

SMALL BUSINESS SOLUTIONS

For Employers With 2-50 Employees

Healthcare *for the way* **WE LIVE**



Blue Shield of California
Health Net
Kaiser Permanente
Sharp Health Plan
Western Health Advantage



CaliforniaChoice
Your Health. Your Choice.®



The CaliforniaChoice Difference

CaliforniaChoice is California's leader in employee-choice/consumer directed health plans and HSAs. Our selection of benefit plan designs meets the unique needs of any of your employees – those individuals who may only have regular check-ups and who want to save for the future, to those employees with families and young children who may see doctors more frequently.

Employee Choice

Each employee selects from 5 health plans offering thousands of providers. They then review the 10 benefit plan designs and costs, and determine whether their personal needs require that they consider increasing their monthly payroll deduction to “buy up” to a richer plan than is covered by your healthcare contributions.

You decide how much to spend each month — not an insurance company

You decide how much you want to contribute monthly to your employee's healthcare costs – a fixed dollar amount, a fixed percentage of a selected benefit level, or a fixed amount that you want your employees to contribute each month for a specific health plan and benefit level.

Your monthly contribution is, in a sense, a healthcare *allowance* that reduces an employee's individual healthcare costs and can be spent any way the employee chooses – it puts the power of choice in the employee's hands and cost control back in yours.

Wellness

CaliforniaChoice is a program that changes as you and your family's needs change.

All CaliforniaChoice members get access to our award winning website that provides great health related information, links and special offers – from diet and exercise to raising a family and managing stress – from health assessment programs and health coaches to vitamin discounts and behavior improvement programs.

Healthcare *for the way* WE LIVE

*CaliforniaChoice has delivered
employee choice health plan
solutions to California businesses
for over a decade*



Enrolling in CaliforniaChoice is fast and easy

After you confirm your monthly contribution level, participation and eligibility requirements, enrollment is completed by filling out only one application and submitting a current census.

Your employees receive a personalized worksheet that shows them their costs by week, weeks, or month, for any health plan option minus your contribution. They then choose benefits based on their needs for the following year. It's that simple!

One monthly bill

Whether your company has 2 employees or 50, you'll appreciate the simplicity of the CaliforniaChoice monthly bill that identifies all employees, dependents, levels of coverage, employer contribution and employee deductions – all in one document. You no longer need to keep track of multiple bills and write more than one check. Your business becomes easier.

Renewal is even easier than enrollment

During your annual Open Enrollment, employees can select a different health plan and/or change their benefit level without leaving the program. And, you can change your contribution level depending on your company's changing financial situation – you decide how much to spend.

Best of all, you can accomplish everything through our dedicated support staff or online at calchoice.com.

You'll never have to shop for health benefits again

Don't let rising costs keep you from providing your employees with the healthcare they deserve. Make the move to CaliforniaChoice – and get more options than any one health plan can provide.

Contact your Broker or
call CaliforniaChoice

800.542.4218



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HMOs

CalChoice HMO 10, 25, 40, ELECT Open Access

Four coverage options offer affordable co-payments for office visits and prescriptions with no annual deductibles to groups of all sizes. CalChoice HMO 10, 25 and 40 are available through all participating health plans*.

MEDICAL BENEFITS	CalChoice HMO - 10	CalChoice HMO - 25	CalChoice HMO - 40	ELECT Open Access Available only through Health Net
Deductible	No Deductible	No Deductible	No Deductible	No Deductible
Dr. Office Visits	\$10 Copay	\$25 Copay	\$40 Copay**	\$25 Copay HMO \$40 Copay PPO
Hospital Services	\$300 Copay - 100%	\$500 Copay per day Max \$1,000	\$500 Copay per day**	\$500 Copay per day Max \$1,000
In-Patient Physician Fees	100%	100%	100%**	100%
Emergency Room	\$50 Copay (waived if admitted)	\$100 Copay (waived if admitted)	\$250 Copay (waived if admitted)	\$100 Copay (waived if admitted)
RX Benefit - Generic	\$10	\$15	\$20**	\$15
RX Benefit - Brand	\$20	\$25	\$35**	\$25
Out-of-Pocket Maximum- Individual/Family	\$2,000 / \$4,000	\$2,500 / \$5,000	\$3,000 / \$6,000	\$2,500 / \$5,000
Out-Patient Surgery	\$100 Copay	\$300 Copay	\$500 Copay	\$300 Copay
Ambulance	\$50 per trip	\$50 per trip	\$200 per trip	\$50 per trip

* Salud con Health Net is coupled with the CalChoice 25 Plan.

