



BlueCross BlueShield
of Alabama



State Employees'
Health Insurance Plan

Subscriber Name

JUDY HAYES

Contract Number

EIB901445687

In-Ntwk Ded (Ind/Fam): \$300 / *

Out-of-Ntwk Ded (Ind/Fam): \$300 / *

In-Ntwk OOP (Ind/Fam): \$9,450 / \$18,900

Out-of-Ntwk OOP (Ind/Fam): NA / NA

Group Number **13000**

Effective Date **01-01-2024**

HEALTH

PAC

