

CALIFORNIA'S VALUED TRUST
BLUE SHIELD BRONZE HMO PLAN
October 1, 2019 – September 30, 2020

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 – \$45 Copay Specialty – \$45 Copay with PCP referral; \$50 Copay Access+Specialist optionΔ	
Preventive Care / Immunizations	Paid at 100%*	
Outpatient Diagnostic Tests	Paid at 100%*	
Outpatient Imaging	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 \$15 Tier 1 \$30 Tier 2 \$45 Tier 3	Mail Order \$30 Tier 1 \$60 Tier 2 \$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.

*** Chiropractic benefits are offered through ASH.

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

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