

The Bronze 7500 Trio HMO plan from Blue Shield of California, effective on or after January 1, 2025, offers coverage for individuals and families, featuring an overall deductible of \$7,500 per individual and \$15,000 per family for participating providers. Members must pay out-of-pocket until the deductible is met, although certain preventive services are covered without cost-sharing prior to reaching the deductible. The out-of-pocket limit is set at \$8,850 per individual and \$17,700 per family, excluding copayments for specific services, premiums, and non-covered healthcare. Utilizing network providers results in lower costs, while out-of-network services may incur balance billing. Referrals are necessary to see specialists.

The plan outlines specific costs for common medical events, such as \$60 for primary care visits and \$85 for specialist visits, with preventive care at no charge. Diagnostic tests have established fees, including \$65 for lab work, while emergency services require 50% coinsurance for facility and physician fees. Mental health services follow a similar structure, with outpatient visits costing \$60 and inpatient services needing preauthorization. Outpatient surgery incurs a \$150 fee for physician services, with facility fees subject to 50% coinsurance.

Certain services are excluded from coverage, including cosmetic surgery, infertility treatment, adult dental care, and non-emergency care outside the U.S. Other covered services, like acupuncture and chiropractic care, may have limitations. The plan allows for continuation of coverage through various agencies, and members have the right to appeal claims denials, with support available from Blue Shield Customer Service and the California Department of Managed Health Care. For comprehensive details, members are encouraged to refer to the complete terms of coverage or contact customer service.

This insurance plan provides Minimum Essential Coverage, encompassing various health insurance options such as those available through the Marketplace, Medicare, Medicaid, CHIP, and TRICARE, but it does not meet Minimum Value Standards, which may enable eligible individuals to receive a

premium tax credit for purchasing a plan through the Marketplace. The overall deductible remains at \$7,500, with a specialist copayment of \$85 and a hospital facility coinsurance of 50%. Illustrative examples of potential costs include childbirth, totaling \$12,700 with the insured paying \$8,900 after deductibles, copayments, and coinsurance; managing Type 2 diabetes, totaling \$5,600 with the insured paying \$2,800; and an emergency room visit costing \$2,800 with the insured responsible for \$2,100. These examples serve to illustrate potential costs but are not definitive cost estimators, as actual expenses may vary based on specific care received and provider charges. The plan complies with civil rights laws and provides language assistance services at no additional cost, with nondiscrimination and language assistance notices available online. For further inquiries, customers can contact Blue Shield of California or visit their website.