

**Creditable Coverage**  
**Non-creditable Coverage**

Prescription drug benefit with current plan from employer is at least as good as the pharmacy benefits offered through the new Medicare Part D standard plan  
Prescription drug benefit with current plan from employer is not as good as the pharmacy benefits offered through the new Medicare Part D standard plan

	CREDITABLE	NON-CREDITABLE
<b>Aetna</b>		
<b>HMO</b>		
HMO	■	
Basic HMO	■	
HMO Deductible (renewing groups only)	■	
Aetna Value Network (AVN)	■	
AWH Southern HMO	■	
<b>PPO</b>		
OAMC	■	
OAMC - HSA	■	
PPO	■	
AWH Southern OAMC/EPO	■	
<b>Anthem Blue Cross<sup>†††</sup></b>		
<b>HMO</b>		
Priority Select HMO	■	
Select HMO	■	
Vivify HMO	■	
<b>PPO</b>		
PPO (Prudent Buyer)	■	
EPO (Prudent Buyer Exclusive)	■	
California Care HMO (Traditional/Full Network)	■	
Select PPO	■	
<b>Blue Shield of California<sup>***</sup></b>		
<b>HMO/POS</b>		
Access+ HMO	■	
Access+ HMO SaveNet	■	
Local Access+ HMO	■	
Trio HMO	■	
Added Advantage POS	■	
<b>PPO</b>		
Full PPO	■	
Full PPO Savings	■	
Active Choice PPO	■	
Tandem PPO	■	
<b>CalCPA Health</b>		
<b>HMO</b>		
HMO 10/0%	■	
HMO 35/20%	■	
Select 1500	■	
Select 3000	■	
<b>PPO</b>		
PPO 10/0/10%	■	
PPO 20/500/20%	■	
PPO 25/550/30%	■	
PPO 25/550/30% RxV	■	
PPO 35/1200/40%	■	
PPO 40/2000/40%	■	
PPO 40/2000/40% RxV	■	
PPO 45/1500/50%	■	
PPO 45/2500/50%	■	
PPO 45/5000/10% Saver	■	■
PPO 65/3750/25%	■	
PPO HSA 1350/50%	■	
PPO HSA 1800/30%/RxC	■	
PPO HSA 2700/20%/RxC	■	
PPO HSA 3500/30%/RxC	■	■
PPO HSA 4600/20%/RxC	■	■
PPO HSA 5600/0%/RxC	■	■
<b>Cigna</b>		
<b>HMO/EPO</b>		
HMO	■	
<b>PPO</b>		
PPO	■	
EPO	■	
HSA	■	
HRA	■	
Open Access	■	
Level Funded Plans	■	
Self-Funded Plans	■	
<b>E.D.I.S.</b>		
Contact your Word & Brown Representative		
<b>Health Net</b>		
<b>HMO/EPO</b>		
CanopyCare	■	
SmartCare HMO	■	
Salud HMO y Mas	■	
EOA (Elect Open Access)	■	
HMO	■	■
ExcelCare EOA	■	
ExcelCare HMO	■	
<b>PPO</b>		
PPO	■	
PPO n	■	
MAA n	■	
PPO HSA-Integrated	■	
PPO HRA-Integrated	■	

