

## CHINO VALLEY UNIFIED SCHOOL DISTRICT - HMO PLAN 3A - CERTIFICATED/MANAGEMENT

BENEFITS		Access + HMO Plan 3A	Trio HMO Plan 3A
<b>Annual Deductible (per calendar year):</b>			
<b>Individual / Family</b>		None	None
<b>Maximum Out of Pocket (per calendar year):</b>			
<b>Individual / Family</b>		\$500/\$1,500	\$500/\$1,500
<b>Professional Services</b>			
<b>Office Visit Copay/Specialist</b>		\$20/\$20 visit	\$20/\$20 visit
<b>Specialist (Self-Referral in Medical Group)</b>		\$25/visit	\$25/visit
<b>Teladoc Visit Copay</b>		\$5 Copay	No copay
<b>Urgent Care Copay</b>		\$20/visit	\$20/visit
<b>Preventative Care Copay</b>		No copay	No copay
<b>Hospital Medical Services</b>			
<b>Physician Services</b>		No copay	No copay
<b>Hospital Facility</b>		No copay	No copay
<b>Outpatient Services</b>			
<b>Outpatient Surgery Facility</b>		No copay	No copay
<b>Lab and X-Ray</b>		No copay	No copay
<b>Advanced Imaging (MRI, CT, PET)</b>		No copay	No copay
<b>Chiropractic and Acupuncture (30 visits per year combined)</b>		\$10 Copay	\$10 Copay
<b>Durable Medical Equipment</b>		No copay	No copay
<b>Emergency Services Copay</b>		\$50/visit	\$50/visit
<b>Ambulance Services Copay</b>		No copay	No copay
<b>Mental Health and Substance Abuse</b>			
<b>Inpatient (Physician visit)</b>		No copay	No copay
<b>Inpatient (Facility-based care)</b>		No copay	No copay
<b>Outpatient (Physician visit)</b>		\$20/visit	\$20/visit
<b>Outpatient (Facility-based care)</b>		No copay	No copay
<b>Pharmacy Benefits</b>			
<b>Tier 1 (30 Day)</b>		\$0 Copay	Level A - \$0 Copay Level B - \$0 Copay
<b>Tier 2 (30 Day)</b>		\$30 Copay	Level A - \$20 Copay Level B - \$30 Copay
<b>Tier 3 (30 Day)</b>		\$60 Copay	Covered with Prior Authorization
<b>Specialty (30 Day)</b>		\$60 Copay	\$30 Copay
<b>Mail Order (90 Day)</b>		2x Retail	2x Retail

For Summary Illustration and Comparison Purposes Only. Please refer to each company's plan documents to verify eligibility, benefits and conditions for coverage. This summary illustration and comparison is NOT to be relied upon, and is NOT binding as to the Company's benefits.

### TRIO - Value-Added Benefits

**Lower Premiums:** The Trio plan will cost you less than the Access+ plan because Trio network providers team up to coordinate your care and reduce your costs

**Quality Network of Local Providers:** Trio HMO includes providers in a specially selected network who work together to ensure all aspects of your care are connected and efficient.

**Teledoc:** \$0 copay for Teledoc consultation

**Enhanced Concierge Service:** Connect to a team of registered nurses, pharmacists, health coaches and customer service representatives.

**LifeSpring Meal Delivery Program:** Chef-inspired meals right to a member's door, at no extra cost to qualified patients experiencing a serious illness.

**Call the Car Service:** Non-emergency medical transportation, at no extra cost for qualified patients illness.

**Value-Based Tier Drugs:** \$0 copay on value-based tier drugs at any pharmacy. Value-Based Tier Drugs are select generic and brand-name drugs that are FDA-approved for high blood pressure, high cholesterol, diabetes, and asthma.

**Rx Spectrum:** \$0 copay on most generic medications and discounts on most brand name medications at Level A pharmacies, Level A pharmacies include:

**CVS Pharmacy**  
**CVS Pharmacy in Target Stores**  
**Costco**  
**Safeway**  
**Vons**

Scan/Click the QR Code for additional information regarding Blue Shield Benefits, Programs, and Services

