



STRONGER WITH YOU

Discover all that's
new in the plans that
put your clients first.



2023 Broker Sales Guide
Individual and Family Plans

Effective January 1, 2023

TABLE OF CONTENTS ➞

Letter from Patrice Bergman.....	1
Key dates.....	2
New for 2023.....	3-4
Rate changes.....	5-6
Network updates.....	7-8
Plan benefit changes	9-21
Specialty plan updates	22
Tools to simplify your sales.....	23

HELLO,



Thank you for your continued dedication and service to Blue Shield of California clients. Together, we're advancing our mission of ensuring all Californians have access to quality health care at an affordable price. 2023 Open Enrollment is right around the corner, and we've been working hard to make improvements and find efficiencies in the ways we work together and service our mutual clients.

Here are several highlights I am proud to share with you:

- **We are bringing your clients more choice.** The Trio HMO area/network is expanding by an additional 19 zip codes in Monterey County, effective January 1.
- **To help ensure your clients can get the care they need:** A Medical nutrition therapy benefit is being added to off-exchange plans effective January 1.
- **We are working to improve your efficiency:** We have enriched our self-service tools to improve your quoting capabilities, along with client response tracking, and a streamlined account management experience. We have also improved the personalization capabilities of our IFP sales collateral through Shield on Demand, to help you complete the sale.
- **Improving your clients' digital experience:** It's now easier than ever for your clients to log into their digital accounts. We've simplified the interface for viewing and managing multiple plans, and increased accessibility while keeping data secure.

As millions of Californians take advantage of the extended financial help, we want to encourage you to certify as an agent with Covered California if you have not already done so. Ensure that you remain the broker of record for any clients who move from off-exchange to on-exchange to take advantage of the subsidies.

And remember, we are here to support your efforts during this open enrollment season. There's power in a group of people working together towards a shared goal. We are stronger with you and we appreciate your dedication to Blue Shield and all that you do to help ensure that all Californians have access to affordable health coverage.

Sincerely,

A handwritten signature in black ink that reads "Patrice Bergman".

Patrice Bergman
Vice President & General Manager
Individual & Family Plans

KEY DATES

Open enrollment for 2023 will begin on **November 1, 2022**.

We will mail your clients information about any changes to their plan rates and benefits, which they should receive by October 21.

Starting October 18, Blue Shield members can renew their plan through our online renewal tool at blueshieldca.com/renew. Off-exchange members can change their plan on the same site, but on-exchange members will need to make any changes through Covered California.

New plan selections must be submitted by December 31, 2022, to ensure a January 1, 2023, effective date.

OCTOBER	18	Blue Shield's online broker and member renewal tools are available
	21	Clients are notified of any rate or benefit changes to their plan
NOVEMBER	1	Open enrollment begins
DECEMBER	31	Final date for new members to obtain coverage effective January 1, 2023 Final date for renewing members to change plans for a January 1, 2023 effective date
JANUARY	31	Final day of open enrollment and to apply for coverage effective February 1, 2023
FEBRUARY	1	Applicants must experience a Qualifying Life Event (QLE) to be eligible for coverage

NEW FOR 2023

Medi-Cal Redetermination

Medi-Cal redetermination activities are scheduled to begin once the public health emergency ends. Medi-Cal eligibles who no longer meet the eligibility requirements will lose their Medi-Cal coverage and be auto-enrolled in the lowest cost Silver Individual and Family Plan. The member will be notified and have time to either acknowledge they want to remain with the carrier selected, select a different plan, or choose not to enroll. Notifications will also be sent to redetermined members' broker of record to assist them in selecting the appropriate plan in the individual market.

Blue Shield will provide more information and trainings as dates and details are confirmed.

Grandfathered Plan Withdrawal

The Shield Savings 4000/8000-G product (issued by Blue Shield Life) is being withdrawn as of 12/31/22. Members who are currently on this plan will be migrated onto the Silver 2600 HDHP PPO plan (issued by Blue Shield) with an effective date of 1/1/23. Notifications will be sent in September. There is nothing for the member to do if they choose to stay on the new plan.





Improving the Member Experience:

Blue Shield is dedicated to improving the member experience from application to membership. Member digital accounts have recently been updated to provide improved accessibility by allowing either a Social Security number or Member ID. To simplify access, multiple plan accounts have been merged. And soon, the on-exchange application provided by Covered California, will be updated to allow an applicant to select their PCP during the application process.

Increased Financial Help has been Extended until 2025

The Inflation Reduction Act (2022) has extended the additional premium assistance initially provided by the American Rescue Plan (2021) for another three years (through December 31, 2025). The landmark legislation will continue to make health coverage more affordable for millions of Californians. This is a great opportunity to sell a Blue Shield plan to those who are currently uninsured or looking to switch health carriers. With our wide range of HMO and state-wide PPO plans, our competitive pricing, and our robust provider networks featuring marque providers such as Cedars Sinai, Hoag Memorial, UCSF, UCLA Health, and Scripps, enrolling your clients in a Blue Shield plan is the smart and easy choice this open enrollment.

