

## **Anthem Medicare Preferred (PPO)**

## **County of Orange**

## Custom Plan – Effective January 1, 2020

For additional information, contact First Impressions: Prior to 01/01/2020 at 1-877-411-1647. After 01/01/20 at 1-833-848-8729

TTY users: 711, Monday- Friday 8a.m. – 9p.m. ET

Pharmacy - Retail		
- Generic Drugs on the Prescription Drug List	Preferred Pharmacy	Non Preferred Pharmacy
<ul> <li>Preferred Brand - Medically Necessary Name Brand Drugs</li> </ul>	\$5 copay Generics	\$10 copay Generics
designated as preferred on the Prescription Drug List, with	\$25 copay	\$30 copay
no Generic Equivalent	Preferred Brand	Preferred Brand
	\$45 copay Non-	\$50 copay Non-
<ul> <li>Non-Preferred Brand - Medically Necessary Name Brand</li> </ul>	preferred Brand	preferred Brand
Drugs on the Prescription Drug List with a Generic		
Equivalent and drugs designated non-preferred on the		
Prescription Drug List		
Annual Out-Pocket Maximum for Certain Services	\$3250 combined In and Out of Network for	
	each Medicare eligible	e retiree
Outpatient Facility Services	\$20 copayment	
Hospital Emergency Room or Outpatient Facility	\$50 copayment per visit, waived if admitted	
Urgent Care Facility	\$20 copayment per visit	
Rehabilitative Therapy	\$20 copayment per visit	
Primary Care and Specialist Physician Office Visits	\$20 copayment per visit	
Preventative Services:		
Annual Physical Exam	\$0 copayment per visit	
Well Woman Exam	\$0 copayment per visit	
Routine Vision Care: Eye Exam	\$20 copayment per visit	
Routine Vision Care: One Pair of Approved Glasses	\$150 allowance for Eye wear every 24	
	months	
Durable Medical Equipment	\$0 copayment	
External Prosthetic Appliances	\$0 copayment	
Home Health Services	\$0 copayment	
Hospice Services	\$20 copayment for consultation. Original	
	Medicare covers Hospice care	
Skilled Nursing and Rehabilitation Facilities	\$0 copayment per admission	
Laboratory and Radiology Services	\$0 copayment	
Mental Health Inpatient Services	\$100 copayment per admission	
Mental Health Outpatient Services	\$20 copayment per visit	
Substance Abuse Inpatient Services	\$100 copayment per admission	
Substance Abuse Outpatient Services	\$20 copayment per visit	

## Additional Services & Programs offered:

Health & Wellness Programs

24-hour Nurseline and Audio Library

SilverSneakers -Opportunities to join in fitness promotions and health education seminars.

Special Offers – such as offers from Jenny Craig, Medical ID bracelets, Allergy Relief products, Discounted LASIK laser vision correction

**Smoking Cessation** 

Foreign Travel Benefit

**For claims and other questions once you become a member, please call:** Prior to 01/01/20 call LPPO at 1-877-411-1640, HMO at 1-800-225-2273. After 01/01/2020 call LPPO and HMO at 1-833-848-8730. TTY users: 711, Monday- Friday 8a.m. – 9p.m. ET.

County of Orange website: <a href="http://anthem.com/ca/countyoforange">http://anthem.com/ca/countyoforange</a>

Note: The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information contact the plan.

- Eligible beneficiaries must use network pharmacies to access their prescription drug benefits, except under non-routine circumstances and quantity limitations and restrictions may apply.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits may change on January 1 of each year.

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