

**CALIFORNIA'S VALUED TRUST**  
**PPO HIGH DEDUCTIBLE HEALTH PLANS (HDHP) with Blue Shield of California, PhysMetrics and CVS/caremark**  
**January 1, 2021 – September 30, 2021**

CVT PARTNER	BENEFIT	HDHP 1	HDHP 2	HDHP 3
<b>Blue Shield of California</b> Network, utilization management and medical claims administration	<b>Calendar Year Deductible</b>	Individual: \$1,400 Family: \$2,800 (No individual limit applies to family)	Individual: \$2,000 Family: \$4,000 (No individual limit applies to family)	Individual: \$1,500 Family: \$3,000 (No individual limit applies to family)
	<b>Coinsurance</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	<b>Calendar Year Out of Pocket Maximum</b> (includes medical/pharmacy deductible, coinsurance, and copays)	Individual: \$4,250 Family: \$8,500 Family = Employee with 1 or more covered dependents. No one individual will pay more than \$6,900.	Individual: \$5,250 Family: \$10,500 Family = Employee with 1 or more covered dependents. No one individual will pay more than \$6,900.	Individual: \$6,250 Family: \$12,500 Family = Employee with 1 or more covered dependents. No one individual will pay more than \$6,900.
	<b>Doctor Visits</b>	Primary Care - Paid at 90%* after deductible is met Specialty - Paid at 90%* after deductible is met	Primary Care - Paid at 80%* after deductible is met Specialty - Paid at 80%* after deductible is met	Primary Care - Paid at 60%* after deductible is met Specialty - Paid at 60%* after deductible is met
	<b>Preventive Care / Immunizations</b>	Paid at 100%*	Paid at 100%*	Paid at 100%*
	<b>Outpatient Laboratory</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	<b>Outpatient Radiology</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	<b>Durable Medical Equipment</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	<b>Ambulance – Ground / Air</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	<b>Outpatient Surgery</b>	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
<b>Hospital Inpatient</b>	Paid at 90%* after deductible is met; Unlimited days, semi-private room	Paid at 80%* after deductible is met; Unlimited days, semi-private room	Paid at 60%* after deductible is met; Unlimited days, semi-private room	

Page 2		HDHP 1	HDHP 2	HDHP 3
Blue Shield of California Network, utilization management and medical claims administration	Hospital Emergency Room	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	Urgent Care	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	Home Health Care	Paid at 90%* after deductible is met Limited to 100 visits per calendar year	Paid at 80%* after deductible is met Limited to 100 visits per calendar year	Paid at 60%* after deductible is met Limited to 100 visits per calendar year
PhysMetrics Network, utilization management and claims administration	Physical Therapy **	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	Chiropractic**	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met
	Acupuncture	Paid at 90%* after deductible is met Maximum of 12 visits per calendar year	Paid at 80%* after deductible is met Maximum of 12 visits per calendar year	Paid at 60%* after deductible is met Maximum of 12 visits per calendar year
Value Added Benefits	Telehealth by MDLIVE	Paid at 90%* after deductible is met. Call 1-888-632-2738 or visit <a href="http://www.mdlive.com/CVT">www.mdlive.com/CVT</a> for non-emergency medical and dermatology conditions and Behavioral Health.	Paid at 80%* after deductible is met. Call 1-888-632-2738 or visit <a href="http://www.mdlive.com/CVT">www.mdlive.com/CVT</a> for non-emergency medical and dermatology conditions and Behavioral Health.	Paid at 60%* after deductible is met. Call 1-888-632-2738 or visit <a href="http://www.mdlive.com/CVT">www.mdlive.com/CVT</a> for non-emergency medical and dermatology conditions and Behavioral Health.
	Consumer Medical – Your Medical Ally	Expert medical guidance offered at no cost, for any condition, with support from our team of nurses, physicians and other healthcare professionals. Call 1-888-361-3944 or visit <a href="http://www.myconsumermedical.com">www.myconsumermedical.com</a>	Expert medical guidance offered at no cost, for any condition, with support from our team of nurses, physicians and other healthcare professionals. Call 1-888-361-3944 or visit <a href="http://www.myconsumermedical.com">www.myconsumermedical.com</a>	Expert medical guidance offered at no cost, for any condition, with support from our team of nurses, physicians and other healthcare professionals. Call 1-888-361-3944 or visit <a href="http://www.myconsumermedical.com">www.myconsumermedical.com</a>
CVS/caremark Network and utilization management	Prescription Drugs	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met	Paid at 60%* after deductible is met

\*For Covered Expenses Only: When using Non-PPO & Other Health Care Providers, members are responsible for any difference between the covered expense and actual charges, as well as any deductible & percentage copay. All percentages are based on payments to preferred hospitals, physicians and other network providers.

\*\* Non-Par Providers limited to a combined maximum of 13 visits per year.

This summary is for comparison purposes only. Please refer to the actual benefit booklet for complete benefits [www.cvstrust.org/plan-documents](http://www.cvstrust.org/plan-documents)