

Insurance Options:

Vendor	Macori, Inc. (National Union Fire Insurance Company of Pittsburgh, PA)	UnitedHealthcare Student Resources	Academic Health Plans (NM BCBS)	Summit America (Nationwide Life Insurance Company)	GM Southwest
Option 1 Rates	Student: \$1,624 Student/Spouse: \$6,920 Student/Child: \$3,834 Student/Spouse/ Child: \$9,129 Each additional Child: \$2,209	Student: \$2,002 Student/Spouse: \$8,694 Student/Child: \$4,984 Student/Spouse/ Child: \$11,676 Each additional Child: \$2,982	Student: \$1,583.15 Student/Spouse: \$6,350.03 Student/Child: \$3,562.90 Student/Spouse/ Child: \$8,329.41 Each additional Child: \$1,979.39	Student: \$2,117 Student/Spouse: \$9,559 Student/Child: \$4,656 Student/Spouse/ Child: \$12,098 Each additional Child: \$2,539	Student: \$1,758 Student/Spouse: \$4,740 Student/Child: \$3,741 Student/Spouse/ Child: \$7,036 Each additional Child: \$1,983
Option 1 comments	Does not include \$15.00 admin fee	<p>Modifications:</p> <p>1) Plan Maximum: \$500,000 per insured person ppy 2) Deductible is \$100 for preferred providers, \$400 out of network</p> <p>3) Coinsurance is 80% for preferred providers, 60% out of network 4) Out of Pocket Max \$1,250 for pref. prov., \$3,000 out of network 5) Two surgical procedures, same approach, second paid at 50% 6) Injections outside Student Health paid at 60% 7) Max age limit not PPACA compliant 8) Does not include \$15.00 Admin fee 9) Excludes family planning and birth control, sleep disorders 10) Assumes unlimited prescription drug maximum (reduce premium by 4.5% if max \$2,000)</p>	<p>Modifications:</p> <p>BCBSNM will provide a medical plan design that resembles the plan design requested in the RFP, while adhering to standard benefits that can be coded and automatically adjudicated within our claims system.</p>	<p>Prescriptions: \$100,000 benefit per ACA Rates are net of \$15.00 admin fee</p> <p>For student policy: Pre-certification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year Waived all pre-existing condition exclusions.</p>	<p>For student policy: Pre-certification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year Waived all pre-existing condition exclusions.</p>
Option 2 Rates	Student: \$1,218 Student/Spouse: \$5,190 Student/Child: \$2,875 Student/Spouse/ Child: \$6,847 Each additional Child: \$1,657	Student: \$1,609 Student/Spouse: \$6,986 Student/Child: \$4,006 Student/Spouse/ Child: \$9,383 Each additional Child: \$2,397	Student: \$1,472.66 Student/Spouse: \$5,905.52 Student/Child: \$3,313.49 Student/Spouse/ Child: \$7,746.35 Each additional Child: \$1,840.83	Student: \$1,806 Student/Spouse: \$8,139 Student/Child: \$3,971 Student/Spouse/ Child: \$10,303 Each additional Child: \$2,165	Student: \$1,494 Student/Spouse: \$4,029 Student/Child: \$3,180 Student/Spouse/ Child: \$5,981 Each additional Child: \$1,686
Option 2 comments	Does not include \$15.00 admin fee	<p>Modifications:</p> <p>1) Plan Maximum: \$500,000 per insured person ppy 2) Deductible is \$100 for preferred providers, \$400 out of network</p>	<p>Modifications:</p> <p>BCBSNM will provide a medical plan design that resembles the plan design requested in the RFP, while adhering to standard benefits that can be coded and automatically</p>	Rates include a \$15 admin fee	For student policy: Pre-certification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year Waived all pre-existing condition exclusions.

