



Jan. 1 through Dec. 31, 2025

Blue Cross and Blue Shield of Oklahoma offers Blue Balance Funded, an administrative and stop loss coverage suite of services that includes consistent monthly payments for employers.

Blue Cross and Blue Shield of Oklahoma, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

New in 2025

Twin Health Metabolic Health Management

Eligible members have access to a diabetes reversal program that creates a digital representation of their unique metabolism to empower them to improve blood sugar, safely reduce or eliminate medications and reverse type 2 diabetes—all offered as a covered benefit and at no cost.

\$0 Emergency Use Medications

Upon renewal, cost barriers to select acute medications typically used for emergency use or life-saving situations will be removed, which will help improve clinical outcomes, increase member satisfaction and overall benefit experience. Members will have access to the \$0 cost share when using any in-network pharmacy for the following drug categories:

- Severe allergic reactions (e.g., epinephrine auto-injector)
- Hypoglycemia (e.g., glucagon injection kit)
- Opioid overdoses (e.g., naloxone injectible/ nasal spray)
- Nitrates (e.g., nitroglycerin sublingual)

Behavioral Health Enhancements: Mental Health Hub, Increased Access and Crisis Support

Compassionate case managers, utilization management, specialty programs and member and provider support are all part of the Behavioral Health benefits standard with every small group plan. Enhancements designed to increase member access to specialty behavioral health providers, improve the member experience and offer proactive clinical outreach include:

- Mental Health Hub: Digital one-stop-shop for mental health resources, including optional self-assessment to help members navigate recommended solutions and access behavioral health providers treating substance use disorders, pediatric mental illness, eating disorders, obsessive-compulsive disorders and more.
- **Risk Identification and Outreach:** New, predictive analytics model designed to identify members who may be at-risk, and providing clinician outreach with the goal of preventing suicide and self-harm events.
- Mental Health Response Course: Online self-paced training to help members develop the skills to respond to the signs and symptoms of mental illness and substance use.
- Workplace Crisis Intervention: Clinical support should a tragedy affecting an employee occur.

Blue Balance Funded features:

Predictable Monthly Payments¹

Blue Balance Funded's monthly invoice includes the employer cost for claims funding, administrative fees and stop loss premiums. For added convenience, BCBSOK manages all three with an online billing system available through Blue Access for EmployersSM.

Stop Loss Coverage

Stop loss insurance provides protection for covered claims costs resulting from individual and aggregate claims exceeding the predetermined stop loss levels.

Possible Credit

After the yearly settlement, if the actual claims cost is less than the claims funding, groups may be eligible for a credit toward future monthly payments.

Blue Balance Funded provides a wide array of services and resources including:

- Claims adjudication
- Customer service for members
- Access to a network of contracting health care providers
- Pharmacy benefit management
- Virtual Visits by MDLIVE®
- Telemedicine
- The BlueCard[®] program, which provides access to a nationwide network of providers
- Wellbeing Management integrated medical and behavioral health management programs
- Well onTarget[®] wellness tools and resources (including health assessments, self-directed courses and a rewards program that reinforces positive lifestyle changes) to help promote good health
- Blue Insight[™] reporting, an online analysis and reporting system which allows employers to identify claims costs and utilization trends using a wide variety of standard reports and profiles, providing opportunities to manage your benefits
- Employee Assistance Program (EAP), through which members have access to clinical therapy sessions; family, legal and financial counseling; and online guidance resources.

The decision to self-insure is an important one and involves certain responsibilities on the employer's part

To learn if Blue Balance Funded might be right for your groups, talk with your BCBSOK sales executive or account manager. Groups should also consult with their legal and tax advisers.

^{1.} The amount of the monthly payment may fluctuate depending on the number of enrolled employees. It is recalculated each year and is subject to change. Employers are solely responsible for taxes, fees, and obtaining and paying for their own accounting and legal services.

