



California's
Valued Trust

Healthcare Benefits for the
Education Community



**LANCASTER SCHOOL DISTRICT
Certificated Active & DPR's
Health & Welfare Benefits
October 2026 - September 2027**





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California's
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Medical Plans

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

Lancaster SD - CERTIFICATED

October 1, 2026 - September 30, 2027

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: \$150 Family: \$300	Individual: \$300 Family: \$600
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: \$1,500 ⁽²⁾ Family: \$3,000 ⁽²⁾	Individual: \$2,500 ⁽²⁾ Family: \$5,000 ⁽²⁾	Individual: \$2,500 ⁽²⁾ Family: \$5,000 ⁽²⁾	Individual: \$3,500 ⁽²⁾ Family: \$7,000 ⁽²⁾
Doctor Visits	Primary Care Physician - \$10 Copay Specialist Physician - \$20 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$40 Copay	Primary Care Physician - \$20 Copay Specialist Physician - \$40 Copay	Primary Care Physician - \$30 Copay Specialist Physician - \$60 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	\$200 Copay (Copay waived if admitted as inpatient) After copay, paid at 100%*	\$200 Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 100%*	\$200 Copay (Copay waived if admitted as inpatient) After deductible is met, copay then paid at 90%*	\$200 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	30-Day Supply ^(4, 9) Generic: \$5 Pref Brand: \$22 Non-Pref Brand: \$22 Specialty: Paid at 70%, \$0 when enrolled in Prudent Rx	90-Day Supply ^(4, 9) Generic: \$10 Pref Brand: \$44 Non-Pref Brand: \$44 Specialty: N/A	30-Day Supply ^(4, 9) Generic: \$5 Pref Brand: \$22 Non-Pref Brand: \$22 Specialty: Paid at 70%, \$0 when enrolled in Prudent Rx	90-Day Supply ^(4, 9) Generic: \$10 Pref Brand: \$44 Non-Pref Brand: \$44 Specialty: N/A	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	30-Day Supply ^(4, 9) Generic: \$7 Pref Brand: \$25 Non-Pref Brand: \$40 Specialty: Paid at 70%, \$0 when enrolled in Prudent Rx	90-Day Supply ^(4, 9) Generic: \$15 Pref Brand: \$60 Non-Pref Brand: \$90 Specialty: N/A

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, 2026 - September 30, 2027

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: \$3,500 Family: \$7,000	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 \$120 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	\$200 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 \$200 Copay (copay waived if admitted as inpatient)
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%* 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%. 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⁾	
Prescription Drugs	30-Day Supply ^(4, 9) Generic: \$7 Pref Brand: \$25 Non-Pref Brand: \$40 Specialty: Paid at 70%, \$0 when enrolled in Prudent Rx	90-Day Supply ^(4, 9) Generic: \$15 Pref Brand: \$60 Non-Pref Brand: \$90 Specialty: N/A	30-Day Supply Subject to deductible, then Generic: \$25 Copay Pref Brand: \$50 Copay Non-Pref Brand: \$50 Copay Specialty: Paid at 70%, reduced to \$0 after deductible when enrolled in PrudentRx	90-Day Supply Subject to deductible, then Generic: \$50 Copay Pref Brand: \$100 Copay Non-Pref Brand: \$100 Copay Specialty: N/A	30-Day Supply Subject to deductible, then Generic: \$25 Copay Pref Brand: \$50 Copay Non-Pref Brand: \$50 Copay Specialty: Paid at 70%, \$0 when enrolled in PrudentRx	90-Day Supply Subject to deductible, then Generic: \$50 Copay Pref Brand: \$100 Copay Non-Pref Brand: \$100 Copay Specialty: N/A

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**.

Earn rewards for wellness

With your CVT Anthem Blue Cross Wellness PPO plan



By choosing the Anthem Blue Cross Wellness PPO plan, you've taken a step toward 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 **More > 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.



California's
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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**.

Redeeming 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.

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.