** Salud Mexico provides cross-border access to more than 140 doctors and offers \$5 doctor visits, \$10 emergency room visits and 100% hospital coverage.

** Copayment shall be up to the designated amount, or 50% of the provider's contracted rate, whichever is less.

PPOs

CalChoice PPO 500*, 1000, 2400

Three great PPO plan designs with Blue Shield of California offer low monthly premiums and the largest selection of doctors throughout the state.

MEDICAL BENEFITS	CalChoice PPO 500*		CalChoice PPO 1000		CalChoice PPO 2400	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	\$500 / \$1,500	\$500 / \$1,500	\$1,000 / \$2,500	\$1,000 / \$2,500	\$2,400 / \$4,800	\$2,400 / \$4,800
Dr. Office Visits	\$30 copay ²	60% ¹	\$35 copay ²	50% ¹	\$40 copay ²	50% ¹
Hospital Services	\$500 copay - 80%	60% ³	\$1,000 Ded. - 70%	50% ³	80%	50% ³
In-Patient Physician Fees	80%	60% ³	70%	50% ³	80% ³	50% ³
Emergency Room	\$125 copay ¹ - 80%	\$125 copay ¹ - 80%	\$150 copay ¹ - 70%	\$150 copay ¹ - 70%	\$150 copay ¹ - 80%	\$150 copay ¹ - 80%
RX Benefit	\$15	\$15	\$15	\$15	\$15	\$15
Out-of-Pocket Maximum- Individual/Family	\$3,500 / \$7,000	\$10,000 / \$20,000	\$4,000 / \$8,000	\$10,000 / \$20,000	\$5,000 / \$10,000	\$10,000 / \$20,000
Out-Patient Surgery	\$500 copay ¹ - 80%	60% ³	\$500 copay ¹ - 70%	50% ³	80%	50% ³
Ambulance	80%	80%	70%	70%	80%	80%

* Available to groups with 5 or more employees.

1 - Copayments for services do not count toward the Copayment Maximum, and continue to be charged once the Copayment Maximum is reached.

2 - The office visit copayment is not subject to the Plan deductible. Other covered services received during or in connection with the office visit, such as lab tests and x-rays, are subject to the Plan deductible and the applicable copayment.

3 - The maximum allowed charge for non-emergency hospital services received from a Non-Preferred Hospital is \$600 per day. Members are responsible for 40% or 50% (based on plan selection) of this \$600 per day, plus all charges in excess of \$600. Physician Services are covered separately at 40% of 50% of Allowable Amounts.

Ancillary Benefits

CaliforniaChoice includes dental coverage and a discount vision plan at no additional cost

Dental	First Dental Health Access 100	Included at no additional cost, offers services at reduced fees and over 12,000 dentists and specialists.
	SmileSaver Dental 3000 and 1000 HMO	Offers a low monthly payment, office visits, oral exams, X-rays and 2 cleanings per year – free!
	AIG American General EPO and PPO	Offers low deductibles that allow members to visit any dental provider they wish, in or out-of-network.
Vision	The Vision One Eyecare Program from Cole Managed Vision	Offers all CaliforniaChoice members discounts on frames, lenses, and eye examinations at any Sears, JCPenney, Target optical centers and participating Pearle Vision locations.
	The Voluntary Vision Program	Offers comprehensive vision benefits and prescription eyewear through a vast network of doctors to any or all employees – Eye exams with \$10 copay for eyeglasses and \$40 for contact lenses every twelve months.
Chiropractic and Acupuncture	Landmark Healthplan's Chiropractic and Acupuncture Benefits	Available for less than \$5 per month (for an entire family) with co-payments as low as \$15 per visit for up to 20 visits per year with free personalized health coaching and education services through its WellCall program.
Group Term-Life and ADD	Security Financial Life	Designed to help your employees preserve their savings for their families with amounts ranging from \$10,000 to \$75,000 based on the total number of eligible employees. (Coverage also includes Accidental Death & Dismemberment and a living benefits provision).

Consumer Directed Plans

Three coverage options that offer greater control over your healthcare decisions

CalChoice HSA 1500 & HSA 2400

The CalChoice HSA 1500 & HSA 2400 are HSA eligible high deductible health plans that provide security against catastrophic medical costs and allow employees the option to contribute up to \$1,500 per individual/\$3,000 per family or \$2,400 per individual/\$4,800 per family into a tax advantaged health savings account. Employees accumulate tax-free interest on their HSA balances and don't pay any taxes on their withdrawals when using the money to pay for qualified medical expenses. Unused HSA balances can be carried forward year-to-year and even used for post-retirement health expenses.