To take advantage of the subsidies, your clients must apply through Covered California. To get credit for the sale, you must be certified as a Covered California agent. To get certified, visit coveredca.com/agents.

RATE CHANGES

[Visit the rates page](#) on Broker Connection to download the 2023 medical and specialty plans rate book and regional rate sheets.

After the prior three years of rate changes ranging from -2.4% to 3.6%, Blue Shield of California Individual and Family Plans are increasing an average of 9.6% in 2023 due to higher utilization of healthcare services, increasing testing costs stemming from the COVID-19 Public Health Emergencies, and the rising cost of healthcare due to inflation.

For dental, vision and life insurance products, there will be a modest rate increase for off-exchange dental plans, while vision products, on-exchange HMO dental plans, life insurance and AD&D rates will get a rate pass. On-exchange PPO dental plan rates will increase at varying levels by region.



MEDICAL PLAN RATE CHANGES

Our medical plan rates will receive an average increase of 9.6% (8.7% on-exchange and 11.4% off-exchange) state-wide effective January 1, 2023.

Our Trio HMO plan rates will rise at a slower rate (4.6%) than our PPO plans (10.7%) on average as these plans were designed to keep premiums down.

Our grandfathered medical plans will have an average rate increase of 6.0%.

Some regions will see rate reductions. Our PPO plans were reduced by an average of 3.1% in region 11 (Central Valley South). Our HMO plans were reduced by an average of 6% in region 10 (Central Valley North) and 4.9% in region 19 (San Diego).

Top 3 price position* by region highlights (for silver metal-level plans)

Trio HMO	Regions 3, 4, 8, 9, 10, 12, 18
PPO	Regions 1, 6, 11, 12, 13, 14

*Price position is a comparison of our on-exchange Silver 70 Trio HMO and Silver 70 PPO plans to other lowest cost silver plans in the region, and may change depending on age, income, metal level, plan type or other factors.

Please consult our comprehensive rate book to see detailed rate information.



DENTAL PLAN RATE CHANGES

Our off-exchange dental PPO and HMO plans will experience a 3.9% rate increase this year. The on-exchange dental HMO plan is getting a rate pass for 2023. On-exchange dental PPO plans are increasing 3-15% in some regions (3-9, 15-16), with a rate pass in others (1, 2, 10-14, 17-19), which is less than \$7 per month in additional cost. See the chart below for specifics.

ON-EXCHANGE DENTAL PPO PLAN RATE BY REGION

Region	2022 Rate		Rate Change	2023 Rate		
	DPPO			DPPO		
	Adult	Child		Adult/Child	Adult	Child
1	\$43.70	\$28.80	0%	\$43.70	\$28.80	
2	\$46.10	\$30.30	10%	\$50.70	\$33.30	
3	\$48.80	\$32.10	0%	\$48.80	\$32.10	
4	\$43.70	\$28.80	15%	\$50.30	\$33.10	
5	\$46.10	\$30.30	10%	\$50.70	\$33.30	
6	\$46.10	\$30.30	10%	\$50.70	\$33.30	
7	\$46.10	\$30.30	15%	\$53.00	\$34.80	
8	\$46.10	\$30.30	10%	\$50.70	\$33.30	
9	\$43.70	\$28.80	10%	\$48.10	\$31.70	
10	\$46.10	\$30.30	0%	\$46.10	\$30.30	
11	\$46.10	\$30.30	0%	\$46.10	\$30.30	

**ON-EXCHANGE DENTAL PPO PLAN RATES BY REGION
(CONT.)**

12	\$48.80	\$32.10	0%	\$48.80	\$32.10
13	\$43.70	\$28.80	0%	\$43.70	\$28.80
14	\$43.70	\$28.80	0%	\$43.70	\$28.80
15	\$46.10	\$30.30	3%	\$47.50	\$31.20
16	\$43.70	\$28.80	5%	\$45.90	\$30.20
17	\$46.10	\$30.30	0%	\$46.10	\$30.30
18	\$48.80	\$32.10	0%	\$48.80	\$32.10
19	\$48.80	\$32.10	0%	\$48.80	\$32.10

* Family Dental adult rates begin at age 19



VISION PLAN RATE CHANGES

Our vision* plans will get a rate pass this year. Your clients can get a Blue Shield vision plan for as low as \$6.90 per month.

* Underwritten by Blue Shield of California Life & Health Insurance Company.

NETWORK UPDATES

Trio expands in Monterey County

Our Trio ACO HMO network continues to grow in Monterey County. Starting January 1, Trio will be available in these additional Zip Codes: 93920, 93922, 93923, 93921, 93924, 95012, 93925, 93926, 95039, 93901, 93902, 93905, 93906, 93907, 93908, 93912, 93915, 93960, 93962.

Don't forget to [download the new 2023 PPO and Trio HMO Plans at a Glance brochures](#) on Broker Connection. They are available in English, Spanish, Chinese, Korean, and Vietnamese. You can also order print versions in English and Spanish through the [online ordering site](#).

