Medical plan options administered by Blue Cross and Blue Shield of Texas (BCBSTX)

Key Features	Blue Premier HMO	Blue Essentials HMO	Blue Choice PPO HDHP
PCP required	Yes	Yes	No
Specialist referral required	Yes ¹	Yes ¹	No
Cost-sharing for covered health care services and prescription drugs	Copays, deductibles, and coinsurance	Copays, deductibles, and coinsurance	Deductibles and coinsurance The full cost of medical care, supplies, and prescriptions is paid by the member until the deductible is met.
Plan year	September 1 – August 31	September 1 – August 31	January 1 – December 31
Network hospitals ²	Memorial Hermann, St. Luke's Health	HCA Houston Healthcare, Houston Methodist, MD Anderson, Memorial Hermann, St. Luke's Health, Texas Children's Hospital	HCA Houston Healthcare, Houston Methodist, MD Anderson, Memorial Hermann, St. Luke's Health, Texas Children's Hospital
Kelsey-Seybold Clinic in network ²	No	Yes	Yes
Geographic service area	Greater Houston area counties: Chambers, Fort Bend, Harris, Liberty, and Montgomery Other Texas counties: Atascosa, Bandera, Bell, Bexar, Collin, Comal, Dallas, Denton, Ellis, Guadalupe, Hardin, Hays, Jefferson, Johnson, Kendall, Orange, Rockwall, Tarrant, Travis, and Williamson	All Texas counties	Nationwide
Out-of-network coverage	No ³	No ³	Yes
Health Savings Account (HSA) eligible ⁴	No	No	Yes

¹ Exceptions to the referral requirement are emergency care, urgent care, gynecological visits, obstetrical visits, annual screening mammograms, mental health practitioner visits, and routine eye exams.

Note for children living outside the state of Texas

If you enroll your eligible dependent child in the Blue Premier HMO or Blue Essentials HMO plan and he/she attends a school or resides with a custodial parent outside the state of Texas, then your child may qualify for the Away From Home Care® (AFHC) Program. For more details, or to enroll, call Blue Cross and Blue Shield of Texas Customer Service at 1-877-299-2377. Be sure to list each child's full and correct address in the dependent section of FFenroll (the enrollment site).

Please note that at the time of publication, the AFHC Program is not available in the following states: Alabama, Alaska, Idaho, Iowa, Kansas, Michigan, Mississippi, Montana, Nebraska, North Dakota, Oregon, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, Virgin Islands, Washington, West Virginia, and Wyoming.

² Provider network affiliations are subject to change at any time.

³ Services and supplies received outside the network are not covered unless received in a true medical emergency.

⁴ An HSA permits you to set money aside in a separate account on a tax-free basis to pay for unreimbursed medical costs. Account funds are available as deposits are received. An HSA is similar to a health Flexible Spending Account (FSA) except that the balance in an HSA can be carried over from year to year. Maximum HSA contribution amounts for 2023 are \$3,850 for individual coverage and \$7,750 for family coverage. If you or your spouse contributes to an HSA, you are not eligible to participate in a health FSA.