	CREDITABLE	NON-CREDITABLE
<b>MediExcel Health Plan</b>		
Value Plan 5	■	
Value Plan 10	■	
Value Plan 20	■	
Plan QEP		■
Plan MEP		■
<b>Sharp Health Plan</b>		
HDHP NG 1 L	■	
HDHP NG 2 L	■	
HDHP NG 3 L	■	
HDHP NG 4 L	■	
HDHP NG 5 L	■	
HDHP POS NG 21 L	■	
HDHP POS NG 22 L	■	
HDHP POS NG 23 L	■	
GF \$5/\$15/\$30	■	
GF \$10/\$20/\$40	■	
GF \$20/\$35/\$70	■	
GF \$20/\$35/\$70 + \$150 Brand Ded	■	
GF \$20/\$35/\$70 + \$250 Brand Ded	■	
GF \$20/\$30/\$60 + \$200 Brand Ded	■	
GF \$15/\$25/\$50	■	
GF \$10/\$25/\$35	■	
GF \$15/\$35/\$50	■	
GF \$10/\$25/\$50	■	
GF \$10/\$25/\$50 + \$150 Brand Ded	■	
GF \$10/\$25/\$50 + \$250 Brand Ded	■	
GF \$15/\$35/\$50 + \$150 Brand Ded	■	
GF \$15/\$35/\$50 + \$250 Brand Ded	■	
GF \$15/\$30/\$60 + \$100 Brand Ded	■	
GF \$15/\$30/\$60 + \$150 Brand Ded	■	
NGF \$5/\$15/\$30	■	
NGF \$16/\$35/\$70	■	
NGF \$15/\$25/\$50	■	
NGF \$10/\$25/\$35	■	
NGF \$15/\$35/\$50	■	
NGF \$15/\$35/\$50 + \$150 Brand Ded	■	
NGF \$10/\$20/\$40	■	
NGF \$15/\$30/\$60 + \$100 Brand Ded	■	
NGF \$16/\$35/\$70 + \$250 Brand Ded	■	
NGF \$15/\$35/\$50 + \$250 Brand Ded	■	
NGF \$10/\$25/\$50 + \$250 Brand Ded	■	
NGF \$10/\$25/\$50 + \$150 Brand Ded	■	
NGF \$10/\$25/\$50	■	
NGF \$16/\$35/\$70 + \$150 Brand Ded	■	
NGF \$16/\$40/\$80	■	
NGF \$15/\$30/\$50	■	
NGF \$5/\$20/\$50	■	
<b>Total Benefit Solutions (Aetna International)</b>		
PPO Access Elite	■	
PPO Access 250	■	
PPO Access 500	■	
PPO Access 750	■	
PPO Access 1000	■	
PPO Access 1500	■	
PPO Access 2500	■	
PD Access Value 4000	■	
HDHP Access 2000	■	
<b>United Healthcare<sup>**</sup></b>		
<b>HMO</b>		
SignatureValue HMO	■	
Advantage HMO	■	
Focus HMO	■	
Alliance HMO	■	
<b>PPO</b>		
Select	■	
Select Traditional	■	
Select Traditional with Deductible	■	
Select Balanced	■	
Select Consumer	■	
Select Options PPO	■	
Select Options PPO Consumer	■	
Select Non-Differential PPO	■	
Select Plus	■	
Select Plus Traditional	■	
Select Plus Traditional with Deductible	■	
Select Plus Balanced	■	
Select Plus Consumer	■	
Select Plus Options PPO	■	
Select Plus Options PPO Consumer	■	
Select Plus Non-Differential PPO	■	

(Continued)

\*\*\* All custom plans with a combined Rx/Medical deductible and out-of-pocket maximum must be certified as either Creditable or Non-Creditable individually. Please contact your Blue Shield account representative for assistance with individual plan certification.

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	CREDITABLE	NON-CREDITABLE
<b>United Healthcare** (Cont.)</b>		
PPO	■	
PPO Traditional	■	
PPO Traditional with Deductible	■	
PPO Balanced	■	
PPO Consumer	■	
Options PPO	■	
Options PPO Consumer	■	
Non-Differential PPO	■	
Core	■	
Core Traditional	■	
Core Traditional with Deductible	■	
Core Balanced	■	
Core Consumer	■	
Core Essential	■	
Core Essential Traditional	■	
Core Essential Traditional with Deductible	■	
Core Essential Balanced	■	
Core Essential Consumer	■	
Choice	■	
Choice Traditional	■	
Choice Traditional with Deductible	■	
Choice Balanced	■	
Choice Consumer	■	
Choice Plus	■	
Choice Plus Traditional	■	
Choice Plus Traditional with Deductible	■	
Choice Plus Balanced	■	
Choice Plus Consumer	■	
All Savers Level Funding	■	
<b>HSA-Compatible</b>		
Select HSA	■	
Select Options PPO HSA	■	
Select Plus HSA	■	
Select Plus Options PPO HSA	■	
PPO HSA	■	
Options PPO HSA	■	
Alliance HMO HSA-Eligible	■	
<b>HRA-Compatible</b>		
Alliance HMO HRA-Eligible	■	
<b>Western Health Advantage</b>		
<b>HMO</b>		
Rx 10/30/50	■	
Rx 10/40/60	■	
Rx 10/30/50 Deductible	■	
Rx 15/50/75	■	
<b>HSA-Compatible High-Deductible</b>		
Western 1800/0/0 HDHP HMO Prime	■	
Western 2800/0/0 HDHP HMO Prime	■	
Western 2800/40/500 HDHP HMO Prime	■	
Western 3000/30/30% HDHP HMO Prime	■	
Western 4000/40%/40% HDHP HMO Prime	■	
Western 5500/0/0 HDHP HMO Prime	■	

\*\* Some plans will be non-creditable if paired with a Generic Rx or Managed Rx plan. Contact your Word & Brown Representative for details.