Blue Balance FundedEffective Jan. 1, 2025 Plans are subject to change.																
		Calendar Year Deductibles		Medical and Rx Out-of-Pocket Expense		Coinsurance		Copayment			Pharmac	Pharmacy Benefits				
Plan Name	Plan ID	HSA Compatible	Individual (In/Out)	Family (In/Out)	Individual OPX (In/Out)	Family OPX (In/Out)	Coinsurance (In/Out)	Primary Care/ Virtual Visits Copay	Specialist Office Visit Copay	Urgent Care	Imaging (MRI, CT, & PET)	ER Visit¹	Inpatient ¹ (In/Out)	Outpatient Surgery ¹ (In/Out)	Preferred Pharmacy Network	Non-Preferred Pharmacy Network
Blue Preferred PPO ^s ™																
Blue Preferred PPO A301	AOBPF301	No	\$1,500/\$2,500	\$4,500/\$7,500	\$5,000/\$15,000	\$10,000 /\$30,000	80%/60%	\$30 / \$30	\$50	\$50	DC	\$200	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Preferred PPO A302	AOBPF302	No	\$2,500/\$4,000	\$7,500/\$12,000	\$6,000/\$18,000	\$12,000/\$36,000	80%/60%	\$30 / \$30	\$50	\$50	DC	\$200	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Preferred PPO A303	AOBPF303	No	\$3,000/\$6,000	\$9,000/\$18,000	\$7,000/\$21,000	\$14,000/\$42,000	70%/60%	\$30 / \$30	\$50	\$50	DC	\$300	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Preferred PPO A304	AOBPF304	No	\$5,000/\$7,500	\$10,000/\$22,500	\$6,000/\$18,000	\$12,000/\$36,000	80%/60%	\$30 / \$0	\$50	\$50	DC	\$200	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Preferred PPO A305	AOBPF305	No	\$6,000/\$12,000	\$12,000/\$24,000	\$7,000/\$21,000	\$14,000/\$42,000	50%/50%	\$30 / \$0	\$50	\$50	DC	\$300	\$500	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Preferred PPO A292 ²	AOBPF292	Yes	\$3,500/\$7,000	\$7,000/\$14,000	\$5,000/\$15,000	\$10,000/\$30,000	80%/60%	DC	DC	DC	DC	DC	DC	DC	90%/90%/80%/70%/60%/50%	80%/80%/70%/60%/60%/50%
Blue Preferred PPO A291 ²	AOBPF291	Yes	\$5,000/\$7,500	\$10,000/\$15,000	\$5,000/\$15,000	\$10,000/\$30,000	100%/70%	DC	DC	DC	DC	DC	DC	DC	100%	100%
Blue Advantage PPO ^{si}	M															
Blue Advantage PPO A401	AOBAP401	No	\$500/\$1,000	\$1,500/\$3,000	\$1,250/\$3,750	\$3,750/\$11,250	80%/60%	\$25 / \$25	\$45	\$50	DC	\$300	\$150/\$250	\$100/\$200	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250
Blue Advantage PPO A402	AOBAP402	No	\$1,000/\$1,500	\$3,000/\$4,500	\$3,000/\$9,000	\$9,000/\$27,000	80%/60%	\$20 / \$20	\$20	\$50	DC	\$100	\$750	DC	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250
Blue Advantage PPO A301	AOBAP301	No	\$1,250/\$2,500	\$3,750/\$7,500	\$3,000/\$9,000	\$9,000/\$27,000	70%/60%	\$35 / \$35	\$60	\$50	DC	\$400	\$200/\$300	\$150/\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Advantage PPO A302	AOBAP302	No	\$2,500/\$4,000	\$7,500/\$12,000	\$6,000/\$18,000	\$12,000/\$36,000	80%/60%	\$30 / \$30	\$50	\$50	DC	\$200	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Advantage PPO A304	AOBAP304	No	\$5,000/\$7,500	\$10,000/\$22,500	\$6,000/\$18,000	\$12,000/\$36,000	80%/60%	\$30 / \$0	\$50	\$50	DC	\$200	\$750	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Advantage PPO A305	AOBAP305	No	\$6,000/\$12,000	\$12,000/\$24,000	\$7,000/\$21,000	\$14,000/\$42,000	50%/50%	\$30 / \$0	\$50	\$50	DC	\$300	\$500	\$250	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Advantage PPO A303	AOBAP303	No	\$7,500/\$15,000	\$15,000/\$28,000	\$7,500/\$22,500	\$15,000/\$45,000	100%/70%	DC	DC	DC	DC	DC	DC	DC	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
Blue Advantage PPO A591	AOBAP591	Yes	\$3,300/\$6,600	\$6,600/\$13,200	\$3,300/\$6,600	\$6,600/\$13,200	100%/100%	DC	DC	DC	DC	DC	DC	DC	100%	100%
Blue Advantage PPO A293 ²	AOBAP293	Yes	\$3,500/\$7,000	\$7,000/\$14,000	\$5,000/\$15,000	\$10,000/\$30,000	80%/60%	DC	DC	DC	DC	DC	DC	DC	90%/90%/80%/70%/60%/50%	80%/80%/70%/60%/60%/50%
Blue Advantage PPO A292 ²	AOBAP292	Yes	\$5,000/\$7,500	\$10,000/\$15,000	\$5,000/\$15,000	\$10,000/\$30,000	100%/70%	DC	DC	DC	DC	DC	DC	DC	100%	100%

Notes:

DC = Deductible and Coinsurance.