		<p>3) Coinsurance is 80% for preferred providers, 60% out of network</p> <p>4) Out of Pocket Max \$1,250 for pref. prov., \$3,000 out of network</p> <p>5) Two surgical procedures, same approach, second paid at 50%</p> <p>6) Injections outside Student Health paid at 60%</p> <p>7) Max age limit not PPACA compliant</p> <p>8) Does not include \$15.00 Admin fee</p> <p>9) Excludes family planning and birth control, sleep disorders</p> <p>10) Assumes unlimited prescription drug maximum (reduce premium by 4.5% if max \$2,000)</p>	adjudicated within our claims system.			
Option 3 Rates	<p>Student: \$1,953</p> <p>Student/Spouse: \$8,319</p> <p>Student/Child: \$4,609</p> <p>Student/Spouse/ Child: \$10,975</p> <p>Each additional Child: \$2,656</p>	No quote: Unsure of 2014 PPACA legislation	<p>Student: \$1,609.48</p> <p>Student/Spouse: \$6,454.17</p> <p>Student/Child: \$3,621.33</p> <p>Student/Spouse/ Child: \$8,466.02</p> <p>Each additional Child: \$2,011.85</p> <p>Modifications:</p> <p>BCBSNM will provide a medical plan design that resembles the plan design requested in the RFP, while adhering to standard benefits that can be coded and automatically adjudicated within our claims system.</p>	No quote: unsure of final benefit requirement	<p>Student: \$2,110</p> <p>Student/Spouse: \$5,688</p> <p>Student/Child: \$4,490</p> <p>Student/Spouse/ Child: \$8,444</p> <p>Each additional Child: \$2,380</p> <p>For student policy: Precertification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year</p> <p>Waived all pre-existing condition exclusions</p>	
Option 3 comments	Does not include \$15.00 admin fee					
Option 4 Rates	<p>Student: \$1,465</p> <p>Student/Spouse: \$6,239</p> <p>Student/Child: \$3,456</p> <p>Student/Spouse/ Child: \$8,231</p> <p>Each additional Child: \$1,992</p>	No quote: Unsure of 2014 PPACA legislation	<p>Student: \$1,496.82</p> <p>Student/Spouse: \$6,002.38</p> <p>Student/Child: \$3,367.84</p> <p>Student/Spouse/ Child: \$7,873.40</p> <p>Each additional Child: \$1,871.02</p> <p>Modifications:</p> <p>BCBSNM will provide a medical plan design that resembles the plan design requested in the RFP, while adhering to standard benefits that can be coded and automatically adjudicated within our claims system.</p>	No quote: unsure of final benefit requirement	<p>Student: \$1,793</p> <p>Student/Spouse: \$4,835</p> <p>Student/Child: \$3,816</p> <p>Student/Spouse/ Child: \$7,177</p> <p>Each additional Child: \$2,023</p> <p>For student policy: Precertification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year</p> <p>Waived all pre-existing condition exclusions</p>	
Option 4 comments	Does not include \$15.00 admin fee					
Option 5 Rates	<b>High Option (ppaca compliant, no insurance requirement)</b>	<b>High Option:</b> same as Option 1 and 2 above		Student: \$1,823 Student/Spouse: \$8,214	<b>High Option (2M)</b> Student: \$2,110	

	<p>Student: \$1,729 Student/Spouse: \$7,365 Student/Child: \$4,080 Student/Spouse/ Child: \$9,717 Each additional Child: \$2,351</p>	<p><b>Low Option voluntary:</b> Student: \$1,746 Student/Spouse: \$7,579 Student/Child: \$4,246 Student/Spouse/ Child: \$10,179 Each additional Child: \$2,600</p> <p><b>Low Option hard waiver:</b> Student: \$1,403 Student/Spouse: \$6,090 Student/Child: \$3,492 Student/Spouse/ Child: \$8,179 Each additional Child: \$2,089</p> <p><b>Low Option Benefits:</b> \$250,000 max benefit \$250 deductible, \$500 out of network 70% coinsurance in network 50% coinsurance out of network Assumes unlimited prescription drug maximum ( reduce premium by 4.5% if max \$2,000)</p>		<p>Student/Child: \$4,008 Student/Spouse/ Child: \$10,399 Each additional Child: \$2,185</p>	<p>Student/Spouse: \$5,688 Student/Child: \$4,490 Student/Spouse/ Child: \$8,444 Each additional Child: \$2,380</p> <p><b>Low Option (500K)</b> Student: \$1,758 Student/Spouse: \$4,740 Student/Child: \$3,741 Student/Spouse/ Child: \$7,036 Each additional Child: \$1,983</p>
<p>Option 5 comments</p>	<p><b>Non-PPACA compliant, except max \$100,000 Per accident or sickness</b> Student: \$1,240 Student/Spouse: \$5,282 Student/Child: \$2,926 Student/Spouse/ Child: \$6,969 Each additional Child: \$1,686 Does not include \$15.00 admin fee</p>			<p>Same benefits as option 1 except \$100,000 aggregate max ppy</p>	<p>For student policy: Precertification on all inpatient, outpatient and therapies. Referral requirement on all accidents and illnesses per year Waived all pre-existing condition exclusions</p>
<p>Option 6 Rates</p>	<p>Dental: \$353 annual Major medical \$100,000 to \$500,000: \$250 Vision discount plan: \$12</p>	<p>Dental: \$411.84 annual Vision discount plan: \$155.04</p>	<p>Dental: \$107.04 annual</p>	<p>Vision: \$7 (benefit max \$150 per year</p>	<p>Dental: \$225.30 Major Med (250K): \$436 Vision: \$65</p>
<p>Option 6 comments</p>	<p>Does not include \$15.00 admin fee</p>				

- Option 1: Specs in RFP, PPACA compliant for 2012, voluntary
- Option 2: Specs in RFP, PPACA compliant for 2012, hard waiver requirement
- Option 3: Specs in RFP, PPACA compliant for 2014, voluntary
- Option 4: Specs in RFP, PPACA compliant for 2014, hard waiver requirement
- Option 5: Low and high benefit plans, PPACA compliant for 2012
- Option 6: Supplemental quote for vision, dental care