How UMP Plus Compares to UMP Classic

Are you eligible to enroll in UMP Plus?

Are you a retiree or COBRA member enrolled in Medicare Part A and Part B?	**If no:** Keep going! **If yes:** You aren't eligible.
Do you live in King, Kitsap, Pierce, Snohomish, or Thurston counties?	**If yes:** You are eligible! **If no:** Sorry, not eligible for 2016.

What Is UMP Plus?

UMP Plus is a new medical plan option offered in 2016 through two integrated networks—Puget Sound High Value Network and UW Medicine Accountable Care Network. It covers the same benefits as UMP Classic, but offers lower costs and additional services that UMP Classic doesn't.

UMP Plus is available to PEBB-eligible employees, Leave Without Pay members, and non-Medicare retirees and COBRA members in five counties in Washington State (above). Like UMP Classic, UMP Plus will be administered by Regence BlueShield (for medical benefits) and Washington State Rx Services (for prescription drug benefits).

You pay less and get more with UMP Plus

Compared with UMP Classic, UMP Plus offers lower costs and more services and conveniences:

With UMP Plus, you'll pay less for:	And get more with:
• Premiums. • Medical deductible (additionally, subscribers who qualified for the $125 SmartHealth wellness incentive for 2016 will have no medical deductible for themselves). • No prescription drug deductible. • Primary care office visits (no cost).	• A coordinated network of primary care, specialty, mental health, and chemical dependency providers committed to using the latest research-based medicine and best practices. • A 24/7 nurse advice line. • One centralized number for scheduling appointments within the network. • Wellness and prevention programs.

What are the benefits of seeing UMP Plus network providers?

When you select either Puget Sound High Value Network or UW Medicine Accountable Care Network, you're choosing a care system to provide services for you and your family. This care system not only provides a collaborative treatment approach, it also lowers your costs. You can coordinate services through your primary care provider in the network, or like UMP Classic, continue to self-refer for care. The choice is yours.

You can receive ancillary services from some providers outside of your UMP Plus network that are paid at the network level. Some examples are mental health providers and facilities, physical therapists, anesthesiologists, labs for diagnostic testing, skilled nursing care facilities, and urgent care facilities. For a complete list, see your network's *UMP Plus 2016 Certificate of Coverage* or go to **www.hca.wa.gov/ump**.

Where can I find more about UMP Plus?

See the next pages to find out whether UMP Plus is right for you and your family. You can also find more information on the UMP website.

UMP Website: www.hca.wa.gov/ump

UMP Customer Service: 1-888-849-3681

Puget Sound High Value Network
www.pugetsoundhighvaluenetwork.org
1-855-776-9503

UW Medicine Accountable Care Network
www.uwmedicine.org/umpplus
1-855-520-9500

UMP Plus offers the same benefits through your choice of the **Puget Sound High Value Network** or the **UW Medicine Accountable Care Network**. You must use providers in your chosen network to receive network-level benefits (except for ancillary providers; see page 1). See the back of this document for details on deductibles and out-of-pocket limits.

Services	UMP Plus Plans: What you pay[1] network[2] providers	UMP Classic: What you pay[1] preferred[2] providers	What you should know
Ambulance	20%	20%	
Chemical Dependency Treatment[3]	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient services must be preauthorized by the plan.
Chiropractic Treatment[3]	15%	15%	Limited to 10 spinal and extremity manipulation visits per calendar year, even when applied to the deductible.
Diagnostic Tests, Laboratory and X-Rays[3]	15%	15%	
Durable Medical Equipment, Supplies and Prostheses[3]	15%	15%	Foot orthotics covered only for prevention of complications associated with diabetes. Some supplies require preauthorization.
Emergency Room	15% after $75 copay	15% after $75 copay	Professional charges are usually billed separately. Inpatient copay[4] waived if admitted directly to a hospital or facility.
Home Health Care[3]	15%	15%	
Hospice Care[3]	0%	0%	Respite care covered at 100% up to 14 visits per lifetime. End-of-life counseling covered in full in conjunction with hospice.
Hospital Services	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient copay[4] Outpatient/Professional: 15%	Preauthorization is required for all elective inpatient admissions.
Mammograms	Screening (Preventive): 0% Diagnostic: 15%	Screening (Preventive): 0% Diagnostic: 15%	Screening mammograms for women age 40 and older; see the *2016 Certificate of Coverage* (COC) for coverage details. See "Breast Health Screening Tests" in the 2016 COC for supplementary tests covered.
Mental Health Treatment[3]	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient services must be preauthorized by the plan.
Naturopathic Physician Services	0% for office visits (no deductible), 15% for related services (subject to deductible)	15% (subject to medical deductible)	**UMP Plus:** You may see Regence network naturopathic physicians as primary care network providers.
Obstetric and Newborn Care	Inpatient copay[4] Outpatient/Professional: 15% *Birth centers and licensed midwives are ancillary providers.*[3]	Inpatient copay[4] Outpatient/Professional: 15%	
Office Visits, Non-Primary Care	15%	15%	
Office Visits, Primary Care	0% for office visits (no deductible) 15% for related services (subject to deductible)	15% (subject to medical deductible)	**UMP Plus only:** Must see primary care providers in your plan's network to receive primary care office visits at no cost. Exception: Regence network naturopaths are considered primary care network providers.
Prescription Drugs	No prescription drug deductible **Value Tier:** 5% **Tier 1:** 10% **Tier 2:** 30% **Tier 3:** 50%	$100 prescription drug deductible for Tier 2 and Tier 3 drugs **Value Tier:** 5% **Tier 1:** 10% **Tier 2:** 30% **Tier 3:** 50%	**Prescription cost-limit (the most you pay) per 30-day supply:** Value Tier $10, Tier 1 $25, Tier 2 $75; Tier 3 $150 for specialty drugs only, no cost limit for non-specialty drugs.
Preventive Care and Immunizations	0%	0%	Preventive care and immunizations are not subject to the deductible. **UMP Plus only:** Must see a provider in your UMP Plus plan's network to be covered in full.
Skilled Nursing Facility[3]	Inpatient copay[4] Professional: 15%	Inpatient copay[4] Professional: 15%	Limited to 150 days per calendar year.
Surgery	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient admissions require preauthorization.
Therapy: Physical, Neurodevelopmental, Occupational and Speech[3]	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient copay[4] Outpatient/Professional: 15%	Inpatient: 60 days maximum per calendar year. Outpatient: 60 visits maximum per calendar year. See "ABA Therapy" in the 2016 Certificate of Coverage for limits on those services.
Tobacco Cessation	0%	0%	No deductible; see limitations to types of drugs and nicotine replacement therapy covered in the 2016 Certificates of Coverage.
Vision Care Exam (Routine)	0%	0%	Not subject to the deductible, one visit per calendar year. $65 annual maximum on contact lens fitting fees; you pay any amount over that.
Vision Hardware, Adult (Over Age 18)	Plan pays up to $150 every two calendar years	Plan pays up to $150 every two calendar years	Not subject to the deductible.
Vision Hardware, Children (Ages 18 and Under)	Eyeglasses (frames and lenses): $0 Contact lenses: 15%	Eyeglasses (frames and lenses): $0 Contact lenses: 15%	Not subject to the deductible. One pair of standard or deluxe frames with lenses per year. No limit for number of contact lenses.

