

**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
<b>Aetna</b>		
<b>HMO</b>		
CA Bronze HMO Basic \$65/95 6300 Ded (2020)	■	
CA Gold HMO \$25/50 250 Ded (2020)	■	
CA Gold HMO AVN \$25/50 250 Ded (2020)	■	
CA Gold HMO AVN \$25/50 500 Ded (2020)	■	
CA Gold HMO AWH SoCA \$25/50 250 Ded (2020)	■	
CA Gold HMO AWH SoCA \$25/50 500 Ded (2020)	■	
CA Gold HMO Basic \$25/50 250 Ded (2020)	■	
CA Gold HMO Basic \$25/50 500 Ded (2020)	■	
CA Gold HMO Ded \$25/50 250 Ded (2020)	■	
CA Gold HMO Ded \$25/50 500 Ded (2020)	■	
CA Platinum HMO \$15/30 0 Ded (2020)	■	
CA Platinum HMO AVN \$15/30 0 Ded (2020)	■	
CA Platinum HMO AWH SoCA \$15/30 0 Ded (2020)	■	
CA Platinum HMO Basic \$15/30 0 Ded (2020)	■	
CA Platinum HMO Ded \$15/30 0 Ded (2020)	■	
CA Silver HMO AVN \$50/75 6000 Ded (2020)	■	
CA Silver HMO AVN \$50/85 2250 Ded (2020)	■	
CA Silver HMO AWH SoCA \$50/75 6000 Ded (2020)	■	
CA Silver HMO AWH SoCA \$50/85 2250 Ded (2020)	■	
CA Silver HMO Basic \$50/75 6000 Ded (2020)	■	
CA Silver HMO Basic \$50/85 2250 Ded (2020)	■	
CA Silver HMO Ded \$50/75 6000 Ded (2020)	■	
CA Silver HMO Ded \$50/85 2250 Ded (2020)	■	
CA Bronze HMO AVN \$75/125 7900 Ded (2020)		■
CA Bronze HMO AWH SoCA \$75/125 7900 Ded (2020)		■
CA Bronze HMO Basic \$75/125 7900 Ded (2020)		■
CA Bronze HMO Ded \$75/125 7900 Ded (2020)		■
<b>PPO</b>		
CA Gold MC 80/50 1250 Ded (2020)	■	
CA Gold MC 80/50 250 Ded (2020)	■	
CA Gold MC 80/50 750 Ded (2020)	■	
CA Gold MC AWH SoCA 80/50 1250 Ded (2020)	■	
CA Gold MC AWH SoCA 80/50 250 Ded (2020)	■	
CA Gold MC AWH SoCA 80/50 750 Ded (2020)	■	
CA Gold MC Savings Plus 80/50 1250 Ded (2020)	■	
CA Gold MC Savings Plus 80/50 250 Ded (2020)	■	
CA Gold MC Savings Plus 80/50 750 Ded (2020)	■	
CA Gold PPO 80/50 1000 Ded (2020)	■	
CA Platinum MC 90/50 0 Ded (2020)	■	
CA Platinum MC AWH SoCA 90/50 0 Ded (2020)	■	
CA Platinum MC Savings Plus 90/50 0 Ded (2020)	■	
CA Silver MC 60/50 2000 Ded (2020)	■	
CA Silver MC 60/50 4350 Ded (2020)	■	
CA Silver MC AWH SoCA 60/50 2000 Ded (2020)	■	
CA Silver MC AWH SoCA 60/50 4350 Ded (2020)	■	
CA Silver MC AWH SoCA 75/50 2800 HSA (2020)	■	
CA Silver MC AWH SoCA Copay 80/50 2250 Ded (2020)	■	
CA Silver MC Copay 80/50 2250 Ded (2020)	■	
CA Silver MC Savings Plus 60/50 2000 Ded (2020)	■	
CA Silver MC Savings Plus 60/50 4350 Ded (2020)	■	
CA Silver MC Savings Plus Copay 80/50 2250 Ded	■	
CA Bronze MC 50/50 7300 Ded (2020)		■
CA Bronze MC AWH SoCA 50/50 7300 Ded (2020)		■
CA Bronze MC Savings Plus 50/50 7300 Ded (2020)		■
<b>EPO</b>		
CA Gold EPO 80 1250 Ded (2020)	■	
CA Gold EPO 80 750 Ded (2020)	■	
CA Gold EPO AWH SoCA 80 1250 Ded (2020)	■	
CA Silver EPO 60 2000 Ded (2020)	■	
CA Silver EPO 60 4350 Ded (2020)	■	
CA Silver EPO AWH SoCA 60 2000 Ded (2020)	■	
CA Silver EPO AWH SoCA 60 4350 Ded (2020)	■	
CA Bronze EPO 50 7300 Ded (2020)		■
CA Bronze EPO AWH SoCA 50 7300 Ded (2020)		■
<b>HSA-Compatible</b>		
CA Silver EPO 75 2800 HSA (2020)	■	
CA Silver EPO AWH SoCA 75 2800 Ded HSA (2020)	■	
CA Silver MC 75/50 2800 HSA (2020)	■	
CA Silver MC Savings Plus 75/50 2800 HSA (2020)	■	
CA Brnz MC AWH SoCA 100/50 6900 Ded HSA (2020)		■
CA Bronze MC 100/50 6900 Ded HSA (2020)		■
CA Bronze MC Savings Plus 100/50 6900 Ded HSA	■	
<b>Anthem Blue Cross</b>		
<b>Anthem Platinum</b>		
Anthem Platinum PPO 15/250/10%	■	
Anthem Platinum PPO 20/10%	■	
Anthem Platinum Select PPO 15/10%	■	
Anthem Platinum Select PPO 15/250/10%	■	
Anthem Platinum Select PPO 20/10%	■	
Anthem Platinum HMO 20	■	
Anthem Platinum HMO 25	■	
Anthem Platinum Select HMO 20	■	
Anthem Platinum Select HMO 25	■	
Anthem Platinum Priority Select HMO 20	■	
Anthem Platinum Priority Select HMO 25	■	

