



California's
Valued Trust

Healthcare Benefits for the
Education Community



LANCASTER SCHOOL DISTRICT
Certificated Active & DPR's
Health & Welfare Benefits
October 2025 - September 2026





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California's
Valued Trust

Medical Plans

CVT PPO Health Plans with Anthem Blue Cross and CVS/caremark

Lancaster SD - CERTIFICATED

October 1, 2025 - September 30, 2026

BENEFIT	PPO 1, Rx A	PPO 3, Rx A	PPO 4, Rx B	PPO 7, Rx C
Calendar Year Deductible	\$0	Individual: \$100 Family: \$200	Individual: \$100 Family: \$200	Individual: \$250 Family: \$500
Coinsurance	Paid at 100%*	Paid at 100%* after deductible is met	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,250 ⁽²⁾ Family: \$2,500 ⁽²⁾	Individual: \$1,250 ⁽²⁾ Family: \$2,500 ⁽²⁾	Individual: \$1,250 ⁽²⁾ Family: \$2,500 ⁽²⁾	Individual: \$2,000 ⁽²⁾ Family: \$4,000 ⁽²⁾
Doctor Visits	Primary Care Physician - \$10 Copay Specialist Physician - \$10 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$20 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$20 Copay	Primary Care Physician - \$30 Copay Specialist Physician - \$30 Copay
Preventive Care / Immunizations	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*
Outpatient Laboratory	Non-Hospital - Paid at 100%* Hospital - \$50 copay, then paid at 100%*	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 100%*	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 90%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 80%*
Outpatient Radiology	Non-Hospital - Paid at 100%* Hospital - \$75 copay, then paid at 100%*	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 100%*	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 90%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 80%*
Durable Medical Equipment	Paid at 100%*	Paid at 100%* after deductible is met	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met
Ambulance - Ground / Air	Paid at 100%* of covered charges	Paid at 100%* after deductible is met	Paid at 90%* after deductible is met	Paid at 80%* after deductible is met
Physical Therapy	Paid at 100%* ⁽¹⁾ (Copay, if applicable.)	Paid at 100%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 90%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80%* ⁽¹⁾ after deductible is met (Copay, if applicable.)
Chiropractic	Paid at 100%* ⁽¹⁾ (Copay, if applicable.)	Paid at 100%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 90%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 80%* ⁽¹⁾ after deductible is met (Copay, if applicable.)
Acupuncture	Paid at 100%* (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 100%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 90%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 80%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year
Outpatient Surgery	Non-Hospital - Paid at 100%* Hospital - \$250 copay, then paid at 100%*	Non-Hospital - Paid at 100%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 100%*	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 90%*	Non-Hospital - Paid at 80%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 80%*
Hospital Inpatient	Paid at 100%* Unlimited days, Semi-private room	Paid at 100%* after deductible is met; Unlimited days, Semi-private room	Paid at 90%* after deductible is met; Unlimited days, Semi-private room	Paid at 80%* after deductible is met; Unlimited days, Semi-private room
Hospital Emergency Room	\$150 Copay (Copay waived if admitted as inpatient) After copay, paid at 100%*	\$150 Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 100%*	\$150 Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 90%*	\$150 Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 80%*
Urgent Care	\$10 Copay	\$20 Copay	\$20 Copay	\$30 Copay
Home Health Care	Paid at 100%* Limited to 100 visits per calendar year	Paid at 100%* after deductible is met Limited to 100 visits per calendar year	Paid at 90%* after deductible is met; Limited to 100 visits per calendar year	Paid at 80%* after deductible is met; Limited to 100 visits per calendar year

BENEFIT	PPO 1, Rx A		PPO 3, Rx A		PPO 4, Rx B		PPO 7, Rx C	
Telehealth	MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. ⁽²⁾ Call 1-888-632-2738 or visit www.mdlive.com/CVT	
Virtual Physical Therapy	Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .		Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .		Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .		Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .	
Employee Assistance Program (EAP) through Carelon	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	
Prescription Drugs	Retail ^(4,9) \$5 Generic \$22 Brand (30-Day Supply)	Mail Order ^(4,9) \$10 Generic \$44 Brand (90-Day Supply)	Retail ^(4,9) \$5 Generic \$22 Brand (30-Day Supply)	Mail Order ^(4,9) \$10 Generic \$44 Brand (90-Day Supply)	Retail ^(4,9) \$7 Generic \$15 Preferred \$30 Non-Preferred (30-Day Supply)	Mail Order ^(4,9) \$15 Generic \$35 Preferred \$70 Non-Preferred (90-Day Supply)	Retail ^(4,9) \$7 Generic \$25 Pref \$40 Non-Pref (30-Day Supply)	Mail Order ^(4,9) \$15 Generic \$60 Pref \$90 Non-Pref (90-Day Supply)

PPO Plans:

* For Covered Expenses Only: When using Non-PPO & Other Health Care Providers, members are responsible for any difference between the covered expense and actual charges, as well as any deductible & percentage copay. All percentages are based on payments to preferred hospitals, physicians and other network providers. Anthem BDC+ required procedures excluded from \$250 outpatient surgery copay.

(1) Non-Par Providers limited to a combined maximum of 13 visits per year.

(2) Retired members enrolled in Medicare: (1) MDLIVE Behavioral Health visits are excluded (2) The PrudentRx program is not applicable and pharmacy cost share will not apply to out of pocket maximums (3) CVT PPO Plans 1-10 pay according to non-duplication of Medicare benefits therefore those plan designs are inclusive of Medicare's payment.

(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.

(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.

CVT PPO Health Plans with Anthem Blue Cross and CVS/caremark

Lancaster SD - CERTIFICATED

October 1, 2025 - September 30, 2026

BENEFIT	Wellness, Rx C	HDHP 1	Bronze
Calendar Year Deductible	Individual: \$500 Family: \$1,000	Individual: \$1,700 Family: \$3,400 (No individual limit applies to family)	Individual: \$5,000 Family: \$10,000
Coinsurance	Paid at 90%* after deductible is met	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,750 Family: \$3,500	Individual: \$5,000 Family: \$10,000 Family = Employee with 1 or more covered dependents. No one individual will pay more than \$5,000.	Individual: \$7,000 Family: \$14,000
Doctor Visits	Primary Care Physician - \$20 Copay Specialist Physician - \$40 Copay	Primary Care Physician - Paid at 90%* after deductible is met Specialist Physician - Paid at 90% after deductible is met	Primary Care Physician - First 3 visits covered in full after \$60 copay per visit; Remaining visits - Paid at 70%* after deductible is met Specialist Physician - Subject to deductible then 70% copay per visit
Preventive Care / Immunizations	Paid at 100%*	Paid at 100%*	Paid at 100%*
Outpatient Laboratory	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$50 copay then paid at 90%*	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Outpatient Radiology	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$75 copay then paid at 90%*	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Durable Medical Equipment	Paid at 90%* after deductible is met	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Ambulance - Ground / Air	Paid at 90%* after deductible is met	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Physical Therapy	Paid at 90%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 90%* ⁽¹⁾ after deductible is met	Paid at 70%* ⁽¹⁾ after deductible is met (Copay, if applicable)
Chiropractic	Paid at 90%* ⁽¹⁾ after deductible is met (Copay, if applicable.)	Paid at 90%* ⁽¹⁾ after deductible is met	Paid at 70%* ⁽¹⁾ after deductible is met (Copay, if applicable)
Acupuncture	Paid at 90%* after deductible is met (Copay, if applicable) Maximum of 12 visits per calendar year	Paid at 90%* after deductible is met. Maximum of 12 visits per calendar year	Paid at 70%* after deductible is met (Copay, if applicable). Maximum of 12 visits per calendar year
Outpatient Surgery	Non-Hospital - Paid at 90%* after deductible is met Hospital - After deductible is met, \$250 copay then paid at 90%*	Paid at 90%* after deductible is met	Paid at 70%* after deductible is met
Hospital Inpatient	Paid at 90%* after deductible is met; Unlimited days, Semi-private room	Paid at 90%* after deductible is met; Unlimited days, Semi-private room	Paid at 70%* after deductible is met; Unlimited days, Semi-private room
Hospital Emergency Room	\$150 Copay; (Copay waived if admitted as inpatient). After deductible is met, copay then paid at 90%*	Paid at 90%* after deductible is met	Subject to Deductible, then \$250 Copay (copay waived if admitted as in-patient)
Urgent Care	\$20 Copay	Paid at 90%* after deductible is met	Subject to deductible, then \$120 Copay
Home Health Care	Paid at 90%* after deductible is met; Limited to 100 visits per calendar year	Paid at 90%* after deductible is met; Limited to 100 visits per calendar year	Paid at 70%* after deductible is met; Limited to 100 visits per calendar year

