

**Connector Staff Recommendations for New Co-pay Structures (Commonwealth Care)**

*These options were discussed at the Feb. 14, 2008 Connector Board meeting; a decision is anticipated at their Feb. 28 meeting.*

Commonwealth Care - Co-pay Options

	Plan Type II		Recommendation	Typical Small Group
	Current	Board presented Options		
PCP	\$5.00	\$10 to \$15	\$10.00	\$15 to \$20
Specialist	\$10.00	\$20 to \$30	\$20.00	\$15 to \$20
ER	\$50.00	\$75 to \$100	\$50.00	\$50 to \$75
Inpt - Hospital	\$50.00	\$0 to \$50	\$50.00	\$250 to \$500
Inpt - Mental Health	\$50.00	\$0 to \$50	\$50.00	\$250 to \$500
Otpt - Surgery	\$50.00	\$0 to \$50	\$50.00	\$150 to \$250
Otpt - Mental Health	\$10.00		\$10.00	\$15
Rx:				
Generic	\$5.00	\$10 to \$15	\$10.00	\$15
Preferred	\$10.00	\$20 to \$30	\$20.00	\$30
Non-preferred	\$30.00	\$45 to \$60	\$40.00	\$50
Rx - Mail:				
Generic	\$10.00	\$20 to \$30	\$20.00	\$30
Preferred	\$20.00	\$40 to \$60	\$40.00	\$60
Non-preferred	\$90.00	\$135 to \$180	\$120.00	\$150
Abortion Services	\$50.00		\$50.00	N/A
Inpt Rehab (100 day max)	\$50.00		\$50.00	N/A
S/T Otpt Rehab (PT/OT/Speech)	\$10.00		\$10.00	N/A
Podiatry (diabetics only)	\$5.00		\$5.00	N/A
Vision (exam/eyeglass 24 mths)	\$10.00		\$10.00	N/A
<u>OOP - Maximums:</u>				
Inpt/Otpt Surgery	\$250.00			
Pharmacy	\$250.00			
DME/Supplies/etc.	N/A			
Total (by special request)	N/A			
All Services (excluding Rx)	N/A	\$250 to \$750	\$750.00	\$1,000 to \$4,000
Rx Only	N/A	\$250	\$500.00	None

**Connector Staff Recommendations for New Co-pay Structures (Commonwealth Care)**

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	Plan Type III		Recommendation	Typical Small Group
	Current	Board presented Options		
PCP	\$10.00	\$15 to \$20	\$15.00	\$15 to \$20
Specialist	\$20.00	\$25 to \$40	\$25.00	\$15 to \$20
ER	\$75.00	\$75 to \$150	\$100.00	\$50 to \$75
Inpt - Hospital	\$250.00	\$250	\$250.00	\$250 to \$500
Inpt - Mental Health	\$250.00	\$250	\$250.00	\$250 to \$500
Otpt - Surgery	\$100.00	\$100	\$125.00	\$150 to \$250
Otpt - Mental Health	\$20.00		\$20.00	\$15
Rx:				
Generic	\$10.00	\$10 to \$20	\$15.00	\$15
Preferred	\$20.00	\$25 to \$40	\$25.00	\$30
Non-preferred	\$40.00	\$50 to \$70	\$50.00	\$50
Rx - Mail:				
Generic	\$20.00	\$20 to \$40	\$30.00	\$30
Preferred	\$40.00	\$50 to \$80	\$50.00	\$60
Non-preferred	\$120.00	\$150 to \$210	\$150.00	\$150
Abortion Services	\$100.00		\$100.00	N/A
Inpt Rehab (100 day max)	\$250.00		\$250.00	N/A
S/T Otpt Rehab (PT/OT/Speech)	\$20.00		\$20.00	N/A
Podiatry (diabetics only)	\$10.00		\$10.00	N/A
Vision (exam/eyeglass 24 mths)	\$20.00		\$20.00	N/A
<u>OOP - Maximums:</u>				
Inpt/Otpt Surgery	\$500.00			
Pharmacy	\$500.00			
DME/Supplies/etc.	\$500.00			
Total (by special request)	\$750.00			
All Services (excluding Rx)	N/A	\$750 to \$1,500	\$1,500	\$1,000 to \$4,000
Rx Only	N/A	None	None	None