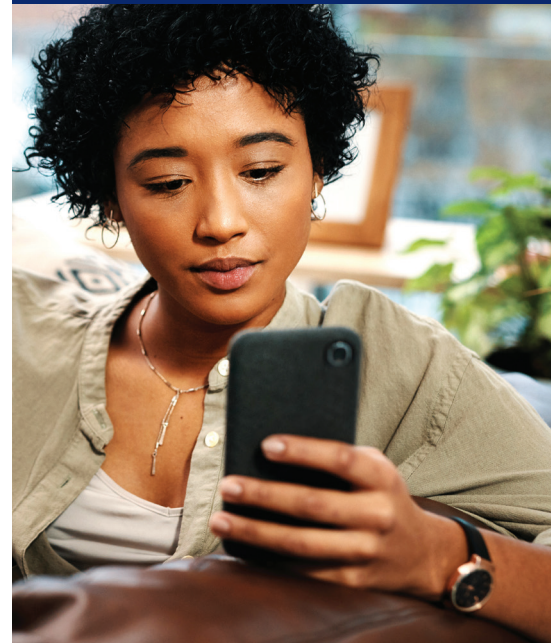
Save money and time with virtual care

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 Carelon 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, 2026 - September 30, 2027

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	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.



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

A38517_0423

CVT HMO Health Plans with Kaiser Permanente

Lancaster SD - CERTIFICATED

October 1, 2026 - September 30, 2027

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	Up to 30-Day Supply	Up to 100-Day Supply	Up to 30-Day Supply	Up to 100-Day Supply	Up to 30-Day Supply	Up to 100-Day Supply	Up to 30-Day Supply	Up to 100-Day Supply	Up to 30-Day Supply	Up to 100-Day Supply
	Plan Pharmacy	Mail Order	Plan Pharmacy	Mail Order	Plan Pharmacy	Mail Order	Plan Pharmacy	Mail Order	Plan Pharmacy	Mail Order
	Tier 1 \$5	Tier 1 \$10	Tier 1 \$5	Tier 1 \$10	Tier 1 \$10	Tier 1 \$20	Tier 1 \$10	Tier 1 \$20	Tier 1 \$10	Tier 1 \$20
	Tiers 2 & 4 \$10	Tier 2 \$20	Tiers 2 & 4 \$10	Tier 2 \$20	Tiers 2 & 4 \$20	Tier 2 \$40	Tiers 2 & 4 \$30	Tier 2 \$60	Tiers 2 & 4 \$25	Tier 2 \$50

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 Office Visits: Plans 1 - \$10 Copay; Plan 2 - \$15 Copay; Plan 3 - \$20 Copay; Plan 4 - \$30 Copay; Plan 5 - \$35 Copay; Plan 6 - \$25 Copay; Plan 7 - \$35 Copay; Plan 8 - \$20 Copay; Plan 9 Wellness - \$40 Copay; Plan 10 Bronze - 60%* after deductible is met; Plan 11 HSA - \$30 copay after deductible is met; All services: cost share you would pay if the services were to treat any other condition.

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.



California's
Valued Trust

Dental & Vision Plans

Delta Dental PPO Incentive Plan Summary of Benefits

Effective October 1, 2026 to September 30, 2027

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.



Make Eye Health a Priority with VSP!

Your health comes first with VSP and California's Valued Trust (Plan C \$5 Copay, additional glasses or contacts). Take a look at your VSP vision care coverage.



VSP members save an annual average of

\$489*

More Ways to Save

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

bebe Calvin Klein COLE HAAN
DRAGON FLEXON LONGCHAMP

 and more

Up to **40%** savings on
lens enhancements‡

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

Enroll through your employer today.

Questions?

vsp.com

800.877.7195 (TTY: 711)



Scan QR code
or visit vsp.com
to learn more.

Routine eye exams have saved lives.

Did you know an eye exam is the only non-invasive way to view blood vessels in your body? Your eye doctor can detect signs of more than 270 health conditions during your annual eye exam—including diabetes and high blood pressure, as well as eye conditions such as glaucoma and diabetic eye disease.**

Savings you'll love.

See and look your best without breaking the bank. VSP members get savings on popular frame brands and contact lenses, and they get additional discounts on things like LASIK, and more.

The choice is yours!

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



Get more at preferred in-network doctor locations

private
practice
doctors

Visionworks

**EYEMART
EXPRESS**
PARTLY OF STORES

Premier Edge™ Promise

You now have access to the Premier Edge Promise, a worry-free eyewear guarantee.*** Whether you accidentally break or damage your glasses, your prescription changes, or if you don't love the glasses you chose, you're covered! Visit vsp.com/zerocopy for details.