BENEFIT	Wellness, Rx C		HDHP 1		Bronze	
Telehealth	MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* after deductible is met for non-emergency medical, dermatology, behavioral health, and primary care visits. Call 1-888-632-2738 or visit www.mdlive.com/CVT		MDLIVE - Paid at 100%* for non-emergency medical, dermatology, behavioral health, and primary care visits. Call 1-888-632-2738 or visit www.mdlive.com/CVT	
Virtual Physical Therapy	Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .		Paid at 100%, after deductible is met. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .		Paid at 100%. Call 1-800-644-2478 for virtual musculoskeletal (MSK) benefits by SimpleTherapy .	
Employee Assistance Program (EAP) through Carelton	Paid at 100% - Visit www.careltonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.careltonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾		Paid at 100% - Visit www.careltonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	
Prescription Drugs	Retail ^(4,9)	Mail Order ^(4,9)	Retail ^(4,9)	Mail Order ^(4,9)	Retail ^(4,9)	Mail Order ^(4,9)
	\$7 Generic	\$15 Generic	Subject to deductible, then	Subject to deductible, then	Subject to deductible, then	Subject to deductible, then
	\$25 Pref	\$60 Pref	\$25 Generic Copay	\$50 Generic Copay	\$25 Generic Copay	\$50 Generic Copay
	\$40 Non-Pref	\$90 Non-Pref	\$50 Brand Copay	\$100 Brand Copay	\$50 Brand Copay	\$100 Brand Copay
	(30-Day Supply)	(90-Day Supply)	(30 Day-Supply)	(90 Day-Supply)	(30-Day Supply)	(90-Day Supply)

PPO Plans:

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

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Earn rewards for wellness

With your CVT Anthem Blue Cross Wellness PPO plan



By choosing the Anthem Blue Cross Wellness preferred provider organization (PPO) plan, you've taken a step towards improving your health. With this plan, you have access to valuable wellness resources. Plus, you can earn up to \$400 in digital Mastercard® rewards for taking certain actions to protect or improve your health.

Quick-start guide

This guide will walk you through how to activate your plan and take advantage of these tools and resources.



Step 1

Register or log in at **anthem.com/ca** or download the SydneySM Health app.



Step 2

If accessing from **anthem.com/ca**, choose My Health Dashboard > My Rewards. If accessing from the Sydney Health app, choose Menu > Access Care > My Health Dashboard > My Rewards.



Step 3

Create your account. Enter or verify your name, gender, date of birth, and postal code. Select **Next** to continue.

Digital Mastercard rewards

At CVT, we want you to be an active participant in your healthcare. That's why we're rewarding you with a digital Mastercard when you complete health-related activities.

- First, have a complete wellness exam from your doctor. **Then complete the Health Assessment at anthem.com/ca** or on the Sydney Health app. Once you complete those actions, you will earn \$200 in rewards.
- Next, complete any combination of the activities below to earn up to another \$200 in rewards.¹ **You can access rewards-eligible activities at My Rewards on anthem.com/ca or in the Sydney Health app.**



Activity	Reward
Read five articles or watch five videos (or any combination of the two) in the Sydney Health app.	\$50 digital Mastercard
In the Sydney Health app, connect a tracking device such as Fitbit®, Garmin®, Misfit, Apple HealthKit®, Google Fit, or iHealth®.	\$50 digital Mastercard
In the Sydney Health app, track 10,000 steps a day for three days.	\$100 digital Mastercard
Set a goal and complete an action plan in the Sydney Health app once per quarter, such as Eat Healthy, Achieve a Healthy Weight, Get Active, Increase Energy, Reduce Stress, or Sleep Better.	\$50 digital Mastercard per quarter
Have a mammogram or colorectal cancer screening. ²	\$50 digital Mastercard
Have a cholesterol screening (full lipid panel). ²	\$50 digital Mastercard

To view your earned credits, log in to anthem.com/ca and select the *Completed Activities* tab. You also can call Anthem Blue Cross at **800-234-4333**.

Receiving rewards

- If you complete your activities and earn the maximum rewards, you will automatically receive your digital Mastercard at that time and will not have to wait until the end of the year.
- If you complete some but not all activities, you will automatically receive your digital Mastercard if you do not redeem it at the end of the plan year.

Smart Rewards frequently asked questions

Incentive rewards overview

What is Smart Rewards?

Smart Rewards is Anthem's incentive program that offers you access to valuable wellness resources and a way to earn rewards for taking certain actions to protect or improve your health.

Where do I track my incentive rewards?

You can track your activities in *My Rewards* in the Sydney Health app and on anthem.com/ca.

To use the Sydney Health app, choose Menu > Access Care > My Health Dashboard > My Rewards > View Completed Activity. To use anthem.com/ca, log in, then go to My Health Dashboard > My Rewards > View Completed Activity.

An eligible spouse/domestic partner can view their incentive rewards by signing in to their account on the Sydney Health app and on anthem.com/ca, following the same steps above.

Note: Spouses/domestic partners will need to have their own account in the Sydney Health app and/or on anthem.com/ca.

Who is eligible to participate in the Smart Rewards program and earn incentive rewards?

Eligibility for incentives includes you and your spouse/domestic partner unless otherwise defined by your employer.

Who do I contact if I have additional questions about incentive rewards?

- Contact Member Services using the phone number on the back of your health plan ID card.
- For technical support about the Sydney Health app or anthem.com/ca, call **866-755-2680**, Monday through Friday, 8 a.m. to 8 p.m. PT.

How can I view my incentive rewards earned in prior years?

You can view your incentive rewards on anthem.com/ca. Go to My Health Dashboard > My Rewards > Snapshot > View Completed Activities > Check Previous Year's Completed Activities or use the Sydney Health app and go to Menu > Access Care > My Health Dashboard > My Rewards > Snapshot > View Completed Activities > Check Previous Year's Completed Activities.

How much can I earn in incentive rewards?

Each year (from October 1 through September 30), the maximum incentive payout is \$400.

How are incentive rewards earned?

You choose what works best for you. You are welcome to participate in as many activities as you would like, but the maximum amount you can earn is \$400.

How can I access the Sydney Health app or anthem.com/ca to see the activity options and earned incentive rewards?

You and your spouse/domestic partner enrolled in an Anthem medical plan can view the ways to earn by logging in to the Sydney Health app or anthem.com/ca. You will each need to have your own account to view your incentive rewards. Associates cannot view incentive rewards earned by their spouse/domestic partner.

To view your rewards on the Sydney Health app, go to Menu > Access Care > My Health Dashboard > My Rewards. You can also log in to anthem.com/ca and look under My Health Dashboard > My Rewards.

Incentive rewards guidelines

When and how will I receive my incentive rewards?

Incentive rewards earned in the current plan year can only be redeemed in the current plan year.

If you complete your activities and earn the maximum rewards, you will automatically receive your digital MasterCard at that time and will not have to wait until the end of the plan year.

If you complete some but not all activities, you will automatically receive your digital MasterCard if you do not redeem it before the end of the plan year.

To redeem earned dollars, go to Menu > Access Care > My Health Dashboard > Redeem Rewards. The digital gift card you have selected will be immediately emailed to you.

Can I earn incentive rewards if I am a new hire?

Yes, as a new hire, you are eligible to earn and redeem dollars by completing incentivized activities.

Do I have to participate in any specific activities during the program year?

No, you do not need to complete specific activities. However, some activities require you complete two activities or one of two activities to earn the incentive reward.

Ways to earn incentive rewards

Health Risk Assessment

What is the Health Risk Assessment?

The Health Risk Assessment on the Sydney Health app or anthem.com/ca is a requirement to receive your earned incentive rewards, though you do not receive any incentive rewards for completing it. It provides you with information

about your health and personalized steps you can take to improve your wellness. You must complete the Health Risk Assessment to receive your earned incentive rewards.

Note: You can see all your completed activities on the Sydney Health app and anthem.com/ca.

The Health Risk Assessment is located on anthem.com/ca under My Health Dashboard > My Rewards > Health Risk Assessment. The Health Risk Assessment is also located on the Sydney Health app under Menu > Access Care > My Health Dashboard > My Rewards > Health Risk Assessment. Your privacy is very important to us. All results are kept confidential, and your employer cannot view your results.

I completed my Health Risk Assessment, but I still cannot see my incentive rewards. How long will it take to show?

It can take 24 to 48 hours for the Health Risk Assessment to process. If you do not see your completed Health Risk Assessment in My Rewards after five days, contact an Anthem Member Services associate by calling the toll-free number on the back of your ID card.

Wellness exam

What is a wellness exam and how do I earn incentive rewards for participating?

A wellness exam is an annual physical exam. After you have had your physical exam, your doctor will submit a claim to Anthem. Once Anthem has processed the claim, My Rewards on anthem.com/ca and the Sydney Health app will be updated, and you will see this as a completed activity. To view your colorectal cancer screening incentive, go to My Health Dashboard > My Rewards > Wellness Exam.

Mammogram

What is a mammogram and how do I earn incentive rewards for participating?

