Members must initiate the carryover process by calling their Health Plan's Member Services Department - It is NOT automatic

CARRIER	DEDUCTIBLE CREDIT	OUT-OF-POCKET MAX CREDIT
<ul> <li>ANTHEM</li> <li>In-Network and Out-of-Network Deductibles and OOPM's are separate and cannot be combined.</li> <li>Deductible credit would be given under the following situations for New Business Only.</li> <li>* Pharmacy deductible credits will be given ONLY if moving from an HSA-Qualified plan with a Combined Med/Rx deductible to an Anthem HSA-Qualified EPO plan with a Combined Med/ Rx deductible.</li> </ul>	<ul> <li>Any Anthem HMO to Any Anthem HMO – Yes</li> <li>Any carrier HMO to Any Anthem HMO – Yes</li> <li>Any carrier HMO to Any Anthem PPO – Yes</li> <li>Any carrier PPO to Any Anthem PPO – Yes</li> <li>Any carrier PPO to Any Anthem PPO – Yes</li> <li>Any carrier PPO to Any Anthem PPO – Yes</li> <li>Any carrier HMO to Any Anthem EPO – Yes</li> <li>Any carrier PPO to Any Anthem EPO – Yes</li> <li>Any carrier PPO to Any Anthem EPO – Yes</li> <li>Any carrier PPO to Any Anthem EPO – Yes</li> <li>Any carrier PPO to Any Anthem EPO – Yes</li> <li>Any carrier HSA-Qualified HMO to Any Anthem HMO – Yes</li> <li>Any carrier HSA-Qualified HMO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified HMO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem EPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem HMO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – Yes</li> </ul>	<ul> <li>Any Anthem HMO to Any Anthem HMO – No</li> <li>Any carrier HMO to Any Anthem HMO – No</li> <li>Any carrier HMO to Any Anthem PPO – No</li> <li>Any carrier PPO to Any Anthem PPO – No</li> <li>Any carrier PPO to Any Anthem PPO – No</li> <li>Any carrier EPO to Any Anthem EPO – No</li> <li>Any carrier HMO to Any Anthem EPO – No</li> <li>Any carrier PPO to Any Anthem EPO – No</li> <li>Any carrier PPO to Any Anthem EPO – No</li> <li>Any carrier PPO to Any Anthem EPO – No</li> <li>Any carrier HSA-Qualified HMO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified HMO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified HMO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem HMO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified PPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – No</li> <li>Any carrier HSA-Qualified EPO to Any Anthem HMO – No</li> <li>Any carrier HSA-Qualified EPO to Any Anthem PPO – No</li> </ul>
CIGNA + OSCAR Credit only available at Initial Group Enrollment with NO lapse in coverage.* Employees must be enrolled on the group plan as of the initial effective date with Cigna + Oscar * Cigna + Oscar will credit up to the enrolling plan's deductible and out-of-pocket amounts HEALTH NET No more 4th QTR carry over beginnng in 2014. Must be within the same employer and on the same product type. In-Network and Out-of- Network Deductibles and OOPM's are separate	<ul> <li>Any carrier HMO to Any Cigna + Oscar EPO - Yes</li> <li>Any carrier PPO to Any Cigna + Oscar EPO - Yes</li> <li>Any carrier EPO to Any Cigna + Oscar EPO - Yes</li> <li>Cigna + Oscar will NOT provide credit for the following situations: <ul> <li>Prescription drug coverage (unless coming from an HSA plan, where deductibles are combined with medical)</li> <li>Individual plans</li> <li>Employees not enrolled on the group plan as of the initial effective date</li> </ul> </li> <li>Any Health Net HMO to Any Health Net HMO - Yes</li> <li>Any carrier HMO to Any Health Net HMO - Yes</li> <li>Any carrier PPO to Any Health Net HMO - No</li> </ul>	<ul> <li>Any carrier HMO to Any Cigna + Oscar EPO – Yes</li> <li>Any carrier PPO to Any Cigna + Oscar EPO – Yes</li> <li>Any carrier EPO to Any Cigna + Oscar EPO – Yes</li> <li>Cigna + Oscar will NOT provide credit for the following situations:         <ul> <li>Prescription drug coverage (unless coming from an HSA plan, where deductibles are combined with medical)</li> <li>Individual plans</li> <li>Employees not enrolled on the group plan as of the initial effective date</li> </ul> </li> <li>No – We do not offer prior carrier OOPM credit. Deductible credits can ONLY be applied towards the OOPM.</li> <li>Any Health Net HMO to Any Health Net HMO – Yes</li> <li>Any carrier HMO to Any Health Net HMO – No</li> <li>Any carrier PPO to Any Health Net HMO – No</li> </ul>

Deductible credit is not guaranteed and is subject to health plan approval.