	CREDITABLE	NON-CREDITABLE
<b>Anthem Blue Cross (Cont.)</b>		
<b>Anthem Gold</b>		
Anthem Gold PPO 20/30%	■	
Anthem Gold PPO 30/500/20%	■	
Anthem Gold PPO 30/750/20%	■	
Anthem Gold PPO 35/500/25%	■	
Anthem Gold PPO 35/1000/20%	■	
Anthem Gold Select PPO 20/30%	■	
Anthem Gold Select PPO 25/250/20%	■	
Anthem Gold Select PPO 30/500/20%	■	
Anthem Gold Select PPO 30/750/20%	■	
Anthem Gold Select PPO 35/500/25%	■	
Anthem Gold Select PPO 35/1000/20%	■	
Anthem Gold EPO 35/500/20%	■	
Anthem Gold EPO 35/1700/20%	■	
Anthem Gold HMO 30	■	
Anthem Gold HMO 35	■	
Anthem Gold Select HMO 30	■	
Anthem Gold Select HMO 35	■	
Anthem Gold Priority Select HMO 30	■	
Anthem Gold Priority Select HMO 35	■	
<b>Anthem Silver</b>		
Anthem Silver PPO 45/1750/40%	■	
Anthem Silver PPO 50/2000/40%	■	
Anthem Silver PPO 55/1850/35%	■	
Anthem Silver PPO 55/2500/45%	■	
Anthem Silver PPO 2000/30% w/HSA - RxC (Individual)*	■	
Anthem Silver PPO 2000/30% w/HSA - RxC (Family)	■	
Anthem Silver Select PPO 45/1750/40%	■	
Anthem Silver Select PPO 50/2000/40%	■	
Anthem Silver Select PPO 50/2250/20%	■	
Anthem Silver Select PPO 55/1850/35%	■	
Anthem Silver Select PPO 55/2500/45%	■	
Anthem Silver Select PPO 2000/30% w/HSA - RxC (Individual)	■	
Anthem Silver Select PPO 2000/30% w/HSA - RxC (Family)*	■	
Anthem Silver HMO 55	■	
Anthem Silver HMO 55/2250/45%	■	
Anthem Silver Select HMO 55	■	
Anthem Silver Select HMO 55/2250/45%	■	
Anthem Silver Priority Select HMO 55	■	
Anthem Silver Priority Select HMO 55/2250/45%	■	
<b>Anthem Bronze</b>		
Anthem Bronze PPO 40/5600/40%		■
Anthem Bronze PPO 60/6350/40%	■	
Anthem Bronze PPO 70/6300/35%		■
Anthem Bronze PPO 3950/50%	■	
Anthem Bronze PPO 5000/45% w/HSA	■	
Anthem Bronze PPO 6600/0% w/HSA	■	
Anthem Bronze Select PPO 40/5600/40%	■	
Anthem Bronze Select PPO 60/6350/40%	■	
Anthem Bronze Select PPO 70/6300/35%		■
Anthem Bronze Select PPO 3950/50%	■	
Anthem Bronze Select PPO 5000/45% w/HSA	■	
Anthem Bronze Select PPO 6600/0% w/HSA	■	
Anthem Bronze Select PPO 6900/0% w/HSA	■	
<b>Blue Shield of California</b>		
<b>Off Exchange Package for Small Business</b>		
<b>Off-Exchange HMO Plans<sup>†</sup></b>		
Platinum HMO 0/20	■	
Platinum HMO 0/25	■	
Platinum HMO 0/30	■	
Gold HMO 0/30	■	
Gold HMO 500/35	■	
Gold HMO 1000/30	■	
Gold HMO 1500/35	■	
Silver HMO 2350/65	■	
<b>Off-Exchange PPO Plans<sup>††</sup></b>		
Platinum PPO 0/0	■	
Platinum PPO 0/10	■	
Platinum PPO 250/15	■	
Gold PPO 0/20	■	
Gold PPO 500/30	■	
Gold PPO 750/30	■	
Gold PPO 1200/35	■	
Silver PPO 1800/55	■	
Silver PPO 2300/45	■	
Bronze PPO 5000/70		■
Bronze PPO 6850/65		■
Bronze PPO 6500/50		■
<b>Off-Exchange PPO Savings Plans<sup>††</sup></b>		
Silver PPO Savings 2000/25%	■	