You and your spouse/domestic partner will earn incentive rewards for completing a mammogram if you are a woman between age 40 to 74. Once Anthem has processed the claim, My Rewards will be updated, and you will see this as a completed activity.

If you are under age 40 or age 75 or older and your doctor recommends this screening, you can submit a medical waiver form to earn your incentive rewards. The medical waiver form is located on anthem.com/ca or the Sydney Health app under My Rewards within the Mammogram activity. To view your mammogram incentive, go to My Health Dashboard > My Rewards > Mammogram.

Colorectal cancer screening

What is a colorectal cancer screening and how do I earn incentive rewards for participating?

You and your spouse/domestic partner will earn incentive

rewards for this activity if you are age 45 or older and complete a colorectal cancer screening (fecal occult blood test, sigmoidoscopy, or colonoscopy). Once Anthem has processed the claim, My Rewards will be updated, and you will see this as a completed activity.

If you are under age 45 and your doctor recommends this screening, you can submit a medical waiver form to earn your incentive rewards. The medical waiver form is located on anthem.com/ca or the Sydney Health app under *My Rewards* within the *Colorectal Cancer Screening* activity. To view your colorectal cancer screening incentive, go to My Health Dashboard > My Rewards > Colorectal Cancer Screening.

Cholesterol exam

What is a cholesterol exam and how do I earn incentive rewards for participating?

You and/or your spouse/domestic partner will earn incentive rewards for a cholesterol exam if you are a female age 40 or older or a male age 35 or older. Once Anthem has processed the claim, My Rewards will be updated, and you will see this as a completed activity. A cholesterol exam is performed by a blood test to check your levels of HDL cholesterol, LDL cholesterol, and triglycerides. Your doctor requests the lab test as part of your preventive exam or for a nonroutine office visit.

If you are under the age requirement and your physician recommends this screening, you can submit a medical waiver form to earn your incentive rewards. The medical waiver form is located on anthem.com/ca or the Sydney Health app under *My Rewards* within the *Cholesterol Exam* activity. To view your cholesterol incentive reward, go to My Health Dashboard > My Rewards > Cholesterol Test.

Log active minutes

How do I earn incentive rewards for tracking my daily activity?

You and your spouse/domestic partner can earn incentive rewards by tracking your activities. You can link your device or app (such as Fitbit, Garmin Connect, iHealth, Google Fit, Apple HealthKit, or Misfit) to log active minutes in the Sydney Health app. To log active minutes, go to My Health Dashboard > My Rewards > Log Active Minutes.

You earn incentive rewards for tracking your steps activity by logging 10,000 steps at least three times during the benefit period. The benefit period runs every year from October 1 through September 30.

Connecting a device

How do I connect my device or app to track steps/activity, calories, and sleep?

Log in to the Sydney Health app or anthem.com/ca. On the Sydney Health app go to the Menu tab, choose Access Care, then *My Health Dashboard* and select *Manage Devices/Apps*. To connect a device on anthem.com/ca, go to My Health Dashboard > My Rewards > Link Device or App.

Do I have to purchase a device to participate?

No, you can self-report steps. There are no-added-cost apps you can use to track your steps activity that can sync with the Sydney Health app, such as Apple HealthKit.

Action plans

How do I complete an action plan?

Choose the action plan(s) that you would like to participate in. Once completed, you will earn your incentive reward. To access action plans, go to My Health Dashboard > My Rewards > Complete an Action Plan.

Videos/Articles

How do I finish five videos or articles?

Explore topics like nutrition, mindfulness, and fitness tips. Complete at least five articles or videos to earn this reward. To access action plans, go to My Health Dashboard > My Rewards > Finish 5 Videos or Articles.



We're here to help

To find out more about your health plan or how to complete wellness activities, contact CVT Member Services at **800-288-9870** or Anthem Member Services at **800-234-4333**.



1 To be eligible for rewards, you must first complete your adult wellness exam and online Health Assessment.

2 Rewards will be credited within 60 days of the claim being processed. Services are provided in accordance with preventive care guidelines and are dependent upon age, health risks, and other factors.

Sydney Health is offered through an arrangement with Caredon Digital Platforms, a separate company offering mobile application services on behalf of your health plan. Anthem Blue Cross is the trade name of Blue Cross of California. Independent licensee of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Expanding your virtual care options

Find complete care support, on your time, through the **Sydney Health app**

Visit with a doctor at your convenience

Accessing the care you need, when you need it, matters. That's why our SydneySM Health mobile app connects you to a team of doctors ready to help you on your time. There are two secure ways to find low or no-additional cost care through our app:

- ① **Chat with a doctor 24/7 without an appointment**
 - Urgent care support for health issues, such as allergies, a cold, or the flu.
 - New prescriptions¹ for concerns such as a cough or a sinus infection.
- ② **Schedule a virtual primary care appointment**
 - Routine care, including virtual annual preventive care (wellness) visit and prescription refills.^{1,2,3,4}
 - Personalized care plans for chronic conditions, such as asthma or diabetes.

Assess your symptoms with the Symptom Checker

When you're sick, you can use the Symptom Checker on Sydney Health to answer a few questions about how you're feeling. That information is run against millions of medical data points to provide care advice tailored to you.

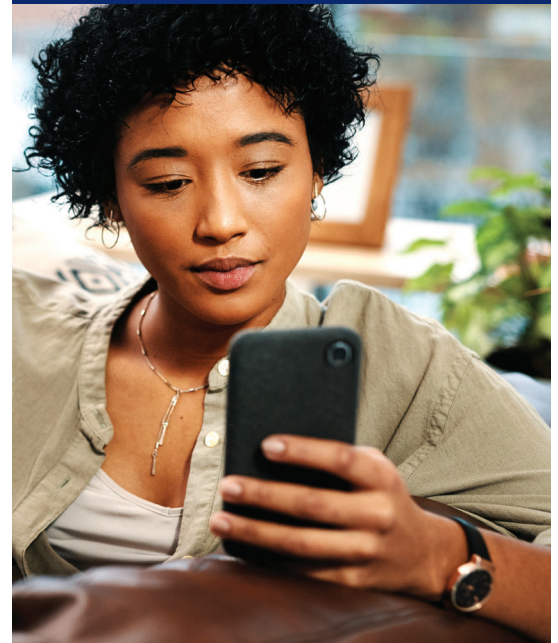
Save money and time with virtual care

Sydney Health brings care to you anywhere, anytime. The Symptom Checker is always free to use, while virtual primary care visits and on-demand urgent care through the app are available at low or no-additional cost.

▶ Download our Sydney Health mobile app today.



Set up your account right away and it will be ready to use when you need it.



85% of virtual visits resolve the person's need.⁵

¹ Virtual annual preventive care (wellness) visits through the Sydney Health app are available starting September 2022. The virtual annual preventive care (wellness) visit is covered in full unless the employer has a limit or cap under their benefit plan.

² Virtual primary care medical services provided by Preventive Medical Associates P.C. through an arrangement with Hydrogen Health, which provides the virtual care platform.

³ Eligible employees are those who have not yet had an annual preventive care (wellness) visit during the plan year (either virtual or in-person) whose group benefit plan covers a virtual primary care exam. If an employer group has a cap on the number of preventive care (wellness) visits that are covered in full and the employee has exceeded the cap but would like to have another preventive care (wellness) visit, they may be responsible for copays and other out-of-pocket costs for the visit. Employees should consult their benefit plan and/or contact Member Services if they have any questions.

⁴ Your doctor will determine if a prescription is needed at time of visit.

⁵ K Health analysis of Q4 2020 visit depositions.

Sydney Health is offered through an arrangement with Cereon Digital Platforms, a separate company offering mobile application services on behalf of your health plan. ©2020-2022 The Virtual Primary Care experience is offered through an arrangement with Hydrogen Health.

In addition to using a telehealth service, you can receive in-person or virtual care from your own doctor or another healthcare professional in your plan's network. If you receive care from a doctor or healthcare professional not in your plan's network, your share of the costs may be higher. You may also receive a bill for any charges not covered by your health plan.

Anthem Blue Cross is the trade name of Blue Cross of California. Independent licensee of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

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CVT HMO Health Plans with Blue Shield Access+ and CVS/caremark

Lancaster SD - CERTIFICATED

October 1, 2025 - September 30, 2026

BENEFIT	HMO Access+ 2, 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: \$1,500 Family: \$3,000	
Doctor Visits	Primary Care Physician - \$15 Copay Specialist Physician - \$15 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 - \$15 Copay Outpatient - Paid in full	
Durable Medical Equipment	Paid at 100%*	
Ambulance - Ground / Air	\$100 Copay	
Physical Therapy	\$15 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	\$100 for Ambulatory Surgical Center \$150 for OutPatient Hospital	
Hospital Inpatient	Physician paid at 100%* Inpatient facility services - \$250 copay per admission Skilled Nursing - \$50 per day copay; Semi private room	
Hospital Emergency Room	\$100 Copay (Copay waived if admitted as in-patient)	
Urgent Care	\$15 Copay	
Home Health Care	\$15 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	Retail ^(4,9) \$7 Generic \$15 Preferred \$30 Non-Preferred (30-Day Supply)	Mail Order ^(4,9) \$15 Generic \$35 Preferred \$70 Non-Preferred (90-Day Supply)

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.