†Frame brands and promotion subject to change. Only available to VSP members with applicable plan benefits. Only available at in-network locations. Members who participate in a Medicaid/state-funded plan are not eligible.
‡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. *Based on state and national averages for eye exams and most commonly purchased brands. This represents the average savings for a VSP member with a full-service plan at an in-network provider. Your actual savings will depend on the eyewear you choose, the plan available to you, the eye doctor you visit, your copays, your premium, and whether it is deducted from your paycheck pre-tax. Source: VSP book-of-business paid claims data for Aug-Jan of each prior year. **Full Picture of Eye Health, American Optometric Association, 2020. +Coverage with a retail chain may be different or not apply. ***Worry-free guarantee covers broken/damaged glasses or a prescription change within 12 months, or a style change within 100 days. Restrictions may apply; visit (include appropriate link) for terms and conditions.

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. Availability of VSP Premier Edge™ may vary.

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, Eyeconic, and Eyemart Express family of stores are VSP-affiliated companies.

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All other brands or marks are the property of their respective owners. 136668 VCCM

Classification: Restricted

Your VSP Vision Benefits Summary

2026-2027

Lancaster SD - Certificated & Classified

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



BENEFIT	DESCRIPTION	PREMIERMAX	COPAY WITH OTHER VSP
		COPAY WITH PREMIER EDGE PROVIDERS	NETWORK PROVIDERS
COVERAGE WITH A VSP PROVIDER			
WELLVISION EXAM	<ul style="list-style-type: none">Focuses on your eyes and overall wellnessEvery 12 months	\$0	\$5 for exam and glasses
RETINAL SCREENING	<ul style="list-style-type: none">Images of the inside of the eye, used to screen for potential signs of eye diseaseEvery 12 months	\$0	Up to \$39
ESSENTIAL MEDICAL EYE CARE	<ul style="list-style-type: none">Retinal imaging for members with diabetes covered-in-fullAdditional 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 ⁺	<ul style="list-style-type: none">\$220 Featured Frame Brands allowance\$200 frame allowance20% 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	<ul style="list-style-type: none">Single vision, lined bifocal, and lined trifocal lensesImpact-resistant lenses for dependent childrenEvery 12 months	Combined with exam	Combined with exam
LENS ENHANCEMENTS ⁺	<ul style="list-style-type: none">Standard progressive lensesPremium progressive lensesCustom progressive lensesAverage savings of 40% on other lens enhancementsEvery 12 months	\$0 \$80 - \$90 \$120 - \$160	\$0 \$80 - \$90 \$120 - \$160
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none">\$150 allowance for contacts; copay does not applyContact lens exam (fitting and evaluation)Every 12 months	Up to \$60	Up to \$60
ADDITIONAL PAIR OF EYEWEAR	<ul style="list-style-type: none">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.Every 12 months for frame / Every 24 months for lenses	\$20 for frame and lenses	\$20 for frame and lenses
	<ul style="list-style-type: none">Contacts (instead of glasses): \$150 allowance for additional contactsEvery 12 months	Up to \$60	Up to \$60
ADDITIONAL SAVINGS	Glasses and Sunglasses <ul style="list-style-type: none">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 <ul style="list-style-type: none">Average of 15% off the regular price; discounts available at contracted facilities.After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor		
	Exclusive Member Extras <ul style="list-style-type: none">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.		



California's
Valued Trust

Additional Resources

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.





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



SmartShopper is now part of your health plan benefits

As a member of **Anthem**, you now have SmartShopper. It's a feature of your plan that sends you **cash rewards** for choosing high-value locations for care. With SmartShopper you can compare in-network locations for over **100** different medical procedures and tests such as a colonoscopy, mammogram and more.

Here's where to access your SmartShopper benefit online:

1. Go to anthem.smartshopper.com
2. Log in to your existing account or click Create Account
3. Browse in-network locations to compare costs and reward amounts

How it works



Compare locations at **anthem.smartshopper.com** or call the Care Concierge Team at **866-488-5441**



Go to a reward-eligible location for your procedure



Earn a cash reward up to **\$1000**



Scan this code or contact us to get started!