(Continued)

\* These Anthem plans have a different per member deductible amount depending on whether the subscriber is enrolled as self only, or has enrolled dependents within the plan. Plans have been designed in this manner to comply with both AB1305 and IRS minimum deductible and out-of-pocket maximum requirements for embedded high deductible health plans.

**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
--	------------	----------------

**Blue Shield of California (Cont.)**

Silver PPO Savings 2500/35%	■	
Bronze PPO Savings 5300/40%		■
Bronze PPO Savings 6900		■

**Blue Shield Mirror Package for Small Business**

**Blue Shield Mirror HMO Plans\***

Mirror Platinum 90 HMO 0/15	■	
Mirror Gold 80 HMO 250/25	■	
Mirror Silver 70 HMO 2250/50	■	

**Blue Shield Mirror PPO Plans\*\***

Mirror Platinum 90 PPO 0/15	■	
Mirror Gold 80 PPO 250/25	■	
Mirror Silver 70 PPO 2250/50	■	
Mirror Bronze 60 PPO 6300/65 + Child Dental		■

\*All HMO plans available on the Access+ HMO®, Local Access+ HMO®, or Trio ACO networks

\*\*All PPO plans available in the Full PPO network or the Tandem PPO network

**CalCPA Health**

<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		■

**CaliforniaChoice®**

<b>HMO</b>		
Platinum HMO A (Anthem, Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Platinum HMO B (Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Platinum HMO C (Health Net, Sharp, UnitedHealthcare)	■	
Platinum HMO D (Health Net)	■	
Platinum HMO E (Health Net)	■	
Gold HMO A (Anthem, Health Net, Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Gold HMO B (Anthem, Health Net, Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Gold HMO C (Health Net, UnitedHealthcare, Western Health)	■	
Gold HMO D (Health Net, Sharp, Western Health)	■	
Gold HMO E (Health Net)	■	
Gold HMO F (Health Net)	■	
Silver HMO A (Anthem, Health Net, Kaiser, Sharp, UnitedHealthcare, Western Health)	■	
Silver HMO B (Anthem, Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Silver HMO C (Health Net, Kaiser, Sharp, Sutter Health Plus, UnitedHealthcare, Western Health)	■	
Silver HMO D (Kaiser, UnitedHealthcare)	■	
Bronze HMO A (Health Net, Kaiser)	■	
Bronze HMO A (Sharp, Sutter Health Plus, UnitedHealthcare)		■
Bronze HMO B (UnitedHealthcare)	■	
Bronze HMO B (Sharp, Sutter Health Plus, Western Health)		■
Bronze HMO C (Kaiser)	■	
Bronze HMO C (Western Health)		■