How to find a network doctor in California

Simply go to your plan online to search doctors, specialists, hospitals, and pharmacies.

- Access+ HMO Plan®: blueshieldca.com/networkhmo
- Trio HMO Plan: blueshieldca.com/networktriohmo

How to find your PCP's ID number

When enrolling in a Blue Shield of California HMO plan for the first time, you may need to provide the ID number for your primary care physician (PCP). Once you locate your PCP's name in the *Find a Doctor* tool, click on the doctor's name and then click *View details* under Primary Care Physician ID to see their ID number.

How to find urgent or emergency care outside California

As a Blue Shield member, you are always covered for urgent and emergency care when away from home. To find providers in the U.S., visit provider.bcbs.com or call BlueCard Access at **(800) 810-BLUE (2583) (TTY: 711)**. To find international providers, visit bcbsglobalcore.com or call the Blue Shield Global Core service center collect at **(804) 673-1177** from outside the U.S.

Have questions?

If you need assistance, call Shield Concierge at **(800) 360-6587**, 7 a.m. to 7 p.m. PT, Monday through Friday.

Language Assistance Notice

For assistance in English at no cost, call the toll-free number on your ID card. You can get this document translated and in other formats, such as large print, braille, and/or audio, also at no cost. Para obtener ayuda en español sin costo, llame al número de teléfono gratis que aparece en su tarjeta de identificación. También puede obtener gratis este documento en otro idioma y en otros formatos, tales como letra grande, braille y/o audio. 如欲免費獲取中文協助，請撥打您 ID 卡上的免費電話號碼。您也可免費獲得此文件的譯文或其他格式版本，例如：大字版、盲文版和/或音訊版。

Nondiscrimination Notice

The company complies with applicable state laws and federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, ethnic group identification, medical condition, genetic information, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, mental disability, or physical disability. La compañía cumple con las leyes de derechos civiles federales y estatales aplicables, y no discrimina, ni excluye ni trata de manera diferente a las personas por su raza, color, país de origen, identificación con determinado grupo étnico, condición médica, información genética, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad, ni discapacidad física ni mental. 本公司遵守適用的州法律和聯邦民權法律，並且不會以種族、膚色、原國籍、族群認同、醫療狀況、遺傳資訊、血統、宗教、性別、婚姻狀況、性別認同、性取向、年齡、精神殘疾或身體殘疾而進行歧視、排斥或區別對待他人。

blueshieldca.com

Blue Shield of California is an independent member of the Blue Shield Association

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CVT HMO Health Plans with Kaiser Permanente

Lancaster SD - CERTIFICATED

October 1, 2025 - September 30, 2026

BENEFIT	Kaiser 1 w/Chiro	Kaiser 2 w/Chiro	Kaiser 3 w/Chiro	Kaiser 7 w/Chiro	Kaiser Wellness w/Chiro
Calendar Year Deductible	\$0	\$0	\$0	\$0	\$0
Coinsurance	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*
Calendar Year Out of Pocket Maximum (includes medical/pharmacy deductible, coinsurance, and copays) ⁽²⁾	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000	Individual: \$1,500 Family: \$3,000
Doctor Visits	Primary Care Physician - \$10 Copay Specialist Physician - \$10 Copay	Primary Care Physician - \$15 Copay Specialist Physician - \$15 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$20 Copay	Primary Care Physician - \$35 Copay Specialist Physician - \$35 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$40 Copay
Preventive Care / Immunizations	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 100%*
Outpatient Laboratory	Most tests paid at 100%*	Most tests paid at 100%*	Most tests paid at 100%*	Most tests paid at 100%*	\$10 Copay
Outpatient Radiology	Most services paid at 100%*	Most services paid at 100%*	Most services paid at 100%*	Most services paid at 100%*	\$10 copay*
Durable Medical Equipment	Paid at 100%*	Paid at 100%*	Paid at 100%*	Paid at 80%*	Paid at 100%*
Ambulance - Ground / Air	Paid at 100%* If Medically Necessary	Paid at 100%* If Medically Necessary	Paid at 100%* If Medically Necessary	\$100 Per Trip If Medically Necessary	\$100 Copay If Medically Necessary
Physical Therapy	\$10 Copay	\$15 Copay	\$20 Copay	\$35 Copay	\$20 Copay
Chiropractic	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Acupuncture.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Acupuncture.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Acupuncture.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Acupuncture.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Acupuncture.
Acupuncture	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Chiropractic.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Chiropractic.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Chiropractic.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Chiropractic.	Benefit through SimpleTherapy ; \$10 office visit copay; \$15 daily max for out of network; Up to 40 visits per year combined with Chiropractic.
Outpatient Surgery	\$10 Copay	\$15 Copay	\$20 Copay	\$250 Copay	\$500 Per Procedure
Hospital Inpatient	Paid at 100%*	Paid at 100%*	Paid at 100%*	\$250 Copay	\$500 Copay Per Admission Unlimited days, semi-private room
Hospital Emergency Room	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay Copay waived if admitted as in-patient	\$100 Copay (Copay waived if admitted as in-patient)
Urgent Care	\$10 Copay	\$15 Copay	\$20 Copay	\$35 Copay	\$20 Copay
Home Health Care	Paid at 100%* (Limits)	Paid at 100%* (Limits)	Paid at 100%* (Limits)	Paid at 100%* (Limits)	Paid at 100%* (Limits)
Telehealth	Approved telephone and virtual visits are paid at 100%. Contact your provider or call 1-866-454-8855 for after-hours advice.	Approved telephone and virtual visits are paid at 100%. Contact your provider or call 1-866-454-8855 for after-hours advice.	Approved telephone and virtual visits are paid at 100%. Contact your provider or call 1-866-454-8855 for after-hours advice.	Approved telephone and virtual visits are paid at 100%. Contact your provider or call 1-866-454-8855 for after-hours advice.	Approved telephone and virtual visits are paid at 100%. Contact your provider or call 1-866-454-8855 for after-hours advice.
Virtual Physical Therapy	Contact your PCP for virtual options.	Contact your PCP for virtual options.	Contact your PCP for virtual options.	Contact your PCP for virtual options.	Contact your PCP for virtual options.
Employee Assistance Program (EAP) through Carelon	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾	Paid at 100% - Visit www.carelonwellbeing.com/cvt or call 1-877-397-1032 to access benefit ⁽³⁾

BENEFIT	Kaiser 1 w/Chiro		Kaiser 2 w/Chiro		Kaiser 3 w/Chiro		Kaiser 7 w/Chiro		Kaiser Wellness w/Chiro	
Prescription Drugs	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order
	\$5 Generic	\$10 Generic	\$5 Generic	\$10 Generic	\$10 Generic	\$20 Generic	\$10 Generic	\$20 Generic	\$10 Generic	\$20 Generic
	\$10 Brand	\$20 Brand	\$10 Brand	\$20 Brand	\$20 Brand	\$40 Brand	\$30 Brand	\$60 Brand	\$25 Brand	\$50 Brand
	(Up to 30 Day Supply)	(31-100 Day Supply)	(Up to 30 Day Supply)	(31-100 Day Supply)	(Up to 30 Day Supply)	(31-100 Day Supply)	(Up to 30 Day Supply)	(31-100 Day Supply)	(Up to 30 Day Supply)	(31-100 Day Supply)

Kaiser Permanente Plans:

*** For Covered Expenses Only**

(2) The pharmacy copayments will not apply to out of pocket maximums for retirees enrolled in Medicare

NOTES: Copays for Infertility: Plans 1 - \$10 Copay; Plan 2 - \$15 Copay; Plan 3 - 50% Copay; Plan 4 - \$30 Copay; Plan 5 - \$35 Copay; Plans 6-8 & Wellness - 50% Copay.

Copays for Allergy Injections: Plans 1-5 - No Charge; Plans 6-7 & Wellness - \$5 Per Visit; Plan 8 - No Charge; Plan 11 HSA - \$5 Per Visit after deductible is met.

Plan 6 - \$175 allowance for lenses, frames & contacts every 24 months

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

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

Be good to yourself and enjoy the rewards



California's
Valued Trust

California's Valued Trust believes that knowing your numbers is crucial for good health. This year, we have an exciting opportunity for you! By completing your biometric screenings and online Total Health Assessment, you can earn a \$200 reward card. Additionally, if you stay up-to-date on your cancer screenings and participate in either an online healthy lifestyle program or wellness coaching by phone, you can earn another \$200 reward card. Even if you are already current on your screenings, you will still receive credit and potentially have rewards waiting for you. In total, **you have the chance to earn \$400 in healthy rewards.**

Visit kp.org/engage and enter your Kaiser Permanente user ID and password. If you do not currently have an account, click "Register for an account" to create one. Sign on starting **October 1, 2025** and begin earning rewards for the activities you complete before **September 30, 2026**.