MONTEREY COUNTY ZIP CODES

93933, 93940, 93942, 93943, 93944, 93950, 93953, 93955, 93920, 93922, 93923, 93921, 93924, 95012, 93925, 93926, 95039, 93901, 93902, 93905, 93906, 93907, 93908, 93912, 93915, 93960, 93962

We have contracted with Aspire Health Plan, which includes Montage Medical Group and Salinas Valley Memorial Healthcare System. Contracted hospitals for Monterey County include Community Hospital of the Monterey Peninsula, George L. Mee Memorial Hospital and Salinas Valley Medical Center. Our Trio HMO Network now has nearly 400 hospitals, 6,100 primary care physicians and 19,200 specialists.

The Trio HMO plan is available in 28 counties



(F) = FULL COVERAGE

Alameda (F)
Contra Costa (F)
El Dorado (P)
Fresno (P)
Kern (P)
Kings (P)
Los Angeles (P)
Marin (P)
Monterey (P)
Nevada (P)
Orange (F)
Placer (P)
Riverside (P)
Sacramento (P)

(P) = PARTIAL COVERAGE

San Bernardino (P)
San Diego (P)
San Francisco (F)
San Joaquin (F)
San Luis Obispo (P)
San Mateo (F)
Santa Barbara (P)
Santa Clara (F)
Santa Cruz (F)
Solano (P)
Stanislaus (P)
Tulare (P)
Ventura (P)
Yolo (P)

PPO network

Offer your clients more choice and the providers they want with one of the largest PPO networks in California for the IFP market. Our robust provider network offers access to more than 60,000 doctors, 940 urgent care centers, and 330 hospitals. The network includes premier hospitals such as:



Our PPO plans also include coverage for non-network providers, giving your clients more value than lower-cost EPO plan options with narrow provider networks. If your clients value their choice of providers, a Blue Shield PPO plan may be the right choice for them.

PLAN BENEFIT CHANGES

Medical plan changes

There are several benefit changes for 2023 – most of which are mandated by Covered California's standard plan design changes. You will find a summary of key changes by plan in the benefit charts below. For a list of all benefit change details, and to see copies of the notifications your clients will receive, visit the 2023 [Client Notifications page](#).

Some notable changes include:

- The medical deductible will be increasing in the Silver 70 PPO and Trio HMO plans, the Silver 73 PPO and Trio HMO plans, and the Blue Shield Minimum Coverage PPO plan.
- The out-of-pocket maximum will be increasing in the Silver 70 PPO and Trio HMO plans, Silver 73 PPO and Trio HMO plans, Silver 87 PPO and Trio HMO plans, Silver 94 PPO and Trio HMO plans, Silver 1750 PPO plan, Bronze 7500 Trio HMO plan, Gold 80 PPO and Trio HMO plans and the Blue Shield Minimum Coverage PPO plan.
- The pharmacy deductible will be increased on the Silver 70 PPO and Trio HMO plans, the Silver 73 PPO and Silver 87 PPO and Trio HMO plans.

Please note: The following medical benefit plan changes do not reflect any network or non-network daily allowable amounts.

For a comprehensive list of benefits for each plan, please view the [2023 Summary of Benefits](#) page.

OFF-EXCHANGE ONLY PLANS (NON-MIRRORED)

PPO Plans

	SILVER 70 OFF-EXCHANGE PPO CHANGES	
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,750 per person / \$17,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$85 per person / \$170 per family
Tier 1 prescription drugs	\$15	\$16
Tier 2 prescription drugs	\$55	\$60
Tier 3 prescription drugs	\$85	\$90
Tier 1 drugs – Mail	\$45	\$48
Tier 2 drugs – Mail	\$165	\$180
Tier 3 drugs – Mail	\$255	\$270
Primary care office visits	\$35	\$45
Physician home visit	\$35	\$45
Other practitioner office visits	\$35	\$45

SILVER 70 OFF-EXCHANGE PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Physician or surgeon services in an inpatient facility	20%	30%
Other specialist care office visit	\$70	\$85
Podiatric services	\$70	\$45
Abortion and abortion-related services	20%	\$0
Abortion and abortion-related services (Doctors out of network)	50%, deductible applies	\$0, deductible does not apply
Urgent care center services	\$35	\$45
Inpatient facility services – Hospital services and stay	20%	30%
Inpatient facility services – Special transplant facility inpatient services	20%	30%
Inpatient facility services – Physician inpatient services	20%	30%
Bariatric surgery services designated CA counties – Inpatient facility services	20%	30%
Bariatric surgery services designated CA counties – Physician inpatient services	20%	30%
Laboratory services – Laboratory center	\$40	\$50
Laboratory services – Outpatient department of a hospital	\$40	\$50
Acupuncture services	\$35	\$45
X-ray and imaging services – Outpatient radiology center	\$85	\$95
X-ray and imaging services – Outpatient department of a hospital	\$85	\$95
Other outpatient diagnostic testing – Office location	\$85	\$95
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$95
Rehabilitative and habilitative services – Office location	\$35	\$45
Rehabilitative and habilitative services – Outpatient department of a hospital	\$35	\$45
Home infusion and home injectable therapy services – Home infusion agency services	\$45	\$0
Home infusion and home injectable therapy services - Hemophilia home infusion services	\$45	\$0
Skilled Nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled Nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