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Members must initiate the carryover process by calling their Health Plan's Member Services Department - It is NOT automatic

CARRIER	DEDUCTIBLE CREDIT	OUT-OF-POCKET MAX CREDIT
<b>KAISER PERMANENTE</b> <u>DOES NOT APPLY TO NEW BUSINESS</u> . Must be within the same employer, <u>same carrier/group#*</u> and on the same product type. Credit will not be applied from an individual policy. Pharmacy deductible credits will be given ONLY if moving from one HSA-Qualified Deductible HMO to another HSA-Qualified Deductible HMO.	<ul> <li>CC Kaiser HMO to CC Kaiser HMO – Yes</li> <li>Kaiser Direct HMO to CC Kaiser HMO – No</li> <li>CC Kaiser HSA-Qualified HMO to CC Kaiser HSA-Qualified HMO – Yes</li> <li>CC Kaiser HMO to CC Kaiser HSA-Qualified HMO – Yes</li> <li>CC Kaiser HSA-Qualified HMO to CC Kaiser HMO – Yes</li> <li>Any carrier HMO to CC Kaiser HMO – No</li> <li>Any carrier PPO to CC Kaiser HMO – No</li> </ul>	<ul> <li>CC Kaiser HMO to CC Kaiser HMO – Yes</li> <li>Kaiser Direct HMO to CC Kaiser HMO – No</li> <li>CC Kaiser HSA-Qualified HMO to CC Kaiser HSA-Qualified HMO – Yes</li> <li>CC Kaiser HMO to CC Kaiser HSA-Qualified HMO – Yes</li> <li>CC Kaiser HSA-Qualified HMO to CC Kaiser HMO – Yes</li> <li>Any carrier HMO to CC Kaiser HMO – No</li> <li>Any carrier PPO to CC Kaiser HMO – No</li> </ul>
SHARP HEALTH PLAN	<ul> <li>Any Sharp HMO Plan to Any Sharp HMO Plan – Yes</li> <li>Any carrier HMO to Any Sharp HMO – Yes</li> <li>Any carrier PPO to Any Sharp HMO – No</li> </ul>	<b>No –</b> We do not offer OOPM credit. Deductible credits ONLY can be applied towards the OOPM.
SUTTER HEALTH PLUS	<ul> <li>Any Sutter HMO to Any Sutter HMO – No</li> <li>Any carrier HMO to Any Sutter HMO – No</li> <li>Any carrier PPO to Any Sutter HMO – No</li> </ul>	No – We do not offer OOPM credit.
<b>UNITEDHEALTHCARE</b> Deductible credit only available at Initial Group Enrollment – not available as New Hires. Only credit up to the value of the incumbent deductible or the new plan deductible – whichever is lower. Prescription deductible credit will not be given.	<ul> <li>Any UnitedHealthcare HMO to Any UnitedHealthcare HMO – Yes</li> <li>Any carrier HMO to Any UnitedHealthcare HMO – Yes</li> <li>Any carrier PPO to Any UnitedHealthcare HMO – No</li> </ul>	<ul> <li>Any UnitedHealthcare HMO to Any UnitedHealthcare HMO – Only the deductible credit which applies to the OOPM</li> <li>Any carrier HMO to Any UnitedHealthcare HMO – Only the deductible credit which applies to the OOPM</li> <li>Any carrier PPO to Any UnitedHealthcare HMO – No</li> </ul>
WESTERN HEALTH ADVANTAGE	<ul> <li>Western HMO to Western HMO – No</li> <li>Western HMO to Western HSA-Qualified HMO – No</li> <li>Western HSA-Qualified HMO to Western HMO – No</li> <li>Western HSA-Qualified HMO to Western HSA-Qualified HMO – Yes</li> <li>Any carrier HMO to Any Western HMO – No</li> <li>Any carrier HSA-Qualified (group sponsored) HMO to Western HSA-Qualified HMO – Yes</li> <li>Any carrier HSA-Qualified (group sponsored) PPO to Western HSA-Qualified HMO – Yes</li> <li>Any carrier PPO to Any Western HMO – No</li> </ul>	<b>No –</b> We do not offer OOPM credit. Deductible credits ONLY can be applied towards the OOPM.