☐	\$200	Biometric Screenings AND Total Health Assessment	- Required screenings include blood pressure, total cholesterol, blood glucose, and body mass index (BMI). Send a message to your physician via www.kp.org to find out which screenings you need; remember, you may have already completed this. - Learn how your behaviors affect your health with an online questionnaire; visit www.kp.org/tha. The results will be analyzed and you will receive a personal action plan to inspire your move to wellness.
☐	\$200	Cancer Screenings AND Healthy Lifestyle Program OR Wellness Coaching	- Get a breast, cervical, and/or colon cancer screening. Send a message to your physician via www.kp.org to find out which screenings you need; remember, you may have already completed some or all of your cancer screenings. - Learn how to lose weight, quit smoking, manage insomnia, reduce stress, and more with our online programs. To view all the programs available, visit www.kp.org/healthylifestyles. - Team up with a trained wellness coach to set and reach your goals like lowering stress or managing weight. To schedule a session, call 1-866-862-4295, Monday through Friday from 6 a.m. to 7 p.m. (Pacific); you can learn more by visiting www.kp.org/wellnesscoaching.



On the website, look for this check mark once you've completed an activity.



Get started at www.kp.org/engage

The rewards program runs from October 1, 2025 through September 30, 2026 and is open to subscribers of California's Valued Trust and their spouses or domestic partners. Program participants must be Kaiser Permanente members and enrolled in the HMO Plan with Wellness program.

Wellness program rewards are available to all eligible participants. If you think you can't meet a requirement for a reward because of your health, you may be able to earn it doing something else. Please contact your employer or union to learn more. They'll help you find a way to earn the same reward based on what's right for your health. If you like, your doctor can also be a part of this decision.

Need Help?

Contact Kaiser Rewards Customer Service at 866-300-9867



California's
Valued Trust



KAISER
PERMANENTE



California's
Valued Trust

Dental & Vision Plans

Delta Dental PPO Incentive Plan Summary of Benefits

Effective October 1, 2025 to September 30, 2026

Benefits and Covered Services*	PPO Network **	Premier Network and Out of Network **
Calendar Year Deductible	None	None
Calendar Year Maximum Benefit	\$1,900	\$1,500
Diagnostic & Preventive (D&P) Services Note: D & P does not count towards calendar year maximum Oral Examinations: 2 Annual Cleanings: 2 X-rays	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Basic Services Fillings Posterior Composite Restorations Sealants	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Periodontics (gum treatment) Covered Under Basic Services	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Endodontics (root canals)	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Oral Surgery (extraction) Covered Under Basic Services	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Major Services Crowns, Inlays, Onlays & Cast Restorations	Paid at: 70% - 100% *	Paid at: 70% - 100% *
Prosthodontics Bridges Dentures Implants	Paid at: 50% *	Paid at: 50% *
Orthodontic Benefits Adults & Dependent Children Lifetime Maximum: \$500 12 Month Wait: No	Paid at: 50% *	Paid at: 50% *
Dental Accident Benefits	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)	Paid at: 100% * (\$1,000 maximum per enrollee each calendar year)

* This summary is for comparison purposes only. The Evidence of Coverage should be consulted for a detailed description of the covered benefits and is available at www.cvtrust.org/plandocuments.

** See back for additional details

What are my Delta Dental Network options?

The Delta Dental PPO plan allows you the option to visit any licensed dentist. You will usually save more on your out-of-pocket costs when you visit a **Delta Dental PPO** dentist. The **Delta Dental Premier** network also provides cost-saving features and is the next best option when you can't find a PPO dentist. Non-Delta Dental (Out of Network) dentists have no fee agreements with Delta Dental, so you will usually have the highest out-of-pocket costs when you visit a non-Delta Dental dentist. You are responsible for the difference between what Delta Dental pays and the dentist's fee.

How do I find a Delta Dental dentist?

To locate a Delta Dental dentist near you, check the dentist directory on the Delta Dental website (**deltadentalins.com**), which also provides a map to the dental office. Or, to hear or receive a faxed listing of dentists in your area, call **866-499-3001**. Follow the automated instructions to search for a dentist.

How does my Delta Dental incentive plan work?

Your dental benefit incentive plan is designed to encourage regular visits to the dentist to keep your teeth and gums healthy. Here is an example of how an incentive plan works. (This is the most common incentive plan. Check your benefits information for details of your particular incentive plan.)

First Year	Second Year	Third Year	Fourth Year
70%	80%	90%	100%
Percentage paid for certain benefits as long as you visit the dentist each year.			

What are my online resources?

The full Delta Dental website is a one-stop-shop for plan and oral health information. Also available in Spanish: **es.deltadentalins.com**.

Create a free Online Services account at **deltadentalins.com** to:

- Locate a Delta Dental dentist
- Check benefits, eligibility, and claim status
- Opt for paperless statements
- View or print your ID card
- Check average dental costs in your area

Check out **Your Dental Plan Support Guide** for money-saving tips and treatment information. And, don't miss **mysmileway.com** – a great resource for oral health-related tools and tips.

Mobile? Get the information you need on the go. Bookmark or add a shortcut to the mobile site to return in just one tap from your phone. Download the free, convenient smartphone Delta Dental app from the App Store or Google Play.

A Look at Your VSP Vision Coverage

With VSP and California's Valued Trust (Plan C \$5 Copay, Additional Pair of Eyewear), your health comes first.



VSP® Vision Care provides you personalized eye care at VSP network locations with low or no out-of-pocket costs.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling more than \$3,000 in savings.

Provider choices you want.

With private practice doctors and Visionworks retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge™ location.



Preferred private practice and retail in-network choices



Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on **vsp.com** to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.

Premier Edge™ Promise

You now have access to the Premier Edge Promise, a worry-free eyewear guarantee. This protects you from the unexpected when you go to a Premier Edge location whether it's accidentally broken or damaged glasses, your prescription changes or if you don't love the glasses you chose. Visit **vsp.com/zerocopay** for details.



More Ways to Save

**Extra
\$20
to spend on
Featured Frame Brands†**

bebe Calvin Klein
COLE HAAN DRAGON
FLEXON LONGCHAMP
and more

See all brands and offers
at **vsp.com/offers**.

+
**Up to
40%
Savings on
lens enhancements‡**

Enroll through your employer today.
Contact us: **800.877.7195** or **vsp.com**

Your VSP Vision Benefits Summary

2025-2026

Lancaster SD - Certificated & Classified

Provider Network:
VSP Signature
Frequency:
Exam every 12 months
Frame every 12 months
Lenses every 12 months



BENEFIT	DESCRIPTION	PREMIERMAX	COPAY WITH OTHER VSP
		COPAY WITH PREMIER EDGE PROVIDERS	NETWORK PROVIDERS
COVERAGE WITH A VSP PROVIDER			
WELLVISION EXAM	• Focuses on your eyes and overall wellness • Every 12 months	\$0	\$5 for exam and glasses
RETINAL SCREENING	• Images of the inside of the eye, used to screen for potential signs of eye disease • Every 12 months	\$0	Up to \$39
ESSENTIAL MEDICAL EYE CARE	• Retinal imaging for members with diabetes covered-in-full • Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. • Coordination with your medical coverage may apply. Ask your VSP network doctor for details. • Available as needed	\$20 per exam	\$20 per exam
PRESCRIPTION GLASSES			
FRAME ⁺	• \$220 Featured Frame Brands allowance • \$200 frame allowance • 20% savings on the amount over your allowance • \$110 Walmart/Sam’s Club/Costco frame allowance • Every 12 months	Combined with exam	Combined with exam
LENSES	• Single vision, lined bifocal, and lined trifocal lenses • Impact-resistant lenses for dependent children • Every 12 months	Combined with exam	Combined with exam
LENS ENHANCEMENTS ⁺	• Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Tints/Light-reactive lenses • Average savings of 40% on other lens enhancements • Every 12 months	\$0 \$80 – \$90 \$120 – \$160 \$0	\$0 \$80 – \$90 \$120 – \$160 \$0
CONTACTS (INSTEAD OF GLASSES)	• \$150 allowance for contacts; copay does not apply • Contact lens exam (fitting and evaluation) • Every 12 months	Up to \$60	Up to \$60
ADDITIONAL PAIR OF EYEWEAR	• Frame and Lenses: This enhancement allows you to get a second pair of glasses or contacts, subject to the same frequency and lens options as your first pair benefit. • Contacts (instead of glasses): \$150 allowance for additional contacts • Every 12 months	\$20 for frame and lenses Up to \$60	\$20 for frame and lenses Up to \$60
ADDITIONAL SAVINGS	Glasses and Sunglasses • Discover all current eyewear offers and savings at vsp.com/offers. • 30% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% savings from a VSP provider within 12 months of your last WellVision Exam.		
	Laser Vision Correction • Average of 15% off the regular price; discounts available at contracted facilities.		
	Exclusive Member Extras • Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. • Save up to 60% on digital hearing aids with TruHearing. Visit vsp.com/offers/special-offers/hearing-aids for details. • Everyday savings on entertainment, health and wellness, travel, and more with VSP Simple Values.		

