



Community Blue vs. Simply Blue

	Community Blue PPO	Simply Blue PPO
Emergency room copay	Copay waived for accidental injury or if admitted to the hospital	Copay waived if admitted to the hospital
Physical, speech and occupational therapy	60 visits per calendar year	30 visits per calendar year
Chiropractic spinal manipulation	24 visits per covered member per calendar year	12 visits per covered member per calendar year
Referrals	With a referral, out-of-network provider services are applicable to in-network out-of-pocket costs	All out-of-network provider services are applicable to out-of-network cost sharing regardless of a referral
Behavioral health services	Deductible may be waived for: <ul style="list-style-type: none"> Covered services performed at an in-network provider's office Covered mental health and substance use disorder services that are equivalent to an office visit and performed at an in-network provider's office 	Deductible and coinsurance apply