



**Health Plan Choices:**

EPO Plan

PPO \$aver and Super \$aver



Out of State

Effective: January 01, 2023



# We want to help you better understand your health plan options.

Below is a high level overview of the health plans offered through Blue Shield of California. See the following pages of this brochure for more details on each of these plans.

## Your plan choices

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### **EPO Plan**

- » Copayments for most covered services
- » Access to specialists with no referrals needed

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### **PPO Saver and Super Saver**

- » Freedom to see network or non-network doctors
  - » No specialist referrals needed
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# EPO Plan highlights

For plan details, visit [www.blueshieldca.com/mercury](http://www.blueshieldca.com/mercury).

With the Exclusive Provider Organization (EPO) plan, you'll choose from PPO physicians and hospitals. Except for emergencies, you are not covered if you get medical treatment by non-network providers.

## Plan features

**Care away from home** – You are covered for care across the United States and around the world through the BlueCard® and Blue Shield Global Core programs.

**Chiropractic and acupuncture services** – Visit any chiropractor or acupuncturist in the American Specialty Health Plans of California, Inc. (ASH) provider network.

**Emergency care** – You're covered for emergency care around the world regardless of whether the provider is in your plan's PPO network.

**Mental health and substance use disorder care** – You have access to inpatient and outpatient care for issues such as depression, alcohol/substance use disorder and mental illness. You can access these services through Blue Shield's mental health service administrator (MHSA) provider network and non-network providers.

**Preventive care** – You have access to services defined as routine preventive care. You do not have to pay a copayment or meet the plan's deductible for these services. Visit [blueshieldca.com/preventive](http://blueshieldca.com/preventive) to learn more.

**Urgent care** – For non-emergencies, you can receive care at an urgent care center. Your cost will usually be lower than the cost for a hospital emergency room visit.

**Teladoc** – You have access to board-certified doctors and licensed mental health professionals with Teladoc's phone and online video appointments.

## Find your doctor

To find providers within California, go to [www.blueshieldca.com/find-a-provider](#) and select the type of provider you need. Enter your location, then click *Continue*.

To find providers outside of California go to [provider.bcbs.com](http://provider.bcbs.com) and enter MIX. Search for the type of provider you need.

## Pharmacy benefits

Visit [blueshieldca.com/pharmacy](http://blueshieldca.com/pharmacy) to review our drug formularies and pharmacy network options. Our Blue Shield drug formularies list preferred brand-name and generic drugs. Generic drugs usually cost less than brand-name drugs. If you take medications for chronic conditions, you can fill up to a 90-day supply through our mail service pharmacy. Shipping is free, and you may save on your copay.

# PPO \$aver and Super \$aver highlights

With the PPO \$aver and Super \$aver, you can see any doctor you choose for most services. You can also self-refer to specialists. You will usually pay less for services that are provided by PPO network providers.

## Plan features

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**Chiropractic and acupuncture services** – Visit any chiropractor or acupuncturist in the American Specialty Health Plans of California, Inc. (ASH) provider network.

**Emergency care** – You're covered for emergency care around the world regardless of whether the provider is in your plan's PPO network.

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# Programs and services

The following programs and services are offered with the plan(s) described in this document.

**LifeReferrals 24/7<sup>SM</sup>** – Experienced professionals are ready to help you with personal, family and work issues at any time.

**NurseHelp 24/7<sup>SM</sup>** – Registered nurses are available to answer your health questions at any time.

**Maternity Program** – This program is designed to give you and your partner digital and virtual support for your pregnancy and postpartum needs.

**Shield Advocate** – Get support managing your health needs for a wide range of conditions from a team specially trained on the specific health benefits and programs available to you. This team can provide health counseling, answer your medical questions, help you resolve issues and more.

**Wellness discount programs** – Get help saving money and living healthier with a wide range of discount programs\* including fitness club memberships; acupuncture, chiropractic services and therapeutic massage; and eye exams, frames, contact lenses and LASIK surgery.

**Wellvolution<sup>®</sup>** – Achieve your health goals with Wellvolution, our digital platform for health and well-being. Wellvolution offers over 50 tested apps and programs to help you exercise more, eat healthier, reduce stress and more. Two popular mental health apps, Headspace and Ginger, are now available.

LifeReferrals 24/7 is a service mark of Blue Shield of California.

NurseHelp 24/7 is a service mark of Blue Shield of California.

\* These discount program services are not a covered benefit of your Blue Shield of California, Blue Shield of California Life & Health Insurance Company or self-insured health plan, and none of the terms or conditions of the Blue Shield, Blue Shield Life or self-insured health plan apply.

The networks of practitioners and facilities in the discount programs are managed by external program administrators, including any screening and credentialing of providers. Blue Shield does not review the services provided by discount program providers for medical necessity or efficacy, nor does Blue Shield make any recommendations, presentations, claims or guarantees regarding the practitioners, their availability, fees, services or products.

Some services offered through the discount program may already be included as part of the Blue Shield plan covered benefits. Members or self-insured plan participants should access those covered services prior to using the discount program.

Members or self-insured plan participants who are not satisfied with products or services received from the discount program may use the grievance process described in their *Evidence of Coverage, Disclosure Form, Evidence of Coverage and Disclosure Form, Benefit Booklet or Certificate of Insurance/Policy*. Blue Shield reserves the right to terminate this program at any time without notice.

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# How to choose the health plan that's right for you

## Questions to consider

Answering the questions below can help you choose the right plan for you and your family.

	Plan A	Plan B
<p>Plan names →</p>		
<p><b>Which doctors can you see?</b></p>		
<p>Are the doctors and other providers you use in the health plan's network?</p>		
<p>Does the plan allow you to see doctors outside the network?</p>		
<p>Does the plan require a referral from a PCP to see a specialist?</p>		
<p><b>Does the plan cover the following?</b></p>		
<p>The prescription medication(s) you use</p>		
<p>Special services or programs for chronic conditions such as cancer, asthma, or diabetes</p>		
<p>The costs for delivering a baby</p>		
<p>Mental health and/or substance abuse services</p>		
<p>Alternative medical therapies such as chiropractic and acupuncture services</p>		
<p>Any specific services or treatments you need</p>		
<p>Care away from home if you or your family members live outside of California (for college or work)</p>		



# Compare health plan costs

Enter the deductible, copayment, or coinsurance amounts for the plans you want to compare. List the amounts for the benefits you'll use the most.

Also, check the plan's website to make sure the prescriptions you take are in the plan's formulary. If the plan offers a mail service pharmacy, you may be able to save money on maintenance medications.

	Plan A	Plan B
Plan names →		
Type of plan (HMO, PPO, POS, etc.)		
Premiums (the amount that comes out of your paycheck biweekly/monthly, etc.)		
<b>Medical benefits</b>		
Annual out-of-pocket maximum or copayment maximum		
Annual deductible		
Physician office visits		
Specialist office visits		
Outpatient X-ray, pathology, lab work		
Emergency room services		
Outpatient surgery performed by an ambulatory surgery center		
Outpatient surgery performed in a hospital		
Inpatient non-emergency facility services		
Pregnancy and maternity care benefits		
Family planning and infertility benefits		
Chiropractic and/or acupuncture services		
Rehabilitation benefits (physical, occupational and respiratory therapy)		
Mental health services		
Other:		
<b>Pharmacy benefits</b>		
Enter the prescriptions you regularly refill and compare the costs from the plan's summary of benefits.		
Annual deductible		
Drug #1:		
Drug #2:		
Drug #3:		