SILVER 1750 PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,750 per person / \$17,500 per family
Tier 1 prescription drugs	\$15	\$20
Tier 2 prescription drugs	\$60	\$75
Tier 3 prescription drugs	\$80	\$90
Tier 1 prescription drugs (Mail)	\$45	\$60
Tier 2 prescription drugs (Mail)	\$180	\$225
Tier 3 prescription drugs (Mail)	\$240	\$270
Primary care office visit	\$40	\$55
Other specialist care office visit	\$75	\$85
Physician home visit	\$40	\$55

SILVER 1750 PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Other practitioner office visit	\$40	\$55
Acupuncture services	\$40	\$55
Podiatric services	\$75	\$55
Abortion and abortion-related services	35%	\$0
Urgent care center services	\$40	\$55
Laboratory services - Laboratory center	\$40	\$50
Laboratory services - Outpatient Department of a Hospital	\$40	\$50
Mental health and substance use disorder – Office visit, including physician office visit	\$40	\$55
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0, deductible does not apply

Trio HMO Plans

SILVER 70 OFF-EXCHANGE TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,750 per person / \$17,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$85 per person / \$170 per family
Tier 1 prescription drugs	\$15	\$16
Tier 2 prescription drugs	\$55	\$60
Tier 3 prescription drugs	\$85	\$90
Tier 1 drugs – Mail	\$45	\$48
Tier 2 drugs – Mail	\$165	\$180
Tier 3 drugs – Mail	\$255	\$270
Primary care office visits	\$35	\$45
Trio+ specialist care office visit	\$70	\$85
Other specialist care office visit	\$70	\$85
Physician home visit	\$35	\$45
Other practitioner office visits	\$35	\$45
Physician or surgeon services in an inpatient facility	20%	30%
Acupuncture services	\$35	\$45
Podiatric services	\$70	\$45
Abortion and abortion-related services	20%	\$0
Urgent care center services	\$35	\$45
Laboratory services – Laboratory center	\$40	\$50
Laboratory services – Outpatient department of a hospital	\$40	\$50
X-ray and imaging services – Outpatient radiology center	\$85	\$95
X-ray and imaging services – Outpatient department of a hospital	\$85	\$95
Other outpatient diagnostic testing – Office location	\$85	\$95
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$95
Rehabilitative and habilitative services – Office location	\$35	\$45

SILVER 70 OFF-EXCHANGE TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Rehabilitative and habilitative services – Outpatient department of a hospital	\$35	\$45
Inpatient facility services – Hospital services and stay	20%	30%
Inpatient Facility services – Special transplant facility inpatient services	20%	30%
Inpatient facility services – Physician inpatient services	20%	30%
Skilled Nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled Nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

BRONZE 7500 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$8,350 per person / \$16,700 per family	\$8,750 per person / \$17,500 per family
Podiatric services	\$80	\$70
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	\$150	\$0
Medical nutrition therapy	\$150	\$70

ON-EXCHANGE ONLY PLANS (NON-MIRRORED)

PPO Plans

SILVER 70 ON-EXCHANGE PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,750 per person / \$17,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$85 per person / \$170 per family
Tier 1 prescription drugs	\$15	\$16
Tier 2 prescription drugs	\$55	\$60
Tier 3 prescription drugs	\$85	\$90
Tier 1 drugs – Mail	\$45	\$48
Tier 2 drugs – Mail	\$165	\$180
Tier 3 drugs – Mail	\$255	\$270
Primary care office visits	\$35	\$45
Physician home visit	\$35	\$45

SILVER 70 ON-EXCHANGE PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Other practitioner office visits	\$35	\$45
Physician or surgeon services in an inpatient facility	20%	30%
Other specialist care office visit	\$70	\$85
Podiatric services	\$70	\$45
Abortion and abortion-related services	20%	\$0
Urgent care center services	\$35	\$45
Inpatient facility services – Hospital services and stay	20%	30%
Inpatient facility services – Special transplant facility inpatient services	20%	30%
Inpatient facility services – Physician inpatient services	20%	30%
Bariatric surgery services designated CA counties – Inpatient facility services	20%	30%
Bariatric surgery services designated CA counties – Physician inpatient services	20%	30%
Laboratory services – Laboratory center	\$40	\$50
Laboratory services – Outpatient department of a hospital	\$40	\$50
Acupuncture services	\$35	\$45
X-ray and imaging services – Outpatient radiology center	\$85	\$95
X-ray and imaging services – Outpatient department of a hospital	\$85	\$95
Other outpatient diagnostic testing – Office location	\$85	\$95
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$95
Rehabilitative and habilitative services – Office location	\$35	\$45
Rehabilitative and habilitative services – Outpatient department of a hospital	\$35	\$45
Home infusion and home injectable therapy services – Home infusion agency services	\$45	\$0
Home infusion and home injectable therapy services - Hemophilia home infusion services	\$45	\$0
Skilled Nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled Nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