<b>PPO</b>		
Gold PPO A (Anthem)	■	
Gold PPO B (Anthem)	■	
Gold PPO C (Anthem)	■	
Gold PPO D (Anthem)	■	
Gold PPO E (Anthem)	■	
Silver PPO A (Anthem)	■	
Silver PPO B (Anthem)	■	
Silver PPO C (Anthem)	■	
Bronze PPO A (Anthem)		■
Bronze PPO B (Anthem)		■

<b>EPO</b>		
Platinum EPO A (Oscar)	■	
Platinum EPO B (Oscar)	■	
Gold EPO A (Oscar)	■	

	CREDITABLE	NON-CREDITABLE
--	------------	----------------

**CaliforniaChoice® (Cont.)**

Gold EPO B (Oscar)		■
Gold EPO C (Oscar)		■
Gold EPO D (Oscar)		■
Silver EPO A (Anthem, Oscar)		■
Silver EPO B (Anthem, Oscar)		■
Silver EPO C (Oscar)		■
Bronze EPO A (Oscar)		■
Bronze EPO A (Anthem)		■
Bronze EPO B (Oscar)	■	

**HSA-Compatible**

Gold HMO D (Western Health)	■	
Silver EPO A (Oscar)	■	
Silver EPO B (Anthem)	■	
Silver HMO C (Sutter Health Plus, Western Health)	■	
Silver HMO D (Kaiser)	■	
Bronze EPO A (Oscar)	■	
Bronze HMO B (Sharp, Sutter Health Plus, UnitedHealthcare)		■
Bronze HMO C (Kaiser)	■	
Bronze HMO C (Western Health)		■

**Chinese Community Health Plan**

<b>HMO</b>		
Ruby 10	■	
Ruby 20	■	
Ruby 40	■	
Opal 25	■	
Opal 50	■	
Platinum 90	■	
Gold 80	■	
Silver 70	■	
Bronze 60	■	
Bronze 60 HDHP	■	

**E.D.I.S.**

Contact your Word & Brown Representative

**Health Net**

<b>HMO</b>		
WholeCare HMO Platinum \$10	■	
WholeCare HMO Platinum \$20	■	
WholeCare HMO Platinum \$30	■	
WholeCare HMO Gold \$30	■	
WholeCare HMO Gold \$35	■	
WholeCare HMO Gold \$50	■	
WholeCare HMO Silver \$50	■	
CommunityCare Silver \$50	■	
CommunityCare Bronze 60 HMO 6300/65	■	
Full Network HMO Platinum \$10	■	
Full Network HMO Platinum \$20	■	
Full Network HMO Platinum \$30	■	
Full Network HMO Gold \$30	■	
Full Network HMO Gold \$35	■	
Full Network HMO Gold \$40	■	
Full Network HMO Gold \$50	■	
Full Network HMO Silver \$50	■	
SmartCare HMO Platinum \$10	■	
SmartCare HMO Platinum \$20	■	
SmartCare HMO Platinum \$30	■	
SmartCare HMO Gold \$30	■	
SmartCare HMO Gold \$35	■	
SmartCare HMO Gold \$40	■	
SmartCare HMO Gold \$50	■	
SmartCare HMO Silver \$50	■	
Salud HMO y Más Platinum \$10	■	
Salud HMO y Más Platinum \$20	■	
Salud HMO y Más Platinum \$30	■	
Salud HMO y Más Gold \$30	■	
Salud HMO y Más Gold \$35	■	
Salud HMO y Más Gold \$40	■	
Salud HMO y Más Gold \$50	■	
Salud HMO y Más Silver \$50	■	
PureCare HSP Platinum 90 0/15	■	
PureCare HSP Gold 80 250/25	■	
PureCare HSP Silver 70 2250/50		■
PureCare HSP Bronze 60 6300/65		■

