

CHOOSING THE RIGHT MEDICAL PLAN FOR YOU AND YOUR FAMILY

We have tools to help you choose the right plan for you. The chart below gives you a quick overview of the plans.

On the At Your Service Open Enrollment website you'll also find:

Medical Plan Chooser—An interactive tool that helps you find the best medical plan for you based on your personal profile and preferences.

Tips for choosing a medical plan that's right for you.

Links to each medical plan's website with information about how the plan works; doctors, hospitals and specialists in the plan; and much more.

UC MEDICAL PLANS	What you generally pay for...			BEST FIT FOR PEOPLE WHO:
	MONTHLY PAYCHECK DEDUCTION	COST FOR SERVICES	FOR PRESCRIPTION DRUGS GENERIC/BRAND/NON-FORMULARY	
HEALTH NET BLUE & GOLD HMO Must use custom network of providers, except in emergencies	\$\$	\$ No deductible; you pay a copay for office visits and hospital stays; most other services have no charge	Retail (30-day supply) \$5/\$20/\$35 Mail order (up to 90 days) \$10/\$40/\$70	<ul style="list-style-type: none"> Want low premiums and cost per service Are comfortable with HMO model: primary care physician manages care; no out-of-network coverage Are content with the selection of community providers
ANTHEM LUMENOS PPO WITH HRA May use any doctor without referral from primary care physician; in-network providers cost less. Health Reimbursement Account covers part of annual deductible before PPO benefits apply	\$	\$\$\$ You pay nothing until Health Reimbursement Account is used up; then you have high out-of-pocket costs until deductible is met. You pay a coinsurance thereafter	Full cost up to deductible; then 20% at in-network pharmacies, 40% at non-network pharmacies	<ul style="list-style-type: none"> Want lower premium and broad access to providers Are willing to take an active role in managing care and costs Are able to risk incurring greater out-of-pocket costs
ANTHEM BLUE CROSS PLUS Use a network doctor for highest benefits, however, out-of-network benefits are available	\$\$\$	\$\$ Annual deductible for out-of-network services only and fewer out-of-pocket expenses for in-network services	Retail (30-day supply) \$10/\$25/\$40 Mail order (up to 90 days) \$20/\$50/\$80	<ul style="list-style-type: none"> Want no deductible and fixed copay for in-network services Are willing to pay higher premium for access to out-of-network providers Accept primary care physician model for in-network care
ANTHEM BLUE CROSS PPO May use any doctor without referral from primary care physician; in-network providers cost less	\$\$\$	\$\$\$ Annual deductible and higher out-of-pocket expenses	Retail (30-day supply) \$10/\$25/\$40 Mail order (up to 90 days) \$20/\$50/\$80	<ul style="list-style-type: none"> Are willing to pay higher premiums and cost per service for provider choice Want direct access to all providers without need for referrals Want access to in and out-of-network providers
CORE You may use any doctor	\$0	\$\$\$+ Except for certain preventive services, you pay the full cost until you reach the \$3,000 deductible then 20%	Full cost until you reach the \$3,000 deductible then 20%	<ul style="list-style-type: none"> Want to pay no monthly premium Want protection for catastrophic care Are willing to risk incurring high out-of-pocket costs Want direct access to all providers without need for referrals
HEALTH NET HMO Must use network providers, except in emergencies	\$\$\$	\$ No deductible; you pay a copay for office visits and hospital stays; most other services have no charge	Retail (30-day supply) \$5/\$20/\$35 Mail order (up to 90 days) \$10/\$40/\$70	<ul style="list-style-type: none"> Accept higher premium to get access to wider network of providers Want lower cost per service Are comfortable with HMO model: primary care physician manages care; no out-of-network coverage
KAISER PERMANENTE—CA Must use network providers, except in emergencies	\$	\$ No deductible; you pay a copay for office visits and hospital stays; most other services have no charge	Retail (30-day supply) \$5/\$20/NA Mail order (31-100 days) \$10/\$40/NA	<ul style="list-style-type: none"> Want low premiums and cost per service Are comfortable with getting medical care only within the Kaiser system
WESTERN HEALTH ADVANTAGE Must use network providers, except in emergencies	\$	\$ No deductible; you pay a copay for office visits and hospital stays; most other services have no charge	Retail (30-day supply) \$5/\$20/\$35 Mail order (up to 90 days) \$10/\$40/\$70	<ul style="list-style-type: none"> Want low premiums and cost per service Are comfortable with HMO model: primary care physician manages care; no out-of-network coverage

\$ lowest costs in relation to all plans

\$\$ mid-range of costs in relation to all plans

\$\$\$ highest costs in relation to all plans