SILVER 73 PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$6,300 per person / \$12,600 per family	\$7,250 per person / \$14,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$30 per person / \$60 per family
Tier 1 prescription drugs	\$15	\$16
Tier 1 prescription drugs (Mail)	\$45	\$48
Primary care office visits	\$35	\$45
Physician home visit	\$35	\$45
Other practitioner office visits	\$35	\$45
Physician or surgeon services in an inpatient facility	20%	30%

SILVER 73 PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Podiatric services	\$70	\$45
Abortion and abortion related services	20%	\$0
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0
Inpatient Facility services – Hospital services and stay	20%	30%
Inpatient facility services – Special transplant facility inpatient services	20%	30%
Inpatient Facility services – Physician inpatient services	20%	30%
Bariatric surgery services designated California counties – inpatient facility services	20%	30%
Bariatric surgery services designated California counties – Physician inpatient services	20%	30%
Other specialist care office visit	\$70	\$85
Urgent care	\$35	\$45
Acupuncture services	\$35	\$45
Laboratory Services – Laboratory center	\$40	\$50
Laboratory services – Outpatient Department of a Hospital (Laboratory Services Category)	\$40	\$50
X-ray and imaging services – Outpatient Department of a Hospital	\$85	\$90
X-ray and imaging services – Outpatient radiology center	\$85	\$90
Other outpatient diagnostic testing – Office location	\$85	\$90
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$90
Rehabilitative and habitative services – office location	\$35	\$45
Rehabilitative and habitative services – Outpatient department of a hospital	\$35	\$45
Home infusion and home injectable therapy services - Home infusion agency	\$40	\$0
Home infusion and home injectable therapy services - Hemophilia home infusion services	\$40	\$0
Skilled nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

SILVER 87 ON-EXCHANGE PPO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$2,850 per person / \$5,700 per family	\$3,000 per person / \$6,000 per family
Calendar-year pharmacy deductible	\$0 per person / \$0 per family	\$25 per person / \$50 per family
Tier 1 prescription drugs	\$5, pharmacy deductible does not apply	\$5, pharmacy deductible applies
Tier 2 prescription drugs	\$25, pharmacy deductible does not apply	\$25, pharmacy deductible applies
Tier 3 prescription drugs	\$45, pharmacy deductible does not apply	\$45, pharmacy deductible applies

SILVER 87 ON-EXCHANGE PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Tier 4 prescription drugs	15% up to \$150 per prescription, pharmacy deductible does not apply	15% up to \$150 per prescription, pharmacy deductible applies	
Tier 1 prescription drugs (Mail)	\$15, pharmacy deductible does not apply	\$15, pharmacy deductible applies	
Tier 2 prescription drugs (Mail)	\$75, pharmacy deductible does not apply	\$75, pharmacy deductible applies	
Tier 3 prescription drugs (Mail)	\$135, pharmacy deductible does not apply	\$135, pharmacy deductible applies	
Tier 4 prescription drugs (Mail)	15% up to \$450 per prescription, pharmacy deductible does not apply	15% up to \$450 per prescription, pharmacy deductible applies	
Physician or surgeon services in an inpatient facility	15%	25%	
Podiatric services	\$25	\$15	
Abortion and abortion-related services	15%	\$0	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0	
Inpatient Facility services - Hospital services and stay	15%	25%	
Inpatient Facility services – Special transplant facility inpatient services	15%	25%	
Inpatient Facility services – Physician inpatient services	15%	25%	
Bariatric surgery services designated California counties –Inpatient facility services	15%	25%	
Bariatric surgery services designated California counties – Physician inpatient services	15%	25%	
Home infusion and home injectable therapy services - Home infusion agency services	\$15	\$0	
Home infusion and home injectable therapy services - Hemophilia home infusion services	\$15	\$0	
Skilled Nursing Facility (SNF) services – Freestanding SNF	15%	25%	
Skilled Nursing Facility (SNF) services – Hospital based SNF	15%	25%	
Mental health and substance use disorder – Physician inpatient services	15%	25%	
Mental health and substance use disorder - Hospital services	15%	25%	
Mental health and substance use disorder - Residential care	15%	25%	

SILVER 94 PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Out-of-pocket Maximum	\$800 per person / \$1,600 per family	\$900 per person / \$1,800 per family	
Podiatric services	\$8	\$5	
Abortion and abortion-related services	10%	\$0	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0	
Home infusion and home injectable therapy services - Home infusion agency services	\$3	\$0	
Home infusion and home injectable therapy services - Hemophilia home infusion services	\$3	\$0	