[†]Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

[‡]Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

*Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington. Premier Edge is not available for some members in the state of Texas.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com. Visionworks is a VSP-affiliated company.

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California's
Valued Trust

Additional Resources



The Sydney Health mobile app makes healthcare easier

Access personalized health and wellness information wherever you are

Use SydneySM Health to keep track of your health and benefits — all in one place. With a few taps, you can quickly access your plan details, Member Services, virtual care, and wellness resources. Sydney Health stays one step ahead — moving your health forward by building a world of wellness around you.

Find Care

Search for doctors, hospitals, and other healthcare professionals in your plan's network and compare costs. You can filter providers by what is most important to you, such as gender, languages spoken, or location. You'll be matched with the best results based on your personal needs.

My Health Dashboard

Use My Health Dashboard to find news on health topics that interest you, health and wellness tips, and personalized action plans that can help you reach your goals. It also offers a customized experience just for you, such as syncing your fitness tracker and scanning and tracking your meals.

Chat

If you have questions about your benefits or need information, Sydney Health can help you quickly find what you're looking for and connect you to an Anthem representative.

Virtual Care

Connect directly to care from the convenience of home. Assess your symptoms quickly using the Symptom Checker or talk to a doctor via chat or video session.

Community Resources

This resource center helps you connect with organizations offering no-cost and reduced-cost programs to help with challenges such as food, transportation, and child care.

My Health Records

See a full picture of your family's health in one secure place. Use a single profile to view, download, and share information such as health histories and electronic medical records directly from your smartphone or computer.



Download the Sydney Health app today

Use the app anytime to:

- Find care and compare costs.
- See what's covered and check claims.
- View and use digital ID cards.
- Check your plan progress.
- Fill prescriptions.



Scan the QR code to download the Sydney Health app.

You can also set up an account at anthem.com/ca/register to access most of the same features from your computer.



California's
Valued Trust

Healthcare Benefits for the Education Community

Welcome to Total Health, Total You

A personalized program that supports your overall health



Total Health, Total You helps you take care of your health. Working on lifestyle changes? Need specialized care? Your Health Guide can help you navigate the healthcare system and get the most from your health plan benefits.

Health Guides are your single point of contact for:

- **Questions about your healthcare** and your health plan.
- **Support to improve your health** and reach your health goals.
- **Help finding quality health professionals**, like nurses, social workers, dietitians, respiratory therapists, pharmacists, and exercise physiologists.
- **Connecting with programs and resources** to help you and your family feel your best, such as:
 - 24/7 NurseLine
 - Autism Spectrum Disorder Program
 - Behavioral Health Resource
 - Building Healthy Families
 - Case Management
 - Emotional Well-being Resources
 - Inclusive Care

The **SydneySM Health** app makes it easier to access your Total Health, Total You benefits and other programs. To get started, go to the **Menu**, choose **My Health Dashboard** and then **Programs**.



Have a question?

Call Member Services at **1-800-234-4333** on the back of your member ID card to speak to an Anthem Health Guide. Scan the QR code for more details.



Care you can count on



Get support from licensed medical doctors and mental health professionals no matter where you are with Teladoc

As a Blue Shield member, you have access to Teladoc's national network of U.S. board-certified physicians.

General medical care - appointments are available 24/7/365 by phone or video.

Teladoc medical doctors can treat many medical conditions including:

- Cold and flu symptoms
- Allergies
- Respiratory infections
- Sinus problems

How much does Teladoc medical care cost?

Trio HMO plan.....	\$0
Access+HMO.....	\$0

Mental health care - appointments are available from 7 a.m. to 9 p.m. local time, seven days a week.

Teladoc licensed professionals can help you manage mental health conditions including:

- Depression
- Anxiety
- Grief
- Stress
- Addiction
- Domestic Abuse
- And more

How much does Teladoc mental health care cost?

Trio HMO plan.....	\$0
Access+HMO.....	\$0

Please note: This service does not include a crisis hotline. Help is available if you or someone you know is in crisis. Call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)**. You'll need to schedule an appointment to speak with a licensed therapist.

How to request a video or phone appointment

General medical consultations

Appointments are available 24/7/365 by phone or video.

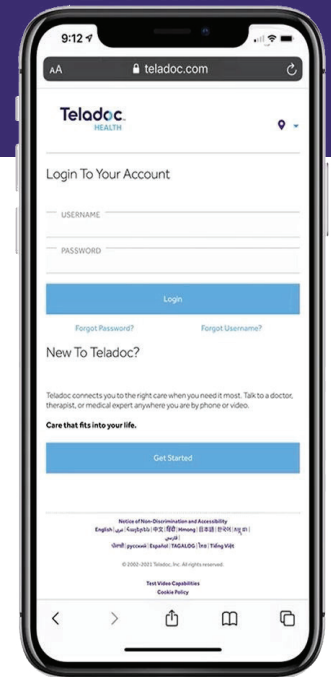
1. Visit **blueshieldca.com/teladoc**.
2. Register or log in. You can request a consultation any time you need care.
3. Download the Blue Shield app to access care from anywhere.

Mental health consultations

Appointments are available from 7 a.m. to 9 p.m. local time, seven days a week.

Teladoc confirms mental health appointments within 72 hours.

1. Visit **blueshieldca.com/teladoc** to register or log in and answer a few questions about your needs.
2. Request an appointment.
3. Download the Blue Shield app to access care from anywhere. (Please note that mental health appointments must be scheduled in advance.)



If you have questions or need help creating an account, call **1-800-Teladoc (835-2362)**. Wait times may vary.

Confidential therapy when you need support



© 2023 Teladoc, Inc. All rights reserved. Teladoc and the Teladoc logo are trademarks of Teladoc Health, Inc. and may not be used without written permission. Teladoc does not replace the primary care physician. Teladoc does not guarantee that a prescription will be written. Teladoc operates subject to state regulation and may not be available in certain states. Teladoc does not prescribe DEA-controlled substances, non-therapeutic drugs, and certain other drugs which may be harmful because of their potential for abuse. Teladoc physicians reserve the right to deny care for potential misuse of services.

You may receive services from network providers on an in-person basis or via telehealth, if available. Contact your primary care provider, treating specialist, facility, or other health professional to learn whether telehealth is an option. Network telehealth and in-person services are subject to the same timeliness and geographic access standards. If your plan has out-of-network benefits, they are subject to your plan's cost sharing obligations and balance billing protections.

Language Assistance Notice

For assistance in English at no cost, call the toll-free number on your ID card. You can get this document translated and in other formats, such as large print, braille, and/or audio, also at no cost. Para obtener ayuda en español sin costo, llame al número de teléfono gratis que aparece en su tarjeta de identificación. También puede obtener gratis este documento en otro idioma y en otros formatos, tales como letra grande, braille y/o audio. 如欲免費獲取中文協助，請撥打您 ID 卡上的免費電話號碼。您也可免費獲得此文件的譯文或其他格式版本，例如：大字版、盲文版和/或音訊版。

Nondiscrimination Notice

The company complies with applicable state laws and federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, ethnic group identification, medical condition, genetic information, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, mental disability, or physical disability. La compañía cumple con las leyes de derechos civiles federales y estatales aplicables, y no discrimina, ni excluye ni trata de manera diferente a las personas por su raza, color, país de origen, identificación con determinado grupo étnico, condición médica, información genética, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad, ni discapacidad física ni mental. 本公司遵守適用的州法律和聯邦民權法律，並且不會以種族、膚色、原國籍、族群認同、醫療狀況、遺傳資訊、血統、宗教、性別、婚姻狀況、性別認同、性取向、年齡、精神殘疾或身體殘疾而進行歧視、排斥或區別對待他人。

Get quality care whenever you need it

With Kaiser Permanente, you have many options available to get the world-class care you depend on for all your health needs – day or night. Here's how:

Convenient ways to get care



Phone visit

Talk with a clinician over the phone for the same high-quality care as an in-person visit.^{1,2} Schedule an appointment or get fast, personalized support 24/7.



Video visit

Meet face-to-face with a clinician by video from your smartphone, tablet, or computer.^{1,2} Appointments are optional.



24/7 care advice

Talk with a Kaiser Permanente clinician anytime day or night for advice.