<b>PPO</b>		
Platinum 90 PPO 0/15	■	
Platinum 90 PPO 250/15	■	
Gold 80 PPO 0/30	■	
Gold 80 PPO 250/25	■	
Gold 80 PPO 500/20	■	
Gold 80 PPO 1000/30	■	
Gold 80 Value PPO 750/15	■	
Silver 70 PPO 2250/50	■	
Silver 70 PPO 2250/55	■	
Silver 70 Value PPO 1700/50	■	

(Continued)

**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>Health Net (Cont.)</b>		
Silver 70 HDHP PPO 1400/40%	■	
Bronze 60 PPO 6300/65		■
Bronze 60 HDHP PPO 5600/20%		■
EnhancedCare Platinum 90 PPO 250/15	■	
EnhancedCare Gold 80 PPO 0/30	■	
EnhancedCare Gold 80 PPO 500/20	■	
EnhancedCare Gold 80 PPO 1000/30	■	
EnhancedCare Gold 80 Value PPO 750/15	■	
EnhancedCare Silver 70 PPO 2250/55	■	
EnhancedCare Silver 70 Value PPO 1700/50	■	
EnhancedCare Silver 70 HDHP PPO 1400/40%	■	
EnhancedCare Bronze 60 HDHP PPO 5600/20%		■
PureCare Platinum 90 HSP 0/15	■	
PureCare Gold 80 HSP 250/25	■	
PureCare Silver 70 HSP 2250/50	■	
PureCare Bronze 60 HSP 6300/65		■

**Kaiser Permanente\*\*\***

HMO	CREDITABLE	NON-CREDITABLE
Platinum 90 HMO 0/10 + Child Dental Alt	■	
Platinum 90 HMO 0/15 + Child Dental	■	
Gold 80 HMO 250/25 + Child Dental	■	
Gold 80 HMO 500/30 + Child Dental Alt	■	
Silver 70 HMO 1650/55 + Child Dental Alt	■	
Silver 70 HMO 1800/55 + Child Dental Alt	■	
Silver 70 HMO 2250/50 + Child Dental	■	
Bronze 60 HMO 6300/65 + Child Dental	■	

PPO	CREDITABLE	NON-CREDITABLE
Platinum 90 PPO 0/15 + Child Dental	■	
Gold 80 PPO 250/25 + Child Dental	■	
Silver 70 PPO 2250/50 + Child Dental	■	
Bronze 60 PPO 6300/65 + Child Dental	■	

HSA-Compatible HMO	CREDITABLE	NON-CREDITABLE
Silver 70 HDHP HMO 2500/20% + Child Dental	■	
Bronze 60 HDHP HMO 6900/0 + Child Dental	■	

HRA-Compatible HMO	CREDITABLE	NON-CREDITABLE
Gold 80 HRA HMO 2250/35 + Child Dental	■	

MediExcel Health Plan	CREDITABLE	NON-CREDITABLE
Plan P5	■	
Plan P20	■	
Platinum Mirror Plan	■	
Gold Mirror Plan		■

National General	CREDITABLE	NON-CREDITABLE
<b>PPO</b>		
All creditable except those that don't offer an Rx Copay - Contact Rep	■	

Oscar	CREDITABLE	NON-CREDITABLE
<b>EPO</b>		
Platinum 90 EPO \$0/\$15 + Child Dental	■	
Platinum \$0 Option 1	■	
Platinum \$0 Option 2	■	
Gold 80 EPO \$0/\$30 + Child Dental Alt	■	
Gold \$500 EPO	■	
Gold \$1,000 EPO	■	
Gold \$2,000 EPO	■	
Gold 80 EPO \$250/\$25 + Child Dental	■	
Silver \$0 EPO	■	
Silver 70 EPO \$1,500/\$50 + Child Dental Alt	■	
Silver 70 EPO \$2,250/\$50 + Child Dental	■	
Silver \$2,000 EPO	■	
Bronze 60 EPO \$6,300/\$65 + Child Dental	■	
Bronze \$8,150 Option 1	■	
Bronze \$8,150 Option 2	■	
Silver 70 HDHP EPO \$2,500/20% + Child Dental	■	
Bronze 60 HDHP EPO \$6,900/0% + Child Dental	■	