Trio HMO Plans

	SILVER 70 TRIO HMO CHANGES	
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,750 per person / \$17,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$85 per person / \$170 per family
Tier 1 prescription drugs	\$15	\$16
Tier 2 prescription drugs	\$55	\$60
Tier 3 prescription drugs	\$85	\$90
Tier 1 drugs – Mail	\$45	\$48
Tier 2 drugs – Mail	\$165	\$180
Tier 3 drugs – Mail	\$255	\$270
Primary care office visits	\$35	\$45
Trio+ specialist care office visit	\$70	\$85
Other specialist care office visit	\$70	\$85
Physician home visit	\$35	\$45
Other practitioner office visits	\$35	\$45
Physician or surgeon services in an inpatient facility	20%	30%
Acupuncture services	\$35	\$45
Podiatric services	\$70	\$45
Abortion and abortion-related services	20%	\$0
Urgent care center services	\$35	\$45
Laboratory services – Laboratory center	\$40	\$50
Laboratory services – Outpatient department of a hospital	\$40	\$50
X-ray and imaging services – Outpatient radiology center	\$85	\$95
X-ray and imaging services – Outpatient department of a hospital	\$85	\$95
Other outpatient diagnostic testing – Office location	\$85	\$95
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$95
Rehabilitative and habilitative services – Office location	\$35	\$45
Rehabilitative and habilitative services – Outpatient department of a hospital	\$35	\$45
Inpatient facility services – Hospital services and stay	20%	30%
Inpatient Facility services – Special transplant facility inpatient services	20%	30%
Inpatient facility services – Physician inpatient services	20%	30%
Skilled Nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled Nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

SILVER 73 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Medical deductible	\$3,700 per person / \$7,400 per family	\$4,750 per person / \$9,500 per family
Out-of-pocket Maximum	\$6,300 per person / \$12,600 per family	\$7,250 per person / \$14,500 per family
Pharmacy deductible	\$10 per person / \$20 per family	\$30 per person / \$60 per family
Tier 1 prescription drugs	\$15	\$16
Tier 1 drugs – Mail	\$45	\$48
Primary care office visits	\$35	\$45
Trio+ specialist care office visit	\$70	\$85
Other specialist care office visit	\$70	\$85
Physician home visit	\$35	\$45
Physician or surgeon services in an inpatient facility	20%	30%
Other practitioner office visits	\$35	\$45
Acupuncture services	\$35	\$45
Podiatric services	\$70	\$45
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	20%	\$0
Urgent care center services	\$35	\$45
Laboratory services – Laboratory center	\$40	\$50
Laboratory services – Outpatient department of a hospital	\$40	\$50
X-ray and imaging services – Outpatient radiology center	\$85	\$90
X-ray and imaging services – Outpatient department of a hospital	\$85	\$90
Other outpatient diagnostic testing – Office location	\$85	\$90
Other outpatient diagnostic testing – Outpatient department of a hospital	\$85	\$90
Rehabilitative and habilitative services – Office location	\$35	\$45
Rehabilitative and habilitative services – Outpatient department of a hospital	\$35	\$45
Inpatient facility services – Hospital services and stay	20%	30%
Inpatient Facility services – Special transplant facility inpatient services	20%	30%
Inpatient facility services – Physician inpatient services	20%	30%
Skilled Nursing facility (SNF) services – Freestanding SNF	20%	30%
Skilled Nursing facility (SNF) services – Hospital based SNF	20%	30%
Mental health and substance use disorder – Office visit, including physician office visit	\$35	\$45
Mental health and substance use disorder – Physician inpatient services	20%	30%
Mental health and substance use disorder – Hospital services	20%	30%
Mental health and substance use disorder – Residential care	20%	30%

SILVER 87 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$2,850 per person / \$5,700 per family	\$3,000 per person / \$6,000 per family
Pharmacy deductible	\$0 per person / \$0 per family	\$25 per person / \$50 per family
Tier 1 prescription drugs	\$5, pharmacy deductible does not apply	\$5, pharmacy deductible applies

SILVER 87 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Tier 2 prescription drugs	\$25, pharmacy deductible does not apply	\$25, pharmacy deductible applies
Tier 3 prescription drugs	\$45, pharmacy deductible does not apply	\$45, pharmacy deductible applies
Tier 4 prescription drugs	15% up to \$150 per prescription, pharmacy deductible does not apply	15% up to \$150 per prescription, pharmacy deductible applies
Tier 1 drugs – Mail	\$15, pharmacy deductible does not apply	\$15, pharmacy deductible applies
Tier 2 drugs – Mail	\$75, pharmacy deductible does not apply	\$75, pharmacy deductible applies
Tier 3 drugs – Mail	\$135, pharmacy deductible does not apply	\$135, pharmacy deductible applies
Tier 4 drugs – Mail	15% up to \$450 per prescription, pharmacy deductible does not apply	15% up to \$450 per prescription, pharmacy deductible applies
Physician or surgeon services in an inpatient facility	15%	25%
Podiatric services	\$25	\$15
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	15%	\$0
Inpatient facility services – Hospital services and stay	15%	25%
Inpatient Facility services – Special transplant facility inpatient services	15%	25%
Inpatient facility services – Physician inpatient services	15%	25%
Skilled Nursing facility (SNF) services – Freestanding SNF	15%	25%
Skilled Nursing facility (SNF) services – Hospital based SNF	15%	25%
Mental health and substance use disorder – Physician inpatient services	15%	25%
Mental health and substance use disorder – Hospital services	15%	25%
Mental health and substance use disorder – Residential care	15%	25%

