

Just for Californians!

Your options will be different, depending on the medical insurance carrier you choose.

For starters, each insurance carrier in California can choose to offer each coverage level either as an option that offers in- and out-of-network benefits (e.g., a PPO) **or** an option that offers in-network benefits only (e.g., an HMO).

Review the table below to see which insurance carriers offer out-of-network benefits for the coverage levels you're considering:



	BRONZE, BRONZE PLUS, SILVER	GOLD	GOLD II	PLATINUM
Aetna	In- and out-of-network	In- and out-of-network	N/A	In- and out-of-network
Cigna	In- and out-of-network	N/A	In-network only	In-network only
Health Net	Northern California: In-network only Southern California: In- and out-of-network	N/A	In-network only	Northern California: In-network only Southern California: In- and out-of-network
Kaiser Permanente	In-network only	N/A	In-network only	In-network only
UnitedHealthcare	In- and out-of-network	In- and out-of-network	N/A	In- and out-of-network

Gold or Gold II?

Insurance carriers can choose to offer **either the standard Gold option or a Gold II option—not both**. The Gold II option **only** offers in-network benefits.

The Gold option is offered by Aetna and UnitedHealthcare. The Gold II option is offered by Cigna, Health Net, and Kaiser Permanente.

Annual Deductible and Out-of-Pocket Maximum (California Residents)

	BRONZE	BRONZE PLUS	SILVER	GOLD	GOLD II	PLATINUM
Annual Deductible (individual/ family)	In-network: \$4,500/\$9,000	In-network: \$2,700/\$5,400	In-network: \$750/\$1,500	In-network: \$600/\$1,200	In-network: N/A	In-network: N/A
	Out-of-network: \$4,500/\$9,000	Out-of-network: \$2,700/\$5,400	Out-of-network: \$1,500/\$3,000	Out-of-network: \$1,200/\$2,400	Out-of-network: N/A	Out-of-network: \$5,000/\$10,000
Annual Out-of-Pocket Maximum (individual/ family)	In-network: \$5,950/\$11,900	In-network: \$3,900/\$7,800	In-network: \$5,000/\$10,000	In-network: \$3,500/\$7,000	In-network: \$5,000/\$10,000	In-network: \$1,500/\$3,000
	Out-of-network: \$11,900/\$23,800	Out-of-network: \$10,000/\$20,000	Out-of-network: \$10,000/\$20,000	Out-of-network: \$7,000/\$14,000	Out-of-network: N/A	Out-of-network: \$10,000/\$20,000

Going Out-of-Network?

Out-of-network charges will **not** count toward your in-network annual deductible or out-of-pocket maximum. The same goes for in-network charges—they will **not** count toward your out-of-network annual deductible or out-of-pocket maximum.

In-Network Benefits (California Residents)

When you enroll, you'll be able to see additional coverage details, and any carrier adjustments to standardized plan benefits. To see summaries when you enroll online, check the boxes next to the options you want to review and click **Compare**. In order to get the most comprehensive information about any specific coverage, call the carrier directly.

	BRONZE, BRONZE PLUS	SILVER	GOLD	GOLD II	PLATINUM
Preventive Care	Covered 100%, no deductible	Covered 100%, no deductible	Covered 100%, no deductible	Covered 100%	Covered 100%
Doctor's Office Visit	You pay 20% after deductible	You pay 30% after deductible	<ul style="list-style-type: none"> You pay \$20 for PCP visit with no deductible You pay \$35 for specialist visit with no deductible 	<ul style="list-style-type: none"> You pay \$20 for PCP visit You pay \$35 for specialist visit 	<ul style="list-style-type: none"> You pay \$20 for PCP visit You pay \$35 for specialist visit
Emergency Room	You pay 20% after deductible	You pay \$150, then 30% after deductible	You pay 20% after deductible	You pay 30%	You pay \$100
Urgent Care	You pay 20% after deductible	You pay 30% after deductible	You pay 20% after deductible	You pay 30%	You pay \$50
Inpatient Care	You pay 20% after deductible	You pay 30% after deductible	You pay 20% after deductible	You pay 30%	You pay \$250
Outpatient Care	You pay 20% after deductible	You pay 30% after deductible	If not an office visit, you pay 20% after deductible	If not an office visit, you pay 30%	If not an office visit, covered 100% ¹

¹There is a \$100 copay for outpatient surgery at a hospital or free-standing facility.

The chart(s) above is a high-level listing of commonly covered benefits across carriers and coverage levels. This chart is intended to provide you with a snapshot of benefits provided across coverage levels. In general, carriers have agreed to the majority of standardized plan benefits. Individual carriers may offer coverage that differs slightly from the standard coverage reflected here.