Sharp Health Plan	CREDITABLE	NON-CREDITABLE
<b>HMO</b>		
Platinum 90 HMO NG 1	■	
Platinum 90 HMO NG 2	■	
Platinum 90 HMO NG 3	■	
Platinum 90 HMO NG 4	■	
Platinum 90 HMO NG 7	■	
Platinum 90 HMO NG 8	■	
Gold 80 HMO NG 1	■	
Gold 80 HMO NG 2	■	
Gold 80 HMO NG 3	■	
Gold 80 HMO NG 4	■	
Gold 80 HMO NG 5	■	
Gold 80 HMO NG 6	■	
Gold 80 HMO NG 7	■	

	CREDITABLE	NON-CREDITABLE
--	------------	----------------

Sharp Health Plan (Cont.)	CREDITABLE	NON-CREDITABLE
Silver 70 HMO NG 1	■	
Silver 70 HMO NG 2	■	
Bronze 60 HDHP NG 1*	■	

Mirrored Plans	CREDITABLE	NON-CREDITABLE
Sharp Premier Platinum 90 HMO 0/15 + Child Dental	■	
Sharp Performance Platinum 90 HMO 0/15 + Child Dental	■	
Sharp Premier Gold 80 HMO 250/25 + Child Dental	■	
Sharp Performance Gold 80 HMO 250/25 + Child Dental	■	
Sharp Premier Silver 70 HMO 2250/50 + Child Dental	■	
Sharp Performance Silver 70 HMO 2250/50 + Child Dental	■	
Sharp Premier Silver 70 HDHP HMO 2500/20% + Child Dental	■	
Sharp Performance Bronze 60 HMO 6300/65 + Child Dental	■	
Sharp Premier Bronze 60 HDHP HMO 6900/0 + Child Dental*	■	

Pseudo-Mirrored Plans	CREDITABLE	NON-CREDITABLE
Sharp Platinum 90 HMO 0/15/10% + Child Dental (Pr/V/C)	■	
Sharp Platinum 90 HMO 0/15/250 + Child Dental (Pe/V/C)	■	
Sharp Gold 80 HMO 250/25/20% + Child Dental (Pr/V/C)	■	
Sharp Gold 80 HMO 250/25/600 + Child Dental (Pe/V/C)	■	
Sharp Silver 70 HMO 2250/50/20% + Child Dental (Pr/V/C-20%)	■	
Sharp Silver 70 HMO 2250/50/20% + Child Dental (Pe/V/C-300)	■	
Sharp Silver 70 HDHP HMO 2500/20%/20% + Child Dental (Pe/V/C)	■	
Sharp Bronze 60 HMO 6300/65/40% + Child Dental (Pr/V/C)†	■	
Sharp Bronze 60 HDHP HMO 6900/0/0 + Child Dental (Pe/V/C)	■	

**PPO Companion Plans**  
 Please contact your Word & Brown representative

HSA-Compatible HMO (Mirrored Plans)	CREDITABLE	NON-CREDITABLE
Silver 70 HDHP HMO 2500/20%/20% + Child Dental *	■	
Bronze 60 HDHP HMO 6000/40%/40% + Child Dental**	■	
Bronze 60 HDHP NG 1**		■

SIMNSA Health Plan**	CREDITABLE	NON-CREDITABLE
<b>HMO</b>		
5/15/250	■	
10/15/250	■	

Sutter Health Plus	CREDITABLE	NON-CREDITABLE
Platinum MS38 HMO	■	
Platinum MS41 HMO	■	
Platinum MS60 HMO	■	
Gold MS7 HMO	■	
Gold MS42 HMO	■	
Gold MS63 HMO	■	
Silver SD37 HDHP HMO	■	
Silver MS64 HMO	■	
Bronze SD28 HDHP HMO		■
Bronze MS66 HMO		■