SILVER 94 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$800 per person / \$1,600 per family	\$900 per person / \$1,800 per family
Podiatric services	\$8	\$5
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	10%	\$0

BRONZE 7500 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$8,350 per person/ \$16,700 per family	\$8,750 per person/ \$17,500 per family
Podiatric services	\$80	\$70
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	\$150	\$0

MIRRORED PLANS

PPO Plans

PLATINUM 90 PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Podiatric services	\$30		\$15
Abortion and abortion related services	10%		\$0
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies		\$0, deductible does not apply

GOLD 80 PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family		\$8,550 per person / \$17,100 per family
Tier 2 prescription drugs	\$55		\$60
Tier 3 prescription drugs	\$80		\$85
Tier 2 prescription drugs (Mail)	\$165		\$180
Tier 3 prescription drugs (Mail)	\$240		\$255
Physician or surgeon services in an inpatient facility	20%		30%
Podiatric services	\$65		\$35
Abortion and abortion related services	20%		\$0
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies		\$0, deductible does not apply
Inpatient Facility services – Hospital services and stay	20%		30%
Inpatient facility services – Special transplant facility inpatient services	20%		30%
Inpatient Facility services – Physician inpatient services	20%		30%
Bariatric surgery services designated California counties – Inpatient facility services	20%		30%
Bariatric surgery services designated California counties – Physician inpatient services	20%		30%
Radiology and nuclear imaging services - Outpatient radiology center	20%		25%
Radiology and nuclear imaging services - Outpatient department of a Hospital	20%		25%
Skilled nursing facility (SNF) services - Freestanding SNF	20%		30%
Skilled nursing facility (SNF) services – Hospital based SNF	20%		30%
Mental health and substance use disorder – Physician inpatient services	20%		30%
Mental health and substance use disorder – Hospital services	20%		30%
Mental health and substance use disorder – Residential care	20%		30%

BLUE SHIELD MINIMUM COVERAGE PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Medical deductible	\$8,700 per person / \$17,400 per family	\$9,100 per person / \$18,200 per family	
Out-of-pocket Maximum	\$8,700 per person / \$17,400 per family	\$9,100 per person / \$18,200 per family	
Podiatric services	\$0	\$0, FDC applies	
Abortion and abortion related services	\$0, deductible applies	\$0, deductible does not apply	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0, deductible does not apply	

BRONZE 60 HDHP PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0, deductible does not apply	

BRONZE 60 PPO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Podiatric services	\$95	\$65	
Abortion and abortion related services	40%, deductible applies	\$0, deductible does not apply	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0, deductible does not apply	

SILVER 2600 HDHP PPO			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Abortion and abortion-related services	35%, deductible applies	\$0, deductible applies	
Out of Network Doctors: Abortion and abortion-related services (changed from Physician services for pregnancy termination)	50%, deductible applies	\$0, deductible applies	

Trio HMO Changes

PLATINUM 90 TRIO HMO CHANGES			
	2022	2023	
	IN-NETWORK	IN-NETWORK	
Podiatric services	\$30	\$15	
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	\$25	\$0	

GOLD 80 TRIO HMO CHANGES		
	2022	2023
	IN-NETWORK	IN-NETWORK
Out-of-pocket Maximum	\$8,200 per person / \$16,400 per family	\$8,550 per person / \$17,100 per family
Tier 2 prescription drugs	\$55	\$60
Tier 3 prescription drugs	\$80	\$85
Tier 2 drugs – Mail	\$165	\$180
Tier 3 drugs – Mail	\$240	\$255
Podiatric services	\$65	\$35
Abortion and abortion-related services (changed from Physician services for pregnancy termination)	\$40	\$0
Radiology and nuclear imaging services – Outpatient radiology center	\$150	\$75
Radiology and nuclear imaging services – Outpatient Department of a Hospital	\$150	\$75
Outpatient Facility services – Ambulatory Surgery Center	\$300	\$150
Outpatient Facility services – Outpatient Department of a Hospital: Surgery	\$300	\$150
Inpatient facility services – Hospital services and stay	\$600 per day up to 5 days	\$350 per day up to 5 days
Inpatient Facility services – Special transplant facility inpatient services	\$600 per day up to 5 days	\$350 per day up to 5 days
Skilled Nursing facility (SNF) services - Freestanding SNF	\$300 per day up to 5 days	\$150 per day up to 5 days
Skilled Nursing facility (SNF) services – Hospital based SNF	\$300 per day up to 5 days	\$150 per day up to 5 days
Mental health and substance use disorder – Hospital services	\$600 per day up to 5 days	\$350 per day up to 5 days
Mental health and substance use disorder – Residential care	\$600 per day up to 5 days	\$350 per day up to 5 days

SPECIALTY PLAN UPDATES

Don't forget to [download the new 2023 Specialty Plans at a Glance brochures](#) on Broker Connection. It is available in English, Spanish, Chinese, Korean, and Vietnamese. You can also order print versions in English and Spanish through the [online ordering site](#).

