

COUPE

BCBS Coupe PPO

Guide – Non-Financing

RRD, Plan Year: 2026



RRD BENEFITS
HEALTH | WEALTH | LIFE

The health plan you'll be **happy** to see

Take control of your healthcare journey with a plan that gives you access to top-quality providers and offers price certainty for every medical service. With Coupe, you're in the driver's seat.

Clear and supportive healthcare

Price certainty

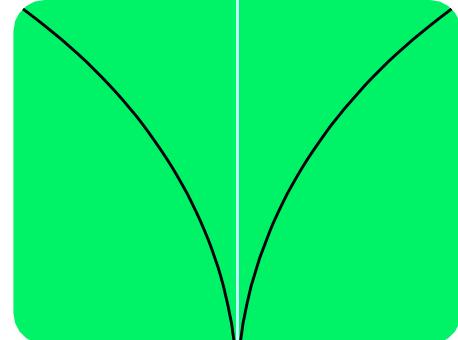
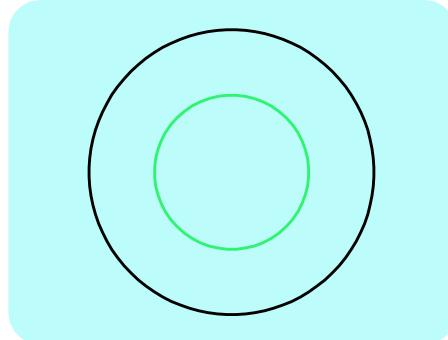
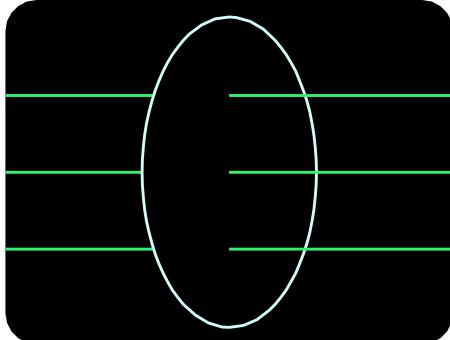
Know the price of every medical service ahead of time. Focus on your health, without worrying about add-ons or unexpected bills.

Great care and value

Find top-quality providers offering all services at fixed, predetermined costs — from routine checkups to advanced procedures. High-quality providers cost you less.

Simple user experience

Access your health plan from anywhere with the straightforward and intuitive Coupe member portal.



Health Valet service

Work alongside a Coupe Health Valet to confidently navigate your healthcare journey. Health Valets can assist with:

- + Finding a high-quality provider
- + Answering questions about billing or coverage
- + Helping you understand different care options and more



Contact the Health Valet team:
1-800-882-5158
healthvalet@coupehealth.com

Monday - Friday
8:00 a.m. - 8:00 p.m. central

Price certainty

Going for care is easygoing when you know the cost ahead of time.

What to expect:

1.

Look up a service and know exactly what you'll owe.



2.

Go to the doctor and receive great care.



3.

Receive an Explanation of Benefits.



Use the Coupe member portal to find the best provider based on cost and quality rankings.

See your provider and feel confident knowing their quality of care.

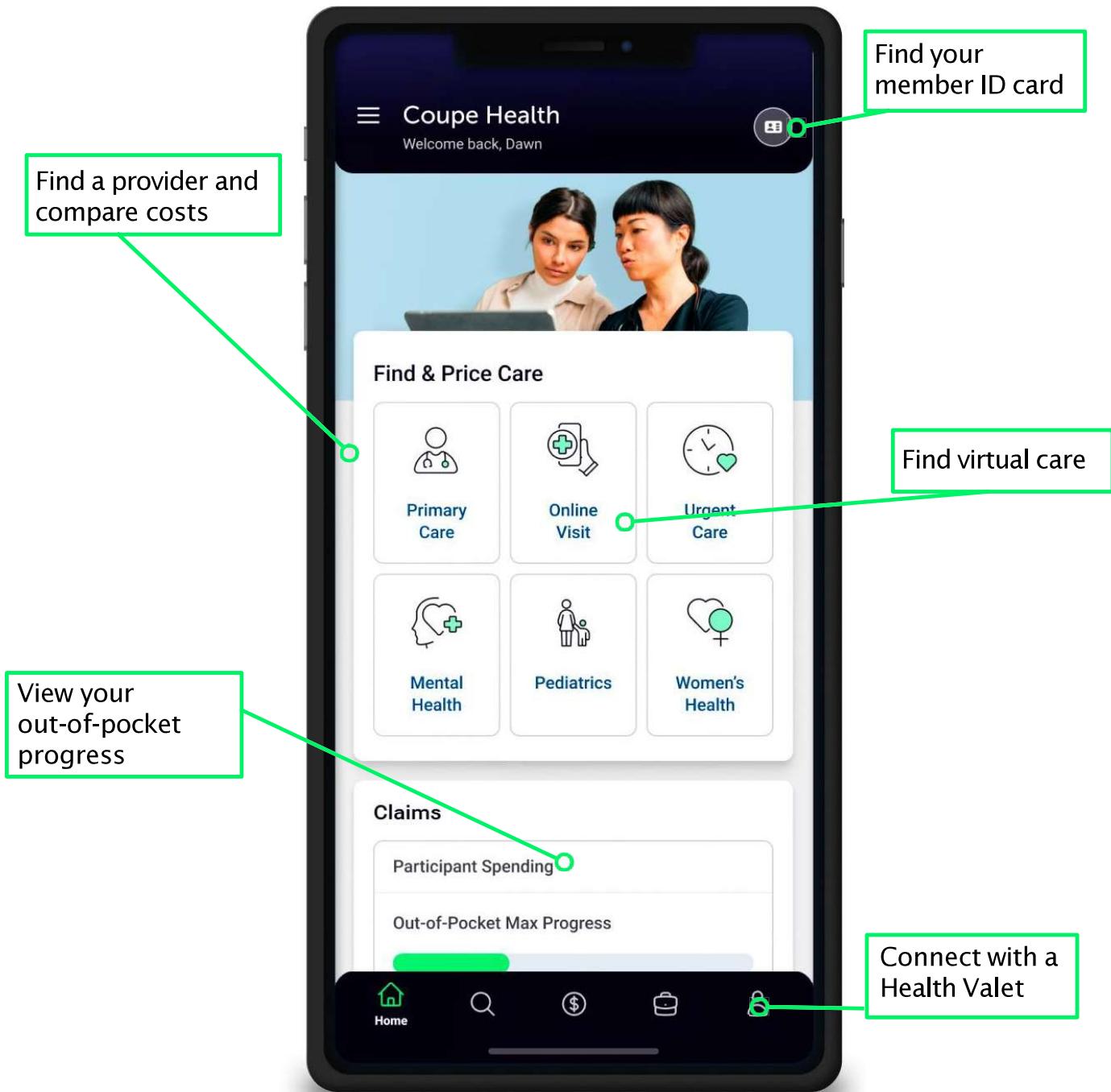
Pay the exact cost you saw in your member portal.