Our selection of 3 leading HSA banks – The Bancorp Bank, HSA Bank, Mellon – offer competitive interest rates and other comprehensive investment options.

Active Choice 500*

This plan offers first-dollar services, carry over credit of unused funds, and no front-end medical deductibles.

Members can use up to \$500 per individual/\$1,000 per family for physician office visits, routine physicals, immunizations and diagnostic testing. Members pay no out-of-pocket expenses until their first-dollar limit is used and then pay 100% of the charges for covered physician and outpatient services until their calendar year copayment maximum is met.

Funds remaining at the end of the year can be rolled over to the following year and accumulate over time as long as the employee remains with the same plan and employer.

Note: We encourage you to consult with your tax advisor to determine appropriate eligibility requirements and tax advantages for participating in an HSA plan. CaliforniaChoice does not offer tax advice.

MEDICAL BENEFITS	CalChoice HSA 1500		CalChoice HSA 2400		Active Choice 500*	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	\$1,500 / \$3,000 ⁶	\$1,500 / \$3,000 ⁶	\$2,400 / \$4,800 ⁶	\$2,400 / \$4,800 ⁶	No Deductible	No Deductible
Dr. Office Visits	80%	50%	80%	50%	100% up to \$500 / \$1,000 ^{1,2}	
Hospital Services	80%	50% ⁴	80%	50% ⁴	\$500 Copay - 70%	50% ⁴
In-Patient Physician Fees	80%	50%	80%	50%	70%	50%
Emergency Room	\$50 copay - 80%	\$50 copay - 80%	\$50 copay - 80%	\$50 copay - 80%	\$100 Copay ³ - 70%	\$100 Copay ³ - 70%
RX Benefit	80% ⁸	80% ⁸	80% ⁸	80% ⁸	\$10	\$10
Out-of-Pocket Maximum- Individual/Family	\$2,800 / \$5,600 (Includes deductible)	\$2,800 / \$5,600 (Includes deductible)	\$3,200 / \$5,800 (Includes deductible)	\$3,200 / \$5,800 (Includes deductible)	\$5,000/\$10,000	\$10,000 / \$20,000
Out-Patient Surgery	80%	50% ⁴	80%	50% ⁴	\$400 Copay ³ - 70%	50% ^{3,4}
Ambulance	80%	80%	80%	80%	70%	70%

* Available to groups with 5 or more employees.

Note: Out-of-network benefits are covered at a Negotiated Fee. Plans exclude coverage for pre-existing conditions (except for pregnancy) for the first six months of coverage unless replacing prior creditable coverage.

- Copayments for services do not count toward the Copayment Maximum until the first dollar \$500 (individual) or \$1000 (family) coverage limit has been reached.
- The \$500 (individual) or \$1000 (family) first dollar covers preventive, outpatient and professional & diagnostic services. After the first \$500/\$1000 limit is reached, the member is responsible for all charges until the calendar year maximum is reached; once the calendar year maximum is reached Blue Shield pays 100% of the Allowable Amount. Coverage for non-severe mental & nervous, drug & alcohol, and chiropractic benefits are limited to the first dollar amounts for individual and family only.
- Copayments for services do not count toward the Copayment Maximum, and continue to be charged one the Copayment Maximum is reached.
- The maximum allowed charge for non-emergency hospital services received from a Non-Preferred Hospital is \$600 per day. Members are responsible for 50% of this \$600 per day, plus all charged in excess of \$600. Physician services are covered separately at 50% of the Allowable Amount.
- Copayment shall be up to the designated amount or 50%, whichever is greater.
- Employees enrolling for single coverage must satisfy the single deductible; for members enrolling with Dependent coverage, the family deductible must be met before any member receives benefits.
- The preventive care and well-baby care office visit copayment is not subject to the Plan deductible. Other covered services received during or in connection with office visits, such as lab tests and x-rays, are subject to the applicable copayment.
- Includes coverage for medically necessary drugs (subject to the plan deductible). Member pays full price and submits prescription drug claims to Blue Shield of California.

Some services rendered by Blue Shield Affiliated providers will have higher copays. Please refer to the CaliforniaChoice Program brochure for more plan benefit information.



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CaliforniaChoice offers 5 health plans,
10 benefit plan designs,
HSAs, Dental, Vision, Chiropractic and Life –
all in one package with one monthly bill.

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www.calchoice.com

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A CHOICE Administrators® Program