All benefit designs have an Embedded Deductible. This means that no more than one Individual Deductible will be required to be met by any one individual in a family contract.

A Per Occurrence Deductible applies unless otherwise indicated. Annual Deductible and Coinsurance will apply after the Per Occurrence Deductible.
\$0 HSA Preventive Drug benefit applies only to these specified HSA-compatible benefit designs.

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		Calendar Year Deductibles		Medical and Rx Out-of-Pocket Expense		Coinsurance	Copayment							Pharmacy Benefits		
Plan Name	Plan ID	HSA Compatible	Individual (In/Out)	Family (In/Out)	Individual OPX (In/Out)	Family OPX (In/Out)	Coinsurance (In/Out)	Primary Care/ Virtual Visits Copay	Specialist Office Visit Copay	Urgent Care	Imaging (MRI, CT, & PET)	ER Visit ¹	Inpatient ¹ (In/Out)	Outpatient Surgery¹ (In/Out)	Preferred Pharmacy Network	Non-Preferred Pharmacy Network
Blue Choice PPO SM																
Blue Choice PPO A301	AOBCH301	No	\$1,500/\$4,500	\$4,500/\$10,000	\$5,000/\$15,000	\$10,000/\$30,000	80%/60%	\$20 / \$20	\$40	\$50	DC	\$200	DC/\$300	DC	\$0/\$10/\$50/\$100/\$150/\$250	\$10/\$20/\$70/\$120/\$150/\$250
HSA Blue A291 ²	AOHSA291	Yes	\$5,000/\$10,000	\$10,000/\$20,000	\$5,000/\$15,000	\$10,000/\$30,000	100%/70%	DC	DC	DC	DC	DC	DC	DC	100%	100%
Blue Options [™]																
Blue Options PPO A301	AOOPT301	No	\$500/\$500	\$1,500/\$1,500	\$2,500/\$3,500/ \$7,500	\$7,500/\$10,200/ \$22,500	80%/70%/50%	\$30 / \$30	\$30	\$50	DC	\$100 (Tier 1)	\$250	\$200	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250
Blue Options PPO A302	AOOPT302	No	\$1,000/\$1,000	\$3,000/\$3,000	\$3,000/\$4,000/ \$9,000	\$9,000/\$10,200/ \$27,000	80%/70%/50%	\$30 / \$30	\$30	\$50	DC	\$100 (Tier 1)	\$500	\$200	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250
Blue Options PPO A303	AOOPT303	No	\$2,500/\$2,500	\$7,500/\$7,500	\$5,200/\$5,400/ \$15,600	\$10,000/\$10,200/ \$30,000	80%/70%/50%	\$35 / \$35	\$35	\$50	DC	\$100 (Tier 1)	\$750	\$200	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250
Blue Options HSA A591	AOOPT591	Yes	\$3,300/\$5,000	\$6,600/\$10,000	\$5,000/\$5,700/ \$15,000	\$10,000/\$11,400/ \$30,000	90%/80%/60%	DC	DC	DC	DC	DC (Tier 1)	DC	DC	90%/90%/80%/70%/60%/50%	80%/80%/70%/60%/60%/50%

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2. \$0 HSA Preventive Drug benefit applies only to these specified HSA-compatible benefit designs.

Virtual Visits powered by MDLIVE® may not be available on all plans. Non-emergency medical service in Montana and New Mexico is limited to interactive online video. Non-emergency medical service in Arkansas and Idaho is limited to interactive online video for initial consultation.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Oklahoma and is solely responsible for its operations and for those of its contracted providers.

MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without written permission.

Prime Therapeutics LLC is a separate pharmacy benefit management company contracted by BCBSOK to provide pharmacy benefit management and related other services.

BCBSOK, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics. MyPrime.com is an online resource offered by Prime Therapeutics LLC.

A "preferred" or "participating" pharmacy has a contract with BCBSOK or BCBSOK's pharmacy benefit manager (Prime) to provide pharmacy services at a negotiated rate. The terms "preferred" and "participating" should not be construed as a recommendation, referral or any other statement as to the ability or quality of such pharmacy.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Twin Health is an independent company that has contracted with Blue Cross and Blue Shield of Oklahoma to provide care and disease management for members with coverage through BCBSOK.

BCBSOK makes no endorsement, representations or warranties regarding third-party vendors. Members should contact the vendor directly with questions about the products or services offered by third parties.

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