Complete Your Clients' Coverage with Dental and Vision

Encourage your clients to manage their total health. Help them get the dental and vision coverage they need to receive care that can detect serious issues early, resulting in better health outcomes. Blue Shield offers affordable care starting at \$13.40 for our dental plans and \$6.90 for vision. And, we have streamlined the life application and submission process to help your clients round out their coverage with just a few clicks.

Ensure smooth continuous coverage by enrolling your clients in auto-pay for each of their dental and vision plans when you enroll them for medical auto-pay.

Dental plans

Make sure your clients' coverage is complete with a Blue Shield of California HMO or PPO dental plan. We have a variety of HMO and PPO plans, for both on- and off-exchange consumers. All plans offer \$0 copays for exams, cleanings, and X-rays. Most plans offer orthodontic coverage, as well as implants for all ages (including members 65 years and older). HMO plans have no calendar-year benefit maximum, while PPO plans offer up to \$2,000 in benefits per year per member.

If your client had dental coverage with another carrier and meets certain criteria, all waiting periods for their new Blue Shield dental plan can be waived. Just have your client submit proof of their prior coverage with the Blue Shield application.

Dental Plan Changes

Effective January 1, 2023, the Dental HMO 12-month waiting period for orthodontia services will be removed.

Vision* plans

Starting at \$6.90 – our vision plans are a great value to your clients, offering them benefits like exams, contact lens and frame allowances with the largest vision network in California.

Life insurance

Help your clients prepare for the unexpected by purchasing an Individual Term Life* and Accidental Death and Dismemberment* (AD&D) policy ranging from \$10,000 to \$100,000 in coverage.

The digital DocuSign® application lets you or your client complete and submit the application with just a few clicks – online from start to finish. No payment is required at the time of application. Once approved, members will be billed for their premium. The application and age-banded rates can be accessed on our life insurance home page.

Visit our life insurance page to start protecting your clients and their families today.

And to make things even easier, we've consolidated all our [dental, vision and life insurance forms and applications](#) for you on one page.

* Underwritten by Blue Shield of California Life & Health Insurance Company.

TOOLS TO SIMPLIFY YOUR SALES

We're committed to investing in tools and improving processes that help you grow your business and minimize your administrative burden.

Application status and initial payments

It's easy to check the status of your Blue Shield applications. You can view both on-exchange and off-exchange applications using our Application Status tool on Broker Connection. Just log in to Broker Connection, click "Individual & Family from the top navigation, and select "View All Submitted Applications."

If your on-exchange clients need to make their initial payment, they can do so online at [blueshieldca.com/](http://blueshieldca.com/PaymentBSC) **PaymentBSC** or by calling us at **(855) 836-9705**.

Coming soon! - Improve your Efficiency with Share a Quote

It will soon be easier than ever to create, assign and send a quote to your customers. Our new Share a Quote feature, which will be available on the **Broker Dashboard**, allows you to include up to 4 medical plans and up to 4 dental and/or vision plans on each quote. Then, send out the live quotes via email through the Broker Connection portal, or via downloadable pdf. Quotes are then trackable via our quote dashboard. Increase your sales by knowing in one dashboard where to spend your time on follow-up.

Manage Your Back Office Easily with our Broker Connection Account Management Tool

Appointed primary agents (generally the Tax ID owner, principal agent, or designated principal agent) can now open new user accounts, assign roles, grant permissions, and customize account access to Broker Connection. User account functionality is determined by role-based permissions and easily set or changed at any time.

Maximize your sales with our webinars

Client renewal webinars:

Let us help educate your existing clients on plan and policy changes so you can focus on selling and growing your business.

Our informational renewal webinars will guide your Blue Shield clients through plan and policy changes as well as how they can use self-service tools to renew their plan for 2023. Check our cycle page and broker newsletters for the complete list of webinar dates and times.

Open enrollment broker selling webinars:

Keep current with our plans and get the latest competitive and market insights at one of our [broker sales webinars](#). Our expert sales team will share important plan and pricing information, regional and competitive insights, as well as exciting news about commission and bonus programs. This is the best place to get up to speed, get your questions answered, and get selling!

Improved customized flyers that work

We realize that success doesn't just arrive at your door. It takes hard work and smart work. We're ready to help with proven customized flyers to streamline your marketing and sales efforts. We have upgraded our customization capabilities with our new Shield on Demand collateral repository. Log into Broker Connection, click on the [Shield on Demand](#) link, find your flyer and customize with your details for crisp, clean materials ready to email to clients. Get started today here: [Sales Resources and Collateral](#).



We've been serving Californians for more than 80 years –
and we couldn't do it without you.

Thank you for all your hard work in 2022. We're
focused on the future and ready to help you grow at
[Broker Connection](#).