E-visit

Fill out a short questionnaire about your symptoms online and get personalized self-care advice from a Kaiser Permanente clinician.



Email

Message your doctor's office with nonurgent health questions anytime through your kp.org account.



Mail-order pharmacy

Get prescriptions sent straight to your door with our mail-order delivery service.³

1. Where appropriate and available. 2. If you travel out of state, phone appointments and video visits may not be available due to state laws that may prevent doctors from providing care across state lines. Laws differ by state. 3. Some prescriptions are not available through the mail-order pharmacy. For certain drugs, you can get prescription refills mailed to you through our Kaiser Permanente mail-order pharmacy. You should receive them within 10 business days.

Kaiser Permanente health plans around the country: Kaiser Foundation Health Plan, Inc., in Northern and Southern California and Hawaii • Kaiser Foundation Health Plan of Colorado • Kaiser Foundation Health Plan of Georgia, Inc., Nine Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305, 404-364-7000 • Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., in Maryland, Virginia, and Washington, D.C., 2101 E. Jefferson St., Rockville, MD 20852 • Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232 • Kaiser Foundation Health Plan of Washington or Kaiser Foundation Health Plan of Washington Options, Inc., 1300 SW 27th St., Renton, WA 98057

Making an appointment is easy

Go online:

To choose the kind of care you need, visit **kp.org/getcare** or sign in to the Kaiser Permanente app – and avoid hold times on the phone. For Colorado or Washington members, chat online with a doctor through your kp.org account.

Call us 24/7:

Find your location information below.

California

- Northern California: **1-866-454-8855**
- Southern California: **1-833-574-2273**

Colorado

303-338-4545 or **1-800-218-1059**

Georgia

404-365-0966

Hawaii

- Oahu: **808-432-2000**
- Maui: **808-243-6000**
- Hawaii Island: **808-334-4400**
- Kauai: **808-246-5600**

Maryland/Virginia/Washington, D.C.
1-800-777-7904

Oregon/SW Washington

- Portland: **503-813-2000**
- All other areas: **1-800-813-2000**

Washington

1-800-297-6877

TTY
711



fast, hassle-free health care. anytime. anywhere.

Your benefits include reliable 24/7 health care by phone or video. Our national network of board-certified doctors provides personalized care for hundreds of medical and mental health needs. No surprise costs. No hassle. Just create an account to enroll.

URGENT CARE

On-demand care for illness and injuries.

- Talk to a board-certified doctor in just minutes when you need care fast, including prescriptions.
- Reliable and affordable alternative to urgent care clinics for more than 80 common, non-emergency conditions like flu, sinus infections, ear pain, and UTIs (Females, 18+).

MENTAL HEALTH

Talk therapy and psychiatry from the privacy of home.¹

- Licensed therapists and board-certified psychiatrists.
- Schedule your appointment in as little as five days with after-hours and flexible sessions available.

PRIMARY CARE—COMING IN OCTOBER 2025

Wellness screenings, routine care, and specialist referrals.

- Annual checkups, preventive, and ongoing care for common conditions like diabetes, asthma, and heart disease.
- See the same doctor for each appointment and receive referrals, prescriptions, lab work, and diagnostic tests.

DERMATOLOGY

Fast, customized care for skin, hair, and nail conditions.

- Access to the largest national network of board-certified dermatologists.
- Customized diagnosis, treatment plan, and prescriptions, often in less than 24 hours.

USING MDLIVE IS AS EASY AS 1-2-3:



STEP 1: CREATE YOUR SECURE ACCOUNT.



STEP 2: REQUEST AN APPOINTMENT.

Have an urgent care appointment right away, or schedule a time that works for you.



STEP 3: FEEL BETTER FASTER.

Get a diagnosis, treatment plan, and prescriptions, when appropriate, sent right to your preferred pharmacy.²

Your copay is

\$ 0

per appointment for All CVT PPO & EPO Plans except HDHP/HSA plans, which are subject to a deductible.



Create your account today.
mdlive.com/cvt | 888.632.2738

¹Telehealth therapy visits are available for ages 10 and up.

²Prescriptions are available at the physician's discretion when medically necessary.

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virtual vs. in-person primary care.

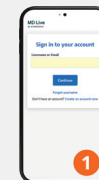
how to know which option to choose.



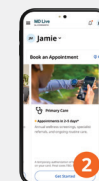
When you need support managing a chronic condition or a new health concern, choosing between virtual and in-person care can be confusing if you don't know your options. MDLIVE Primary Care offers convenient access to board-certified doctors with wellness screenings, routine care, and support for ongoing health needs. See how MDLIVE and in-person doctors compare so you can choose the option that fits your needs.

	MDLIVE doctor	in-person doctor
Available 7 days a week, after-hours, evenings, and holidays	✓	✗
Always taking new patients	✓	✗
Fast, flexible appointments	✓	✗
Labwork ¹	✓	✓
Prescriptions ²	✓	✓
Referrals, including imaging scans	✓ (in-network)	✓ (may or may not be in-network)
Dedicated care plan for specific conditions	✓	✗
Access to health coaching app with reminders, alerts, and digital engagement	✓	✗
Immunizations	✗	✓
Sport and school physicals	✗	✓
Message with a doctor	✓	✓
Remote monitoring	✓	✗

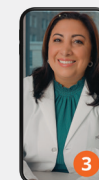
get started in 3 quick steps:



STEP 1:
Create your account or log in.



STEP 2:
Schedule your first primary care visit and complete recommended labs.



STEP 3:
Start your journey with a doctor who understands your health history and goals.

Have trusted, personalized care that fits your life. Schedule your visit today.

**COMING IN
OCTOBER 2025**



Create
your
account

Get the app



mdlive.com/cvt

888.632.2738

¹Limited to LabCorp and Quest labs contracted with MDLIVE for virtual primary care. Labwork is required for wellness visits and must be completed and in the system at least 72 hours ahead of scheduled visit; this is not the case for routine visits. | ²Prescriptions are available at the physician's discretion when medically necessary.

Visit mdlive.com/what-we-treat for a list of what MDLIVE cannot treat or prescribe.

Support for better living

No issue is too big or too small. Receive no-cost confidential assistance today.

Counseling

Schedule an appointment with a licensed counselor. Help is available online or in-person at times that work for you. You and your household members each receive **6** visits per issue, 2 issues per year.

Legal and financial services

Connect with legal and financial experts for free, private consultations on real estate, financial advice, family law, investing, and planning for the future.

Support for work-life balance

Access resources and receive referrals to help with child and elder care, education, consumer resources, home maintenance, pet care, and daily living.



Health Tip

Saying thank you may improve your mood. Researchers have found that gratitude helps you recognize the good in your life, which reduces the likelihood that you'll be sad or depressed.



Reach out at any time — help is available 24/7.

Call: 877-397-1032

Text: 877-397-1032

Chat:

carelonwellbeing.com/cvt



Better care begins here.

Carrum Health helps eligible employees and dependents get the highest-quality healthcare experience possible, for less.*

Whether you need cancer care or a range of surgical procedures, Carrum Health works with the top cancer specialists and surgeons in the country—those who have better outcomes and outstanding bedside manner. And when you receive care through Carrum Health, most, if not all, costs are covered.*

Covered procedures include hip, knee, shoulder, spine, heart, hysterectomies, weight loss surgeries, cancer care, and more.

Those eligible for the Carrum Health benefit include employees, dependents (18+), and pre-65 retirees enrolled in a CVT sponsored PPO or EPO plan.



Better care

The surgeons and cancer specialists in our program achieve better outcomes and have exceptional bedside manner.



No surprise bills

When you receive care through Carrum, your company often covers most, if not all, of the medical costs.*



Dedicated support

Our team helps with all the planning and paperwork, so you can focus on your health.

Ready to get started?

Visit: carrum.me/cvt, or
Call: 888-855-7806



*With the exception of second opinions, individuals enrolled in high-deductible plans (PPO HDHP or an EPO HSA) must first meet the federal minimum deductible, but copays and coinsurance will be waived. Second opinions are provided at no cost to members and do not require payment of any deductible. Per IRS rules, a portion of any covered travel expenses will be reported as taxable income.



The One Stop Shop For Mental Wellbeing Resources.

CredibleMind is the free online platform that brings together expert rated and vetted videos, podcasts, apps, online programs, books and articles all in one easy to use place.

Confidential, anonymous, and available 24/7, with CredibleMind you can learn new skills, understand your own mental health, take a mental health assessment and browse our library of thousands of mental wellbeing resources.



Get started today by signing up and taking a mental health assessment.

By signing up, you will have access to: past assessment results to track improvement over time, your favorite resources, and handpicked CredibleMind resources right to your email!

No matter what you are going through, CredibleMind has resources to help with science-backed evidence you can trust.

Some assessments you'll find on CredibleMind are:

- Is it Job Stress or Burnout?
- Are You Mindful or Is Your Mind Full?
- How Strong Is Your Resilience Network
- What's Your Meditation Style?
- What's your Mental Health Profile?
- Dive into Your Personality Big 5!

