CALIFORNIA'S VALUED TRUST BLUE SHIELD BRONZE HMO PLAN

October 1, 2018 - September 30, 2019

BENEFIT	BLUE SHIELD BRONZE HMO PLAN
Calendar Year Deductible	Individual: \$ 2,000
Coinsurance	Paid at 100%*
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays)	Individual: \$5,000 Family: \$10,000
Doctor Visits (Primary Care Physician)	\$45 Copay
Doctor Visits (Specialty Physician)	\$50 Copay Access+ Specialist optionΔ
Preventive Care / Immunizations	Paid at 100%*
Outpatient Diagnostic Tests / Imaging	Paid at 100%*
Radiation Therapy, Chemotherapy	Paid at 100%*
Durable Medical Equipment	Paid at 50%*
Ambulance – Ground / Air	\$150 Copay
Physical Therapy	\$45 Per visit
Chiropractic***	\$10 Copay limited up to 30 visits per calendar year (Prior authorization not required)
Acupuncture	Not Covered
Outpatient Surgery	Paid at 70% after Facility Deductible is met for Ambulatory Surgical Center and Out-Patient Hospital
Hospital Inpatient	Paid at 70% for facility and skilled nursing services (semi-private room), after facility deductible is met; Paid at 100%* for Inpatient Physician Services
Hospital Emergency Room	\$250 Copay (Copay waived if admitted as in-patient)
Urgent Care	\$45 Copay
Home Health Care	\$45 Per Visit (limited to 100 visits per calendar year)
Telehealth	For non-emergency care, call Teladoc 24/7 at 1-800-Teladoc(835-2362) - \$5 Copay
Employee Assistance Program (EAP) through Beacon Health Options ~	Paid at 100%* - Visit www.achievesolutions.net/cvt or call 1-877-397-1032 to access benefit
Prescription Drugs	Retail Mail Order \$15 Tier 1 \$30 Tier 1 \$30 Tier 2 \$60 Tier 2 \$45 Tier 3 \$90 Tier 3
	Tier 4 Paid at 80%* (Up to \$100 copayment maximum per prescription)

^{*} For Covered Expenses Only

Δ To use the Access+ Specialist option, a member must select a primary care personal physician who is affiliated with a medical group or IPA that is an Access+ provider group that offers the Access+ Specialist feature.

This summary is for comparison purposes only. Please refer to the actual benefit booklet for complete benefits at www.cvtrust.org/plan-documents

^{***} Chiropractic benefits are offered through ASH.

[~] EAP – Up to 6 counseling sessions per covered member, per benefit year (max 2 episodes / courses of treatment).