The Care Concierge Team can:

-  Compare locations and reward amounts
-  Gain prior authorizations
-  Schedule your service for you

The Care Concierge Team is available Monday through Thursday from 5 a.m. to 5 p.m. and Friday from 5 a.m. to 3 p.m. PST. Summer hours: The Care Concierge Team closes at 12 p.m. PST on Fridays from Memorial Day to Labor Day.

The SmartShopper program is offered by MDX Medical, LLC, a Zelis company. Reward-eligible options and reward amounts are subject to change. Rewards are available for select procedures only. Rewards may be a taxable form of income. MDX Medical, LLC, a Zelis company, does not provide tax advice. Rewards may be delivered by check or an alternative form of payment. Members with primary coverage under Medicaid or Medicare are not eligible to receive incentive rewards under the SmartShopper program.

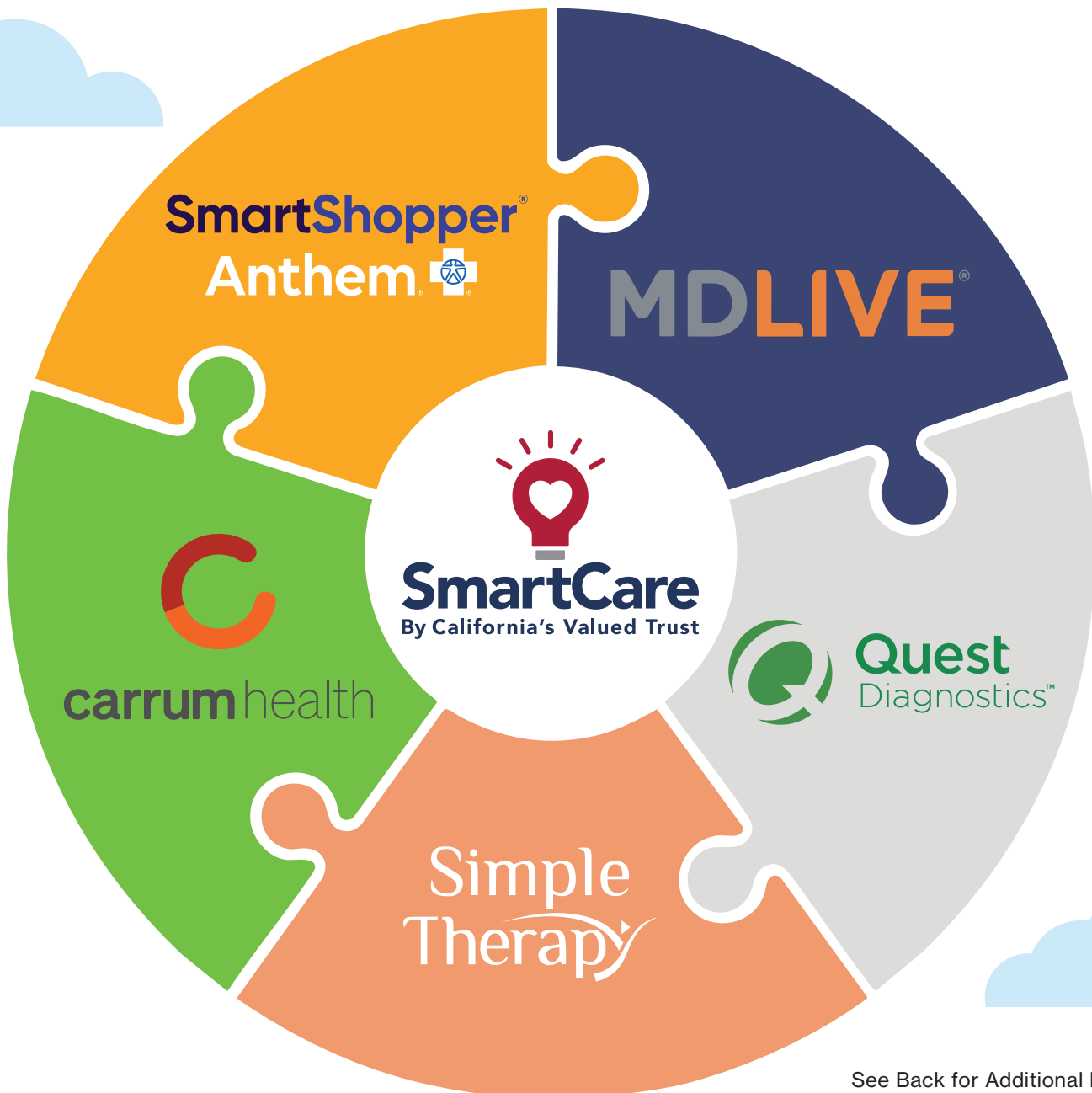
Anthem Blue Cross is the trade name of Blue Cross of California. Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company are independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Shop Smart. Care Smart. Introducing SmartCare by CVT.