Deductible credit is not guaranteed and is subject to health plan approval.

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CARRIER	WHAT IS THE PROCESS FOR A MEMBER TO REQUEST A DEDUCTIBLE CREDIT	TYPICAL TURNAROUND TIME
ANTHEM BLUE CROSS	<ul> <li>Members that are eligible will need to complete the "Anthem Deductible Carry-Over Notice" that is provided by CaliforniaChoice<sup>®</sup>. This document provides instructions on where to send the form to.</li> <li>The form is provided via the Admin Kit that is sent to the employer once the group is enrolled into the CaliforninaChoice system.</li> </ul>	Approximately 30-45 business days
CIGNA + OSCAR	<ul> <li>Members must submit one of two required document types:         <ol> <li>A completed Deductible Credit form located on <u>hioscar.com/forms</u> and an approved Deductible Credit spreadsheet; OR</li> <li>A copy of an EOB, for each family member, showing the amount of deductible and out-of-pocket each member has satisfied and a statement from your prior insurance carrier.</li> </ol> </li> <li>Then documentation must be submitted through one of the following channels:         <ol> <li>By mail: Cigna + Oscar c/o Oscar Management Corporation P.O. Box 52146, Phoenix, AZ 85072-2146; OR</li> <li>Email: business@hioscar.com; OR</li> <li>Contact your Cigna + Oscar sales representative</li> </ol> </li> </ul>	<ul> <li>Deductible Credit form(s) can be submitted during the enrollment process and will be accepted up to the 15th calendar day for groups enrolling in coverage beginning on the 1st of the month and up to the 1st for groups enrolling in coverage beginning on the 15th of the month</li> <li>Deductible and max out-of- pocket credits will be processed 24-48 hours upon submission of all required documents with complete information</li> </ul>
HEALTH NET	<ul> <li>Members need to contact Member Services at 1-800-522-0088 and submit a letter or EOBs from their prior carrier showing the deductible met. The document would need to specify what amount was met for each covered member and for what year, otherwise it won't be accepted.</li> <li>The document should be sent to the Member Services rep they speak with, who will forward it to claims to update the accumulator appropriately.</li> </ul>	Approximately 10-14 business days
KAISER PERMANENTE	Members must initiate the carryover process by calling their Health Plan's Member Services Department – It is     NOT automatic	Approximately 6-8 weeks

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CARRIER	WHAT IS THE PROCESS FOR A MEMBER TO REQUEST A DEDUCTIBLE CREDIT	TYPICAL TURNAROUND TIME
SHARP HEALTH PLAN	<ul> <li>Members need to contact Customer Care at 1-800-359-2002 or by email at <u>customer.service@sharp.com</u> to seek instructions. Requests should be submitted ASAP, but no more than 90 days</li> <li>The following documents will be required: <ul> <li>Deductible Credit Request Form</li> <li>Copies of EOBs</li> </ul> </li> <li>Fax request to: (858) 499-8244 or Mail request to: Sharp Health Plan, Attn: Customer Care, 8520 Tech Way, Ste. 200, San Diego, CA 92123-1480</li> </ul>	Approximately 2-4 weeks depending on what is submitted
SUTTER HEALTH PLUS	N/A	N/A
UNITEDHEALTHCARE	<ul> <li>Groups may download the "UnitedHealthcare Deductible Credit Form" on www.calchoice.com/Public/Forms</li> <li>The entire group must be submitted together. Email completed "UnitedHealthcare Deductible Credit Form" and prior carrier EOBs to: ca_sb_ded_credits@uhc.com.</li> </ul>	8 to 12 business days based upon receipt of complete documentation
WESTERN HEALTH ADVANTAGE	<ul> <li>Member is eligible for deductible carry-over at the time if a new group enrollment or during open enrollment</li> <li>Member must provide a current EOB from prior carrier</li> <li>Member can request the carry-over by sending an e-mail and their documentation via a secured message center at mywha.org/securemessage and state Attn: Employer Group Sales</li> <li>Requests must be submitted within 30 days of plan effective date</li> </ul>	Approximately 1-14 business days

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