prescription Drug Tiers 1 and 2	\$30	\$35
Silver 4800 HD	2023 — Silver 4800 HD	2024 — Silver 5100 HD
Plan name changes to Silver 5100 HD.		
Individual/Family Deductible	\$4,800/\$9,600	\$5,100/\$10,200
Individual/Family Maximum Out of Pocket (MOOP)	\$4,800/\$9,600	\$5,100/\$10,200
Silver 5501	2023 — Silver 5501	2024 — Silver 5501
Individual/Family Maximum Out of Pocket (MOOP)	\$9,000/\$18,000	\$9,200/\$18,400
Prescription Drug Tiers 1, 2 and 3	Tiers 1 and 2: \$23 Tier 3: \$50	Tiers 1 and 2: \$25 Tier 3: \$55
Silver 7100	2023 — Silver 7100	2024 — Silver 7100
Individual/Family Maximum Out of Pocket (MOOP)	\$8,700/\$17,400	\$9,000/\$18,000
Specialist Office Visit	\$70	\$75
Prescription Drug Tiers 1 and 2	\$20	\$25
Silver 7800	2023 — Silver 7800	2024 — Silver 8300
Plan name changes to Silver 8300.		
Individual/Family Deductible	\$7,800/\$15,600	\$8,300/\$16,600
Individual/Family Maximum Out of Pocket (MOOP)	\$7,800/\$15,600	\$8,300/\$16,600
Specialist Office Visit	\$80	\$85
Prescription Drug Tiers 1, 2 and 3	Tiers 1 and 2: \$30 Tier 3: \$60	Tiers 1 and 2: \$32 Tier 3: \$65

## BRONZE PLANS

Bronze 4000	2023 — Bronze 4000	2024 — Bronze 4000
Blue CareOnDemand Powered by MDLIVE	\$30	\$0
Bronze 5550	2023 — Bronze 5550	2024 — Bronze 5550
Individual/Family Maximum Out of Pocket (MOOP)	\$9,000/\$18,000	\$9,350/\$18,700
Primary Care Office Visit	\$45	\$55
Blue CareOnDemand Powered by MDLIVE	\$23	\$28
Specialist Office Visit	\$110	\$145
Bronze 6500	2023 — Bronze 6500	2024 — Bronze 6900
Plan name changes to Bronze 6900.		
Individual/Family Deductible	\$6,500/\$13,000	\$6,900/\$13,800
Individual/Family Maximum Out of Pocket (MOOP)	\$8,900/\$17,800	\$9,350/\$18,700
Specialist Office Visit	\$100	\$115
Prescription Drug Tiers 1 and 2	Tiers 1 and 2: \$30	Tiers 1 and 2: \$32
Bronze 7000 HD	2023 — Bronze 7000 HD	2024 — Bronze 7800 HD
Plan name changes to Bronze 7800 HD.		
Individual/Family Deductible	\$7,000/\$14,000	\$7,800/\$15,600
Individual/Family Maximum Out of Pocket (MOOP)	\$7,000/\$14,000	\$7,800/\$15,600



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