The Gold 80 Trio HMO plan from Blue Shield of California, effective January 1, 2025, offers coverage for individuals and families with an overall deductible of \$0. Certain preventive services are covered prior to meeting the deductible, although copayments or coinsurance may apply. The out-of-pocket limit is \$8,700 for individuals and \$17,400 for families when using participating providers; however, expenses such as copayments, premiums, and non-covered healthcare do not count towards this limit. Utilizing network providers results in lower costs, while out-of-network services may incur higher charges and balance billing. Referrals are required to see specialists under this plan. For common medical events, costs for participating providers include a \$35 copayment for primary care visits, \$65 for specialist visits, and no charge for preventive care. Diagnostic tests and imaging require preauthorization, with specific copayments outlined. Prescription drug coverage varies by tier, with copayments ranging from \$15 to \$85 for retail prescriptions, and preauthorization is necessary for select drugs. Emergency services incur a facility fee of \$330, while urgent care visits cost \$35. Hospital stays and inpatient services also require preauthorization, with specific daily fees applicable. Excluded services include chiropractic care, hearing aids, non-emergency care outside the U.S., and adult dental care, among others, while other covered services like acupuncture and bariatric surgery may have limitations. The plan provides minimum essential coverage, and individuals can seek assistance for grievances or appeals through Blue Shield Customer Service or the California Department of Managed Health Care. For further details, policyholders can refer to the complete terms of coverage available online or by phone. The policy outlines various coverage details and cost-sharing structures for different medical services, emphasizing that actual costs may vary based on the care received and provider charges. For instance, in a prenatal care and childbirth scenario, the total cost is estimated at \$12,700, with the insured responsible for \$1,400 after accounting for \$0 in deductibles, \$1,300 in copayments, and \$60 in exclusions. Similarly, for managing Type 2 diabetes, the total cost is \$5,600, with the insured paying \$1,700, which includes \$0 in deductibles, \$1,500 in copayments, and \$20 in exclusions. In a case of a simple fracture, the total cost is \$2,800, with the insured's total payment being \$900, consisting of \$0 in deductibles, \$800 in copayments, and no exclusions. Blue

Shield of California complies with civil rights laws and offers language assistance services at no extra cost, with notices available online for nondiscrimination and language assistance. For further inquiries, customers can contact their Customer Care service.