For questions, contact the Health Valet team or visit <https://employers.coupehealth.com/RRD>.

Member portal

Explore the member portal anytime from your mobile app or desktop. It's your one-stop hub for all your benefit information.



Quality you can trust

Coupe is designed to help you find **high-quality**, low-cost providers so you can prioritize your health and your bank account.

With Coupe, providers are categorized into three copay rankings based on the following criteria:

-  **Tier 1 provider**
-  **Tier 2 provider**
-  **Tier 3 provider**

Quality

Providers renowned for their best-in-class training, certifications, and commitment to delivering excellent care outcomes

Appropriateness

Providers who deliver the appropriate level of care, eliminating unnecessary or wasteful care

Efficiency

Providers who deliver the best results for their patients in a cost-efficient manner

Provider Ranking Legend

 Meets all standards above

 Meets most standards above

 Meets some standards above



For more details on how we rank providers, contact the Health Valet team or visit <https://employers.coupehealth.com/RRD>.

Starting January 1st, 2026, it is required to contact OnelImaging for non-emergency MRIs and CTs. Use OnelImaging to save costs on other medical imaging (i.e. x-rays, ultrasounds, mammograms, etc.). Please call 833-619-0837 or email help@oneimaging.com for assistance.

RR Donnelley Copay Plan Design

Effective Date: January 1, 2026

Deductible – Individual	\$0
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Deductible – Family	\$0
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Out-of-Pocket Maximums*	
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Individual	\$8,000
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Family	\$16,000
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Service Description	Coupe Health Provider Rankings			
	✓ Tier 1	⊖ Tier 2	❗ Tier 3	Out-of-Network**
Primary Care Office Visit	\$30	\$60	\$145	\$175
Specialist Office Visit	\$75	\$150	\$325	\$390
Advanced Imaging MRI, MRA, CAT & PET Scans	\$400	\$535	\$910	\$1,090
Routine Diagnostic Labs	\$50	\$100	\$150	\$350
Diagnostic Radiology	\$205	\$270	\$455	\$545
Diagnostic Labs	\$205	\$270	\$455	\$545
Urgent Care			\$150	
Outpatient Surgery	\$1,500	\$1,990	\$3,365	\$4,040
Emergency Room / Emergency Services			\$1,200	
Ambulance			\$1,200	
Outpatient Therapies (PT, OT, ST)	\$50	\$100	\$150	\$250
Inpatient Hospital Stay	\$4,400	\$5,800	\$8,000	\$11,000
Home Health Care	\$115	\$155	\$260	\$315
Hospice	\$460	\$615	\$1,035	\$1,245
Skilled Nursing Facility	\$4,400	\$4,895	\$8,000	\$10,560
Durable Medical Equipment	\$230	\$310	\$520	\$625

Prescriptions	Retail	Mail Order
Tier 1 – Generic	25% coinsurance after ded; \$10-\$45	25% coinsurance after ded; \$25-\$115
Tier 2 – Preferred	40% coinsurance after ded; \$40-\$100	40% coinsurance after ded; \$100-\$250
Tier 3 – Non-Preferred	50% coinsurance after ded; \$75-150	50% coinsurance after ded; \$185-\$375
Tier 4 – Specialty (mail order only)	If covered by PrudentRx – 30% coinsurance (no deductible) If not covered by PrudentRx - \$210 (no deductible)	

*Out-of-Network Benefits are not subject to the Out-of-Pocket Maximum

**The calendar year out-of-pocket maximum applies on a per member per calendar year basis, subject to the family calendar year out-of-pocket maximum amount. Once a member meets their individual calendar year out-of-pocket maximum, affected benefits for that member will pay at 100% of the allowed amount for the remainder of the calendar year.

Find a better way to **healthcare**

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For questions regarding provider information, visit
your company's microsite or reach out to your
Health Valet.

[Learn More](#)