

CVT HMO Health Plans with Blue Shield Access+ and CVS/caremark
Lawndale Elementary SD - CERTIFICATED, CLASSIFIED, MANAGEMENT, TRUSTEES
October 1, 2026 - September 30, 2027

BENEFIT	HMO Access+ 1, Rx B	
Calendar Year Deductible	\$0	
Coinsurance	Paid at 100%*	
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,000 Family: \$2,000	
Doctor Visits	Primary Care Physician - \$10 Copay Specialist Physician - \$10 Copay with PCP referral; \$30 Copay Access+ Specialist option ⁽⁷⁾	
Preventive Care / Immunizations	Paid at 100%*	
Outpatient Laboratory	Paid at 100%*	
Outpatient Radiology	Doctor Visit - \$10 Copay Outpatient - Paid in full	
Durable Medical Equipment	Paid at 100%*	
Ambulance - Ground / Air	\$100 Copay	
Physical Therapy	\$10 Per Visit	
Chiropractic	\$10 Copay limited up to 30 combined visits per calendar year(PCP prior authorization not required) ⁽⁶⁾	
Acupuncture	Not Covered	
Outpatient Surgery	Paid at 100%*	
Hospital Inpatient	Physician paid at 100%* Inpatient facility services - Paid at 100%* Skilled Nursing - Paid at 100%* Semi-private room	
Hospital Emergency Room	\$100 Copay (Copay waived if admitted as in-patient)	
Urgent Care	\$10 Copay	
Home Health Care	\$10 Per Visit (limited to 100 visits per calendar year)	
Telehealth	Paid at 100% for non-emergency care, call Teladoc 24/7 at (800) 835-2362	
Virtual Physical Therapy	N/A	
Employee Assistance Program (EAP) through Carelon	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	
Prescription Drugs	30-Day Supply ^(4, 9) Generic: \$7 Pref Brand: \$15 Non-Pref Brand: \$30 Specialty: Paid at 70%, \$0 when enrolled in Prudent Rx	90-Day Supply ^(4, 9) Generic: \$15 Pref Brand: \$35 Non-Pref Brand: \$70 Specialty: N/A

Blue Shield HMO Plans:

*** For Covered Expenses Only**

(3) EAP - Up to 6 counseling sessions per covered member, per benefit year (max 2 episodes/courses of treatment).

(4) If you are enrolled in the PrudentRx Copay Program your out-of-pocket cost for specialty medications will be \$0. If you do not enroll in the PrudentRx Copay Program, you will be subject to a 30% coinsurance for your specialty medications.

(6) Chiropractic benefits are offered through ASH.

(7) To use the Access+ Specialist option, a member must select a primary care personal physician who is affiliated with a medical group or IPA that is an Access+ provider group that offers the Access+ Specialist feature.

(9) For GLP-1 information, visit www.cvtrust.org/glp1

This summary is for comparison purposes only. Please refer to the actual benefit booklet for complete benefits at www.cvtrust.org/plan-documents.