

CABRILLO COLLEGE

LOW MEDICAL PLAN OPTIONS - BLUE SHIELD HMO

Proposed for November 1, 2009 - September 30, 2010

MEDICAL PLAN BENEFIT	SISC Health Net LOW PLAN CURRENT			SISC Blue Shield LOW PLAN Option 1			SISC Blue Shield LOW PLAN Option 2 (Rx Change)		
	158-Y1			Access + HMO 20-250 w/ MH & IPSA			Access + HMO 25-500 w/ MH & IPSA		
Calendar Year Deductible Individual / Family	NONE			NONE			NONE		
Annual Out-of-Pocket Maximum Individual / Family	\$1,500 / \$4,500			\$1,500 / \$3,000			\$2,000 / \$4,000		
MAJOR MEDICAL									
Physician Office Visit	\$20			\$20			\$25		
Specialist Visit	\$20			\$20/\$30 ¹			\$25/\$30 ¹		
Preventive Care	\$20			\$0			\$0		
Lab and X-Ray	No Charge			No Charge			No Charge		
Outpatient Surgery	\$250 per admission			\$100@ASC/\$150@hospital			\$150@ASC/\$300@hospital		
Hospitalization Inpatient	\$250 / Admit			\$250 / Admit			\$500 / Admit		
Ambulance	No Charge			\$100			\$100		
Emergency Room	\$75 (waived if admitted)			\$100 (waived if admitted)			\$100 (waived if admitted)		
Durable Medical Equipment	No Charge			20% (up to \$2,000 max/cal year ^{**1})			20% (up to \$2,000 max/cal year ^{**1})		
Urgent Care	\$75			\$20			\$25		
Chiropractic Service	\$10 (up to 30 visits per cal year)			\$10 (up to 30 visits per cal year) ¹			\$10 (up to 30 visits per cal year) ¹		
Skilled Nursing (Up to 100 days/cal year)	\$250 / Admit			\$100 per day			\$100 per day		
Home Health Care	No Charge for first 30 days; \$20 after 30 days			\$20 (up to 100 visits per cal year)			\$25 (up to 100 visits per cal year)		
Mental Health Inpatient (Non-Severe)	No Charge			\$250 / Admit			\$500 / Admit		
Outpatient	\$20 - 20 visits (combined with sub abuse outpatient)			\$20 - unlimited visits			\$25 - unlimited visits		
Substance Abuse Detox	No Charge			\$250 / Admit ¹			\$500 / Admit ¹		
Inpatient	No charge - limited to 30 days (combined with inpatient MH days)			\$250 / Admit ¹			\$500 / Admit ¹		
Outpatient	Individual Therapy \$20 Group Therapy \$10 20 visit max (combined with outpatient non- severe MH visits)			\$20			\$25		
PRESCRIPTION DRUGS									
(At Participating Pharmacies only)	Generic / Brand / Non-Formulary ¹			Generic / Brand / Non-Formulary ¹			Generic / Brand / Non-Formulary ¹		
Retail - 30 day supply	\$5 / \$10 / \$35			\$5 / \$10 / \$25			\$10 / \$20 / \$35		
Mail Order - 90 day supply	\$10 / \$30 / \$70			\$10 / \$20 / \$50			\$20 / \$40 / \$70		
RATES - Post-MHP - No Rate Im	Current	Initial Renewal	Negotiated	Proposed			Proposed		
Single	\$519.00	\$612.00	\$602.00	\$595.00			\$538.00		
Two Party	\$1,029.00	\$1,219.00	\$1,198.00	\$1,186.00			\$1,072.00		
Family	\$1,422.00	\$1,686.00	\$1,658.00	\$1,641.00			\$1,484.00		
Difference between HN and BS		17.9%	16.0%	14.6%			3.7%		
		18.5%	16.4%	15.3%			4.2%		
		18.6%	16.6%	15.4%			4.4%		

Initial Annual cost for EAP through PBH - \$15,185 (\$3.33 PEPM); now \$14,592 (\$3.20 PEPM)

* Access + Specialist (self-referred office visits within your medical group are available for higher copay)

** DME coinsurance does not apply to the member calendar year copayment maximum

¹ co-pays do not apply to the member calendar year copayment maximum

¹ Blue Shield copayments for Substance Abuse do **not** accrue to member calendar year copayment maximum
Health Net copayments for Substance Abuse accrue to the member calendar year copayment maximum

ACS - Ambulatory Surgery Center