

Peralta CCD - Anthem Medicare Advantage Benefit

1/1/2024 Medical Plan

Deductible		\$0
Annual Out-of-Pocket Max		\$0
Primary Care/Specialist		\$0
Emergency/Urgent Care		\$0
Ancillary Benefits	Foreign Travel	\$0 Emergency Care, Inpatient Care and Urgently Needed Care (Medicare-covered)
	Private Duty Nursing	\$0 Annual Benefit Max: \$10,000 per year
	Hearing	\$0 for fitting/evaluation, routine hearing test up to 1 per year \$70 Annual Benefit Max \$500 max benefit amount per ear for hearing aids per year
	Vision	\$0 for routine exam up to 1 every year, \$70 Benefit Max \$0 for eyewear every 2 years, \$100 Benefit Max
	Acupuncture	\$0 for Unlimited Visits
	Chiropractic	\$0 for Unlimited Visits
	Transportation	\$0 copay for routine transportation 36 one-way trips each year
	Fitness Benefit	Silver Sneakers

Rx Plan

	30 Day Retail	90 Day Mail Order	90 Day Retail
Tier 1 Generics	\$1	\$1	\$3
Tier 2 Pref. Brands	\$1	\$1	\$3
Tier 3 Non-Pref. Brands	\$1	\$1	\$3
Tier 4 Specialty	\$1	Limited to 1 month	Limited to 1 month
Part D Gap Coverage	Full Coverage		
Formulary	Full, Comprehensive		
Bonus Drug List	Included		
Select Generics	SG \$0		
Catastrophic Coverage	Current: Custom – Max copay same as initial coverage *Due to the Inflation Reduction Act, effective 1/1/2024, Members will pay \$0 in Catastrophic		
Utilization Management	Standard Part D - Prior Authorization, Step Therapy, Quantity Limits		

* For more information, please see page 5

** Plan includes 90 Day drug supplies for discounted copay except for Specialty medications, these are available at 30-day supplies only.