[1]*Percentages shown apply to the allowed amount, which is the fee accepted as payment in full by preferred providers.*

[2]*See the UMP Plus 2016 Certificate of Coverage for a definition of network providers. See the UMP Classic 2016 Certificate of Coverage for definition of preferred providers.*

[3]***UMP Plus:*** *These services may be provided by ancillary providers; see page 1 for a description.*

[4]*Inpatient copay: $200 per day up to $600 per person per year for facility charges. Professional services may be billed separately.*

Comparing the UMP Plus Plans to UMP Classic

	UMP Plus	UMP Classic
Deductible(s)	**Medical:** You pay the first $125 of medical services per person (up to $375 for a family of three or more). You don't pay the medical deductible before receiving certain services; see chart on previous page.	**Medical:** You pay the first $250 of medical services per person (up to $750 for a family of three or more). You don't pay the medical deductible before receiving certain services; see chart on previous page.
	No deductible for prescription drugs.	**Prescription drugs**: You pay the first $100 for Tier 2 and Tier 3 (brand name) drugs. You don't pay any deductible for Value Tier or Tier 1 drugs. The maximum prescription drug deductible for a family of three or more is $300.
Medical out-of-pocket limit	$2,000 per member, $4,000 maximum for a family of two or more	$2,000 per member, $4,000 maximum for a family of two or more
Prescription drug out-of-pocket limit	$2,000 per member, no family maximum	$2,000 per member, no family maximum
Prescription drugs	You pay according to tiers (same tier structure and cost limits as UMP Classic); see previous page for coinsurance amounts.	You pay according to tiers; see previous page for coinsurance amounts.

This material reflects information available at the time of printing.

This is a brief summary of benefits; it is not a certificate of coverage. All services and treatments provided must be medically necessary to receive coverage. Please refer to the applicable UMP Certificate of Coverage for a complete list of benefits, limitations, and exclusions.

Both UMP Plus plans—Puget Sound High Value Network and UW Medicine Accountable Care Network—have the same monthly premiums.

Comparing 2016 monthly premiums for state and higher-education employees

	UMP Plus	UMP Classic
Employee only	$59	$84
Employee + spouse*	$128	$178
Employee + children	$103	$147
Full family	$172	$241

**Or registered domestic partner*

Monthly premiums vary for K-12 and employer group employees; check with your personnel, payroll, or benefits office for information. Premiums for COBRA and Leave Without Pay members can be found at **www.hca.wa.gov/pebb**. *Monthly surcharges may also apply for tobacco use and spouse or registered domestic partner coverage; see* **www.hca.wa.gov/pebb** *for details.*

Comparing 2016 monthly premiums for non-Medicare retirees

	UMP Plus	UMP Classic
Subscriber only	$552.40	$576.78
Subscriber + spouse*	$1,098.77	$1,147.53
Subscriber + children	$962.18	$1,004.84
Full family	$1,508.55	$1,575.59

**Or registered domestic partner*

Monthly surcharges may also apply for tobacco use and spouse or registered domestic partner coverage; see **www.hca.wa.gov/pebb** *for details.*