Why SimpleTherapy?

Investing in your health is one of the best decisions you can make. SimpleTherapy makes it easy to get on the path to feeling better and improving your overall well-being. Our virtual physical therapy program provides the tools you need to turn your health into wealth.

Here's what we can help you with:



Chronic and acute pain



Specific injuries and conditions



Preventive health



Mental health



Ergonomics and workplace safety

Convenient and Accessible

Traditional methods of managing pain and injuries can be stressful, time-consuming, and costly. SimpleTherapy removes these barriers with 15-minute personalized sessions that you can access anytime, anywhere. It's never been easier to stick to your care plan and achieve your health goals.

Expert Care Team

Our program is your first line of defense against pain. SimpleTherapy's clinical team includes physical therapists, pelvic health specialists, orthopedic surgeons, chiropractors, health coaches, and more. These experts are available virtually to help you tackle both new and ongoing health concerns.

Key Benefits

- Unlimited access
- Flexible scheduling
- No equipment required
- Advanced movement analysis
- Self-guided sessions
- Ability to address multiple concerns simultaneously

Coming Soon!

SimpleTherapy launches October 1, 2025

This is a FREE benefit for all CVT members and covered dependents age 13 and older who are enrolled in an EPO or PPO medical plan. HSA & HDHP plans are subject to the deductible



**California's
Valued Trust**

Healthcare Benefits for the Education Community

Take the path to a healthier you.

Join a wellness program through California's Valued Trust and the cost is covered.



Get started at:

www.GoSolera.com/CVT



Scan this
QR code
using your
smartphone
camera

California's Valued Trust is pleased to offer a wellness program for qualified members. It's a 16-week program, followed by monthly sessions, that can help you lose weight, adopt healthy habits and significantly reduce your risk of developing type 2 diabetes.

Get the tools and support to succeed:

- ♦ A **personalized plan** tailored to your tastes, lifestyle and food budget.
- ♦ **Top-rated apps** to make following the plan a breeze.
- ♦ On demand support from **health coaches** and others in the same program.
- ♦ Digital tools like a **Fitbit® activity tracker*** and wireless scale.

See the programs chosen by our experts:

WeightWatchers

betr **habitu**

ciba health

digbi
health

Transform

Questions? Call us at 844-612-2949, Monday through Friday from 6 a.m. to 6 p.m. PT.

Solera Health and are independent companies that offer health and wellness programs, products and services to members of your health plan.

eight atchers, Betr, Habitnu, Ciba Health, Digbi Health, and Transform are independent companies that offer health and wellness programs, products and services to members of your health plan.

*Fitbit activity tracker is for members who complete program participation requirements. Requirements vary, check with your program for details. Applies to certain Fitbit® models. Limited to 1 per person. Solera Health reserves the right to substitute an alternate activity tracker. Wireless scales are available only for members in online only programs (excludes WeightWatchers).

DIABETES PREVENTION PROGRAM - FREQUENTLY ASKED QUESTIONS

What is Solera Health?

Solera Health is a vendor that California's Valued Trust has partnered with to help administer the Diabetes Prevention Program (DPP). Solera will help identify qualified employees and enroll them in a DPP that best fits their needs.

What is the Diabetes Prevention Program?

Also known as the DPP, the Diabetes Prevention Program helps participants lose weight, adopt healthy habits and significantly decrease their risk of developing type 2 diabetes. The program meets weekly for 16 weeks and then monthly for the balance of a year. The program teaches participants to make lasting changes by eating healthier, increasing physical activity and managing the challenges that come with lifestyle change.

How effective is the DPP in reducing the risk of type 2 diabetes?

The DPP has been proven by the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) to decrease the risk of developing type 2 diabetes by 58 percent for those who lose 5 – 7 percent of their body weight through changes in diet and exercise. The NIH and CDC are independent organizations that offer health information that you may find helpful.

What's included in the program?

There are many versions of the lifestyle change program, but most include the following components:

- 16 weekly lessons, followed by monthly sessions for the rest of the year
- Lifestyle health coach to help set goals and keep participants on track
- Small group for support and encouragement
- Helpful tools, like wireless scales and fitness trackers

Who is eligible for the program?

The DPP is a preventive benefit for California's Valued Trust employees and dependents on the medical plan.

How do employees find out if they qualify?

Employees who are identified as having prediabetes or who score as high risk for developing type 2 diabetes can qualify for the program. Employees should visit solera4me.com/cvt and take a one-minute quiz to see if they qualify.

If they're qualified, how do employees enroll?

Employees should visit gosolera.com/cvt to learn more about the program and to enroll online, or they can call 844-612-2949 to enroll over the phone. Once enrolled, participants will receive a welcome email from Solera with instructions on how to complete the registration process with their matched DPP provider. Participants must complete the registration process with their DPP provider to begin the program.

Is there a cost to employees or dependents for participating?

This program is free for all qualified employees and dependents on the medical plan. You may receive an Explanation of Benefits (EOB) for this benefit. No action is necessary if you receive an EOB.

When will I receive my Fitbit®?

After you have been actively participating for the first four weeks of the program, you will receive an email from Solera with a unique code to redeem your Fitbit*. Please be sure to talk to your coach about what it means to "actively participate." For technical questions about how to use your Fitbit, contact Fitbit support at help.fitbit.com/cwsupport.

When should I expect to receive my scale?

If you selected a digital option, you will receive a wireless scale as part of the program. The scale will be shipped once enrollment is complete, typically within five to seven days.

Who should I contact if I have questions about the program?

Call Solera at 844-612-2949 if you have questions.



Helpful Phone Numbers and Website Addresses
October 1, 2025 – September 30, 2026

CVT Preferred Provider Organization (PPO) Plan with Anthem Blue Cross and CVS/caremark		
California's Valued Trust (CVT) Member Services	(800) 288-9870	www.cvtrust.org
Anthem Blue Cross Dedicated CVT Claims Unit	(800) 234-4333	www.anthem.com/ca/cvt
Anthem Global Core – Care outside the United States	(800) 810-2583	www.bluecares.com
CVS/caremark Prescription Drug Benefit (Active members and non-Medicare retirees)	(888) 354-6390	www.caremark.com
SilverScript Prescription Drug Benefit (Medicare retirees)	(888) 620-1756	www.silverscript.com
Carrum Surgery Benefit	(888) 855-7806	www.carrum.me/CVT
AccordantCare Health Management Program (Rare, complex conditions)	(800) 948-2497	www.accordant.com
MDLIVE – 24/7 non-emergency access to doctors, therapists and psychiatrists	(888) 632-2738	www.mdlive.com/cvt
TruHearing Select Discount Hearing Aid Program	(844) 300-0134	www.truhearing.com/select
Carelon Employee Assistance Program (EAP)	(877) 397-1032	www.achievesolutions.net/cvt
Solera4Me Diabetes Prevention Program	(877) 486-0141	www.solera4me.com/cvt
CVT Health Maintenance Organization (HMO) Plan with Blue Shield of California & Kaiser Permanente		
Blue Shield of California Member Services – Find a provider assistance, Change Provider, Pharmacy assistance	(855) 256-9404	www.blueshieldca.com
Teladoc 24/7 non-emergency access to doctors and mental health professionals	(800) 835-2362	www.teladoc.com/bsc
Kaiser Permanente Member Services – Find a provider assistance, Change Provider, Pharmacy assistance	(800) 464-4000	www.kp.org
Additional Coverage Information		
Delta Dental of California	(866) 499-3001	www.deltadentalins.com
Vision Service Plan (VSP)	(800) 877-7195	www.vsp.com



Who Do I Call?

Call your district office when...

- You have questions regarding your payroll deduction
- You want to know when your coverage will end
- You need to change your address and /or phone number
- You want to add a new family member, i.e.; spouse, domestic partner, newborn, or other eligible dependent
- You need to delete a family member, i.e.; due to divorce, or an overage dependent getting married, or no longer eligible, or death in the family

(Your district office will forward the paperwork to CVT, when applicable)

Call California's Valued Trust (CVT) when...

- You have eligibility questions about yourself or your dependents
- You receive a letter from California's Valued Trust and have questions
- You have retiree health benefit coverage questions
- You have questions about COBRA coverage, (continuing benefit coverage through CVT, after terminating employment)
- You need carrier phone numbers, not listed on your insurance card(s)

(CVT may need to refer you to another office when appropriate)

Call the carrier when...

- Prior authorization is required
- You have coordination of benefits questions
- You have questions on an explanation of benefits (EOB)
- You want to know how much deductible you have, or have met
- You want to know how much towards your maximum you have used
- You are billed or balance billed by a provider of service
- You need the status of a claim
- For provider referral

(i.e.; Anthem Blue Cross, Delta Dental, VSP, or CVS Caremark)