Meet Your SmartCare Tools!

CVT has packaged these tools into the SmartCare program to help members make informed choices and save money through innovative, easy-to-use and convenience-focused programs.

If you have questions about any of these tools, call **CVT Member Services** at **(800) 288-9870**.



See Back for Additional Details

NEW

SmartShopper[®] Anthem

**\$25-\$1,000 Gift Card
per Shopped Procedure**

Anthem PPO and EPO members can earn rewards for shopping for cost-effective, in-network care.

Who is eligible: Anthem PPO and EPO active and non-Medicare retirees

Learn more at:



(866) 488-5441



carrumhealth

\$0 Member Cost Share!*

Centers of Excellence for:

- Outpatient Surgery
- Cancer Care
- Substance Use Disorder

Who is eligible: PPO and EPO members

**Individuals enrolled in high-deductible plans must first meet their deductible, but copays and coinsurance will be waived.*

Learn more at:



(888) 855-7806

SimpleTherapy

\$0 Member Cost Share!

- 24/7 access to programs for pain management, pelvic health, injury prevention and more
- Unlimited access
- One-on-one personal health coaching

Who is eligible: PPO and EPO members

Learn more at:



(800) 644-2478



MDLIVE[®]

\$0 Member Cost Share!

- 24/7 Urgent Care
- Virtual Primary Care
- Behavioral Health
- Dermatology

Who is eligible: PPO and EPO members

Learn more at:



(888) 632-2738

Quest Diagnostics[™]

\$25 Digital Reward Card

Biometric screenings for subscribers, spouses/partners, over 18 age dependents.

Who is eligible: All CVT members

Quest Password: CVT2026

Learn more at:



(855) 623-9355





A benefit that seems too good to be true.

Thanks to CVT, members have access to expert medical care — **at little to no cost.***

Carrum Health is a benefit that helps you and your covered family members get care from some of the best surgeons, cancer specialists and recovery centers in the country.

The best part? Instead of getting billed for every visit or service, you pay one low price for your care and never receive a medical bill. **Plus, the cost is often fully covered, so you may not have to pay anything at all.***

Don't pay more for specialty care than you need to. Get high-quality care for less. Create your free online account today.

Visit: carrum.me/cvt

Call: 888-855-7806



The experts in our network specialize in a variety of care including:

- Cancer Care
- Heart surgeries
- Hysterectomies
- Surgeries for your bones, joints and muscles
- Spine surgeries
- Alcohol and opioid addiction treatment
- Weight loss surgeries

*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.



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

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.



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.

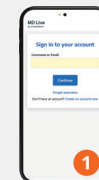
how to know which option to choose.



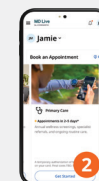
When you need support managing a chronic condition or a new health concern, choosing between virtual and in-person care can be confusing if you don't know your options. MDLIVE Primary Care offers convenient access to board-certified doctors with wellness screenings, routine care, and support for ongoing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

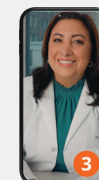
get started in 3 quick steps:



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.



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.

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

Visit: go.simpletherapy.com/cvt

Call: 1-800-644-2478

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.



**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

NOOM

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

Solera Health is an independent company that offer health and wellness programs, products and services to members of your health plan.

WeightWatchers, Betr, Habitnu, Ciba Health, Digbi Health, Noom 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.

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?

HMO Access+ plan.....\$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?

HMO Access+ plan.....\$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.

