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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.

Non-creditable Coverage: 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 Coverage
Aetna: *Pending Approval*		
HMO	✓	
Basic HMO	✓	
HMO Deductible (renewing groups only)	✓	
Aetna Value Network (AVN)	✓	
AWH Southern HMO	✓	
OAMC	✓	
OAMC – HSA	✓	
PPO	✓	
AWH Southern OAMC/EPO	✓	
Anthem Blue Cross		
Priority Select HMO	✓	
Select HMO	✓	
Vivity HMO	✓	
PPO (Prudent Buyer)	✓	
EPO (Prudent Buyer Exclusive)	✓	✓*
California Care HMO (Traditional/Full Network)	✓	
Select PPO	✓	
Blue Shield of CA**		
Basic Rx \$10/20 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$0 Pharmacy Deductible – PPO	✓	
Rx Spectrum \$15/30/50% \$100 max with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/15/30 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/20/35 with \$0 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum \$15/30/45 with \$150 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$15/30 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/45 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/30/50 with \$250 Pharmacy Deductible – PPO	✓	

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Non-creditable Coverage: 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 Coverage
Enhanced Rx \$15/30/45 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/20/35 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/20/35 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$20/40/60 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$20/40/60 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$150 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum \$0/10/25/40 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/40/70 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/15/30 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/25/40 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/20/35 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$5/10/25 with \$150 Pharmacy Deductible – PPO	✓	
Basic Rx \$10/20 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$5/10/25 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/40/60 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50% \$100 max with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/30/50 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/45 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/30/50 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/30/50 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/45 with \$250 Pharmacy Deductible – PPO	✓	
Rx Spectrum \$15/30/45 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/30/50 with \$150 Pharmacy Deductible HMO/POS	✓	

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Non-creditable Coverage: 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 Coverage
Enhanced Rx Value Formulary \$10/30/50 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$20/40/60 with \$250 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum Value Formulary \$15/30/45 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/50 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/25/40 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$5/10/25 with \$0 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$15/25 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/50% \$100 max with \$250 Pharmacy Deductible HMO/POS	✓	
Premier Rx \$0/10/25/40 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/30/50 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/25/40 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/15/30 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/45 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/15/30 with \$0 Pharmacy Deductible – PPO	✓	
Premier Rx \$0/10/25/40 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$150 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum Value Formulary \$15/30/45 with \$0 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum Value Formulary \$15/40/70 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/30/50 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/30/50 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/30/50 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$20/40/60 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/40/60 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$150 Pharmacy Deductible HMO/POS	✓	

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Non-creditable Coverage: 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 Coverage
Rx Spectrum Value Formulary \$15/30/45 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/45 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/20/35 with \$150 Pharmacy Deductible – PPO	✓	
Basic Rx \$10/20 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/20/35 with \$0 Pharmacy Deductible – PPO	✓	
Basic Rx \$15/25 with \$0 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$15/30 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/20/35 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50% \$100 max with \$150 Pharmacy Deductible – PPO	✓	
Premier Rx \$0/10/25/40 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/40/70 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$250 Pharmacy Deductible – PPO	✓	
Rx Spectrum \$10/25/40 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/40/70 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$0 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum Value Formulary \$15/30/45 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/40/60 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/40/60 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/25/40 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/15/30 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/25/40 with \$0 Pharmacy Deductible – PPO	✓	
Basic Rx \$10/15 with \$150 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$15/25 with \$150 Pharmacy Deductible HMO/POS	✓	

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	Creditable	Non-Creditable Coverage
Basic Rx \$10/25 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/30/50 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50% \$100 max with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/50% \$100 max with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$0 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum \$10/25/40 with \$0 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum \$15/30/45 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$150 Pharmacy Deductible – PPO	✓	
Rx Spectrum Value Formulary \$15/40/70 with \$150 Pharmacy Deductible – PPO	✓	
Rx Spectrum Value Formulary \$15/40/70 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$20/40/60 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/40/70 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/40/70 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/40/60 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/50 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/30/50% \$100 max with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/20/35 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$5/10/25 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$10/25/40 with \$0 Pharmacy Deductible HMO/POS	✓	
Premier Rx \$0/10/25/40 with \$250 Pharmacy Deductible HMO/POS	✓	
Premier Rx \$0/10/25/40 with \$0 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$10/25 with \$150 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$15/30 with \$250 Pharmacy Deductible HMO/POS	✓	
Basic Rx \$10/15 with \$0 Pharmacy Deductible HMO/POS	✓	