UnitedHealthcare	CREDITABLE	NON-CREDITABLE
<b>HMO - Choice Simplified</b>		
Platinum	\$0 Ded.	■
Gold	\$0 Ded.	■
Gold	\$500 Ded.	■
Gold	\$1,250 Ded.	■
Gold (P.A)	\$1,500 Ded.	■
Silver	\$2,250 Ded.	■
Bronze w/Motion	\$6,900	■
Bronze (H.S.A)	\$6,900	■
Bronze HDHP	\$7,200	■

State Mirrored Plans	CREDITABLE	NON-CREDITABLE
Platinum	\$0 Ded.	■
Gold	\$250 Ded.	■
Silver	\$2,250 Ded.	■
Bronze (H.S.A)	\$6,900 Ded.	■

PPO/EPO Plans	CREDITABLE	NON-CREDITABLE
Platinum	\$0 Ded.	■
Platinum	\$250 Ded.	■
Platinum (P.A)	\$250 Ded.	■
Gold	\$0 Ded.	■

(Continued)

† Plan becomes Medicare Part D Non-Creditable if Sharp is secondary payer to Medicare.

\* Not creditable if Sharp is secondary payer to Medicare

\*\* SIMNSA does not have an RX bin or PCN number as we do not dispense medications here in the United States. SIMNSA does not use a PMB, we have contracted pharmacies in Mexico where our members get their medications filled. SIMNSA does have a tax ID number for our Plan, 98- 0197925. Mailing address is below. SIMNSA HEALTH PLAN 2088 Otay Lakes Road#102 Chula Vista, CA 91915

\*\*\* Please note Kaiser Permanente summary information is contained herein but Kaiser Permanente has not reviewed the information contained within this guide and Word & Brown therefore cannot guarantee its accuracy. Please contact your Word & Brown sales representative in the event of any discrepancies. The information provided in this guide is not intended to describe all of the benefits included in each plan, nor is it designed to serve as the "Evidence of Coverage" or "Certificate of Insurance." The KFHP Evidence of Coverage and the KPIC Certificate of Insurance contain a complete explanation of benefits, exclusions, and limitations.

**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
<b>UnitedHealthcare (Cont.)</b>			
Gold	\$500 Ded.	■	
Gold	\$1,000 Ded.	■	
Gold (P.A)	\$1,500 Ded.	■	
Silver	\$1,500 Ded.	■	
Silver	\$2,250 Ded.	■	
Silver HDHP w/ Motion	\$2,300 Ded.	■	
Bronze HDHP w/ Motion	\$6,900 Ded.		■
Bronze HDHP	\$7,200 Ded.	■	
<b>State Mirrored PPO/EPO</b>			
Platinum	\$0 Ded.	■	
Gold	\$250 Ded.	■	
Silver	\$2,250 Ded.	■	
Bronze	\$6,300 Ded.		■
<b>Non-Differential PPO</b>			
Silver	\$2250 Ded.	■	
<b>Western Health Advantage</b>			
<b>HMO</b>			
Gateway 20 Platinum 90 HMO		■	
Gateway 30 Platinum 90 HMO		■	
Gateway 70 Platinum 90 HMO		■	
Sierra 25 Platinum 90		■	
Capital 15 Platinum 90 HMO		■	
Gateway 4010 Gold 80 HMO		■	
Gateway 4020 Gold 80 HMO		■	
Sierra 40 Gold 80		■	
Sierra 2000 Gold 80		■	
Sierra 4010 Gold 80		■	
Capital 250 Gold 80 HMO		■	
Gateway 5020 Silver 70 HMO		■	
Sierra 50 Silver 70		■	
Capital 2250 Silver 70 HMO		■	
Capital 6300 Bronze 60 HMO		■	
<b>HDHP</b>			
Gateway 2000 Gold 80 HDHP HMO		■	
Capital 2000 Silver 70 HDHP HMO			■
Sierra 6900 Bronze 60 HDHP HMO			■
Gateway 6900 Bronze 60 HDHP HMO		■	

Sierra Plans available only through Cal Choice