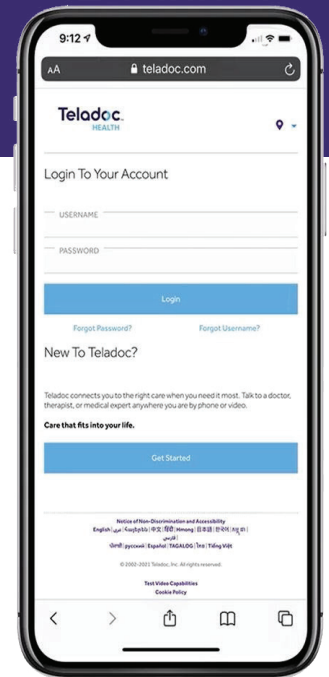
1. Visit **blueshieldca.com/teladoc**.
2. Register or log in. You can request a consultation any time you need care.
3. Download the Blue Shield app to access care from anywhere.

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



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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

Learn more at **kp.org/getcare**





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!

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





Transform your health

Schedule and complete your **FREE** screening today and receive a **\$25 Amazon e-gift card!**



At an on-site event*

On-site events make it easy and convenient to complete your screening.

Schedule an appointment at MyQuestForHealth.com

- Use **Registration Key CVT2026**
- In the **Wellness Screening** section, under **On-site Event**, select **Make an Appointment**
- You will receive an email when your results are ready to view online



At a Patient Service Center (PSC)*

Quest Diagnostics has nearly 2,000 PSC locations nationwide.

Schedule an appointment at MyQuestForHealth.com

- Use **Registration Key: CVT2026**
- In the **Wellness Screening** section, under **Patient Service Center**, select **Schedule a Screening by 12/15/2026**
- If you schedule as a walk-in, you may be required to make an appointment upon check-in
- You will receive an email when your results are ready to view online



With self-collection*

Complete your screening at your convenience with self-collection materials. Option only available if you live outside of a 20 mile radius from a Patient Service Center (PSC).

Request Quest Activate self-collection materials* at MyQuestForHealth.com

- Use **Registration Key: CVT2026**
- In the **Wellness Screening** section, under **Self-Collection**, select **Order Materials**
- Activate your materials at QuestActivate.com and complete the self-collection
- Return your specimen to Quest the same day you complete it
- Return your materials by **12/31/2026**
- You will receive an email when your results are ready to view online

*Note: Self-collection materials cannot be shipped to the state of NY or military bases located in the US

Take charge of your health. *Available once a year to employees, dependents 18+, and under 65 retirees enrolled on a CVT medical plan.

QuestDiagnostics.com

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Savings that speak volumes.



Thanks to California's Valued Trust (CVT), medical plan subscribers and covered dependents have access to special savings on high-quality prescription hearing aids through TruHearing®. It's easy to get started.

Your 2027 hearing program provides up to two TruHearing Advanced or Premium hearing aids per year.

	Hearing aid	Avg retail price per aid	Savings per aid	You pay
CVT Member pays Exam: \$45	TruHearing Advanced	\$2,720	\$2,021	\$699 (per aid)
	TruHearing Premium	\$3,250	\$2,251	\$999 (per aid)

Rechargeable battery option available on select styles for an additional \$50 per hearing aid.

Exam must be performed by a TruHearing network provider. All exam appointments and hearing aid purchases must be made through TruHearing.

Your hearing aid purchase includes

-  **60-day**, risk-free trial
-  **1 year** of follow-up visits
-  **80 batteries** per non-rechargeable aid
-  **3-year** full manufacturer warranty



Start by calling TruHearing.

1-844-330-4417
TTY: 711

8am–8pm, Monday–Friday



TruHearing support at every step.

Scan to learn more about the process.

TruHearing.com/how-it-works



Call to get started.

1-844-330-4417 | TTY: 711

8am–8pm, Monday–Friday

Learn more: TruHearing.com/CVT

It's simple to begin.



Call TruHearing



Schedule an exam



Go to your exam



Order hearing aids



Fitting and follow-up

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California's
Valued Trust

Healthcare Benefits for the
Education Community

Helpful Phone Numbers and Website Addresses

October 1, 2026 – September 30, 2027

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)