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Non-creditable Coverage: 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 Coverage
Enhanced Rx Value Formulary \$20/40/60 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/45 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$20/40/60 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/30/50 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/20/35 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/25/40 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$10/20/35 with \$0 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$15/40/70 with \$250 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum \$15/30/45 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$250 Pharmacy Deductible HMO/POS	✓	
Rx Spectrum Value Formulary \$15/40/70 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$250 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$15/40/70 with \$0 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx Value Formulary \$10/40/60 with \$150 Pharmacy Deductible – PPO	✓	
Enhanced Rx Value Formulary \$15/30/50 with \$250 Pharmacy Deductible – PPO	✓	
Enhanced Rx \$10/40/60 with \$150 Pharmacy Deductible HMO/POS	✓	
Enhanced Rx \$15/30/50 with \$150 Pharmacy Deductible – PPO	✓	

CalCPA

Small Group PPO Plan

Platinum PPO 10/0	✓	
Platinum PPO 10/400	✓	
Gold PPO 20/800	✓	
Gold PPO 25/600 (GF)	✓	
Gold PPO 25/750	✓	
Gold PPO 30/1000	✓	
Gold PPO 30/650	✓	
Gold PPO 30/1250	✓	
Silver PPO 45/2250	✓	

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	Creditable	Non-Creditable Coverage
Silver PPO 45/1850	✓	
Silver PPO 45/2850	✓	
Silver PPO 50/2500	✓	
Bronze PPO 65/4250	✓	
Bronze PPO 50/6250/OV3		✓
Bronze ppo 75/7350	✓	
Gold PPO HSA PRX 1800	✓	
Silver PPO HSA PRX 1600	✓	
Silver PPO HSA PRX 2000	✓	
Silver PPO HSA PRX 3000	✓	
Silver PPO HSA PRX 3900		✓
Bronze PPO HSA PRX 5000		✓
Bronze PPO HSA PRX 6350		✓
Small Group HMO Plan		
Platinum HMO 10/0	✓	
Gold HMO 35/0	✓	
Silver HMO 25/1500	✓	
Silver HMO 30/3000	✓	
Small Group EPO Plan		
Gold EPO 25/750	✓	
Silver EPO 50/2250	✓	
Silver EPO HSA PRx 2000	✓	
Cigna: *Pending Approval*		
HMO	✓	
PPO	✓	
EPO	✓	
HSA	✓	
HRA	✓	

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	Creditable	Non-Creditable Coverage
Open Access	✓	
Level Funded Plans	✓	
SelfFunded Plans	✓	

E.D.I.S.

Contact your Word & Brown Representative		
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Health Net

CanopyCare	✓	
SmartCare HMO	✓	
Salud HMO y Mas	✓	
EOA (Elect Open Access)	✓	
HMO		✓
ExcelCare EOA	✓	
ExcelCare HMO	✓	
PPO	✓	
PPO n	✓	
MAA n	✓	
PPO HASIntegrated	✓	
PPO HRAIntegrated	✓	

MediExcel Health Plan

VP5 HMO Plan	✓	
VP10 HMO Plan	✓	
VP20 HMO Plan	✓	
MEP HMO Plan	✓	
QEP HMO Plan	✓	

Sharp Health Plans

HDHP NG 1 L	✓	
HDHP NG 2 L	✓	
HDHP NG 3 L	✓	

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	Creditable	Non-Creditable Coverage
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 + \$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	✓	

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Non-creditable Coverage: 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 Coverage
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	✓	

Total Benefit Solutions (Aetna International):

Pending Approval

PPO Access Elite	✓	
PPO Access 250	✓	
PPO Access 500	✓	
PPO Access 750	✓	
PPO Access 1000	✓	
PPO Access 1500	✓	
PPO Access 2500	✓	
PPO Access Value 4000	✓	
HDHP Access 2000	✓	

United Healthcare*

Western Health Advantage

Rx 10/30/50	✓	
Rx 10/40/60	✓	
Rx 10/30/50 Deductible	✓	
Rx 15/50/75	✓	
Rx 10/25/352x	✓	
Western 1000/20/20% HMO Prime	✓	
Western 1000/40/500 HMO Prime	✓	
Western 1600/0/0 HDHP HMO Prime	✓	

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	Creditable	Non-Creditable Coverage
Western 1800/0/0 HDHP HMO Prime	✓	
Western 2500/0/30% HMO Prime	✓	
Western 2500/20/500 HMO Prime	✓	
Western 2500/40/500 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 1500/50/40% HMO Prime	✓	
Western 5500/0/0